



# Sharing Data Across Health and Homeless Systems of Care



**Michelle Schneidermann**  
*California Health Care  
Foundation*



**Julie Silas, Homebase**



**Cristi Iannuzzi, Alameda County Care Connect**



**Grant Tuioti, The Coalition of Homeless  
Service Providers, Monterey Bay**



California  
Health Care  
Foundation

**CHCF is an independent, nonprofit philanthropy. We work to improve the health care system for Californians with low incomes and those not well-served by the status quo.**

**Our big priorities:**

1. Get everyone covered
2. Deliver care better
3. Make care just





# Homebase

ADVANCING SOLUTIONS TO HOMELESSNESS

- ❖ Subject matter expertise in homelessness and cross-system coordination
- ❖ Work at the federal, state, and local levels with an emphasis in California
- ❖ Assist communities and agencies to establish systems and programs needed to help people experiencing homelessness achieve housing stability and improve health and wellness

**Innovative Thinking & Solutions**

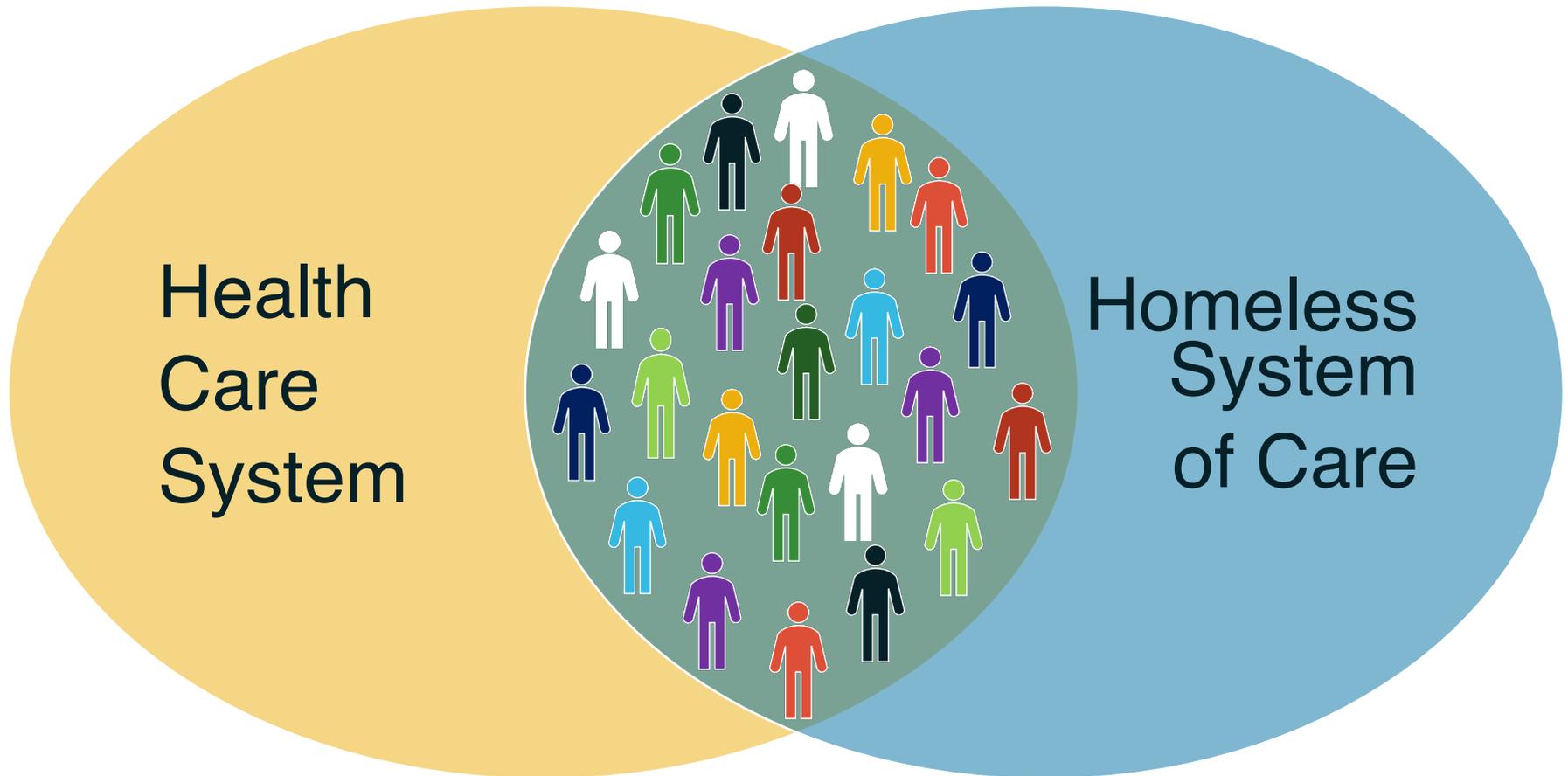
**Transformational | Strategic | Practical**

**“People who are homeless have higher rates of illness and die on average 12 years sooner than the general U.S. population.”**

(National Health Care for the Homeless Council  
Fact Sheet, February 2019)

# Cross Sector Collaboration: Health Care and Homeless Sectors

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# Breaking Down Silos



**Breaking Down Silos:**  
How to Share Data to Improve the Health of  
People Experiencing Homelessness

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**AUTHORS**  
Erika Siao and Julie Silas, JD

- Data sharing has been pivotal in breaking down silos and improving coordination between the two systems to better address clients' needs.
- Despite dedicated and committed partnerships in place for cross-sector collaboration, data sharing efforts have not occurred without challenges.
- Communities have raised a common set of barriers they have faced, including privacy issues, relationships and collaboration, interoperability, and data quality.
- While there are no uniform ways to address the common challenges, communities have creatively employed strategies and taken advantage of opportunities to continue pushing forward data sharing efforts. These opportunities have proven most effective when tailored to each community's own needs, structures, relationships, and motivations.

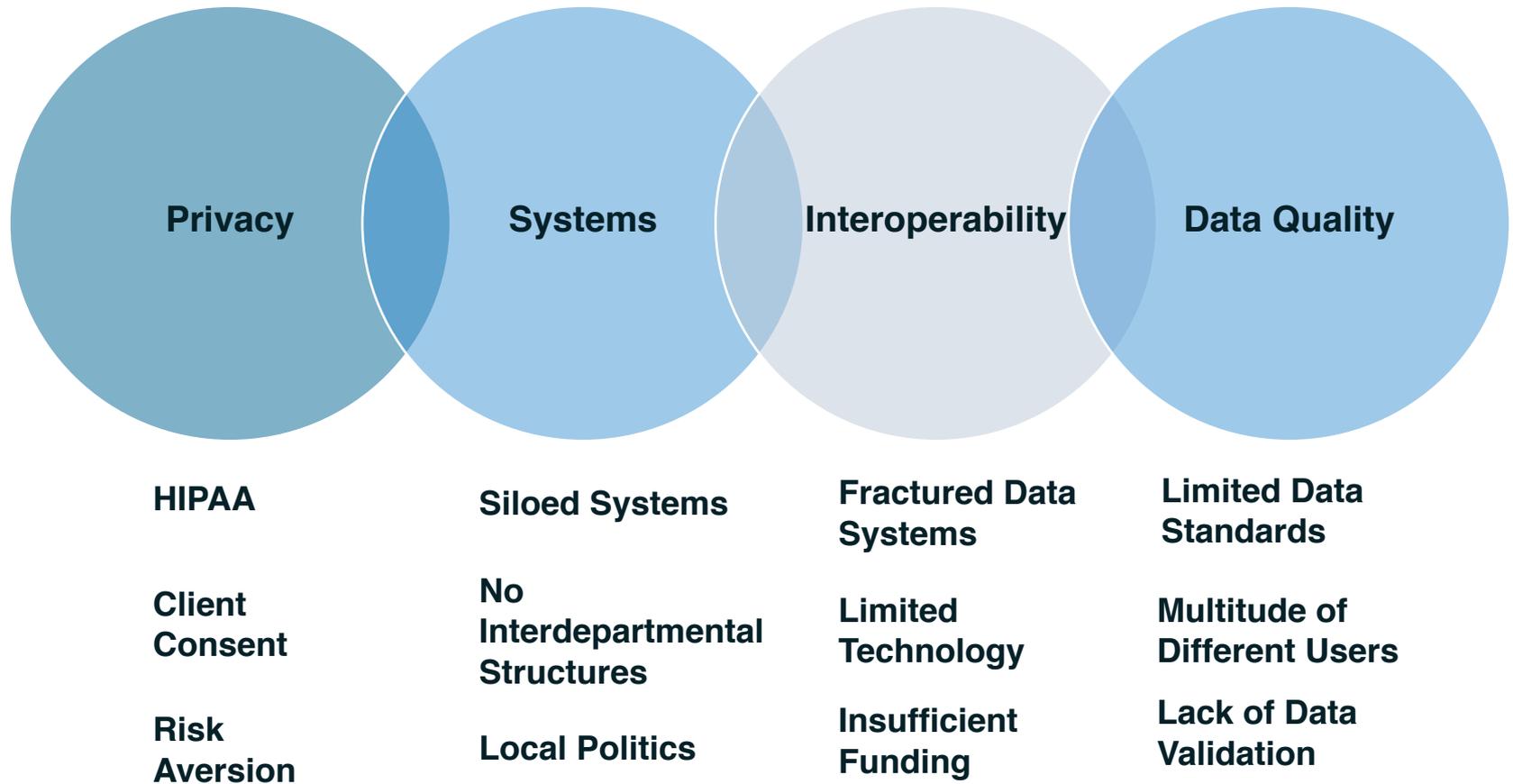
# Cross Sector Data Sharing: Key Benefits

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# Key Challenges in Cross-Sector Collaboration

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# Key Opportunities

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Solicit  
Participant  
Consent

Engage  
Outside Legal  
Counsel

Define  
Parameters of  
Collaboration

Communicate  
a Clear Vision  
& Purpose

Foster Cross-  
Departmental  
Relationships

Identify  
Specific Roles  
&  
Responsibilities

Center Racial  
Equity and  
Systems  
Change

Create a  
Central  
Repository of  
Data

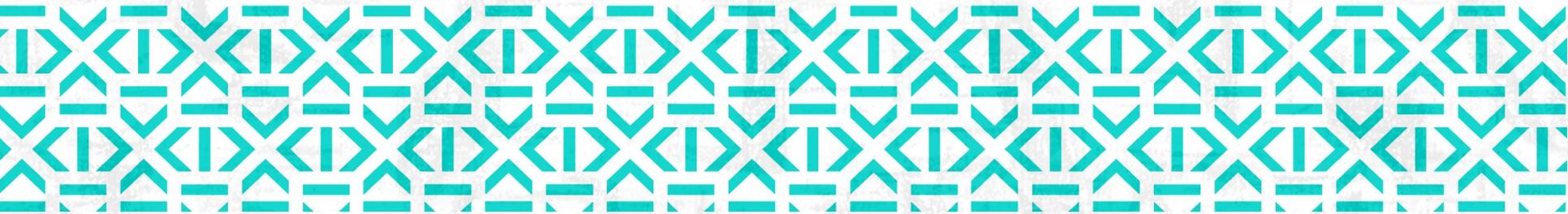
Enhance  
Technological  
Functionality

Develop a  
Shared  
Platform & Use  
Cases

Initiate  
Education &  
Training

Start out Small

# Emerging Stories: “Communities in Action”



# Communities in Action

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**Marin County** developed an “universal release of information (ROI)” that involved 42 entities from a wide variety of provider partners. As a result, on an ad hoc basis, providers can pick up the telephone and have a client-specific discussion across different parts of the human services system.

**Sonoma County** hired outside privacy experts and were able to get the county Board of Supervisors to adopt a resolution that applied across all departments in support of cross-sector data sharing. The resolution sent a policy message that the county as a whole endorsed cross-departmental data sharing.

Successful data sharing efforts across multiple agencies are based on trusted partnerships. In **Seattle and King County, Washington**, the public health department joined with the public housing authorities to lead a linkage of health care and housing data based on a shared fundamental belief that housing is health.

**Orange County** had a data sharing relationship with Cal Optima (a Medicaid health plan) through the Whole Person Care Pilot for a number of years that allowed them to collaborate around a shared set of clients. The county recently initiated efforts to expand data sharing. They established a governance committee around their new data sharing platform. The governance committee includes all the agency members involved in data sharing to advise on privacy, security, and compliance.

# Communities in Action

**Santa Cruz County's** WPC program developed a cross-sector care coordination tool that both health care and other service providers can access called "Together We Care." Health care sector stakeholders expressed concern about signing on to yet another platform. To resolve some of the skepticism, they created single sign-on functionality in the data platform so health care providers could easily view care coordination information.

**Contra Costa County's** Health Care for the Homeless Program and the Health, Housing, and Homeless Division undertook efforts to review HMIS data and validate many of the data elements, to match it to the data in the health care system. With strong data matching, not only were they able to collaborate more effectively for their WPC program, when faced with COVID-19, they shared data across the two sectors to quickly identify the most vulnerable in the homeless community to test or temporarily house.

For the **City of Sacramento**, it was clear early on that they could not undergo bidirectional data sharing through their shared care platform. Rather than give up, they worked with service providers to determine the bare minimum of client information someone on a care team would need to know: where the patient is and what their needs are. They then revised many of the fields in the shared care plan over time to decrease the data entry needed while still providing all users access to key information about a client's care.

When **Ventura County** first initiated data sharing, people experiencing homelessness were wary about signing a broad ROI. To address concerns, the County educated and trained direct service staff about privacy rules and the intentions of data sharing. They went through a series of exercises so staff could adequately respond to client concerns. With better information, staff built trust with clients who could benefit from data sharing and collaboration between the health care and homeless systems.



# Alameda County Social Health Information Exchange

# Collaboration on a new level

**Individual organizations** often have access to one or two data systems.

**AC SHIE** brings together data feeds from multiple sectors that is shown in the **CHR** to flesh out a more Whole Person perspective.



# Definitions of Systems

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## **Social/Health Information Exchange or SHIE**

- A community of organizations sharing data under a **set of agreements** (i.e. according to federal and state regulations), and
- A platform to **keep data secure, manage who can see what, and match identity** when different data streams describe one person.

## **Community Health Record or CHR**

- The first tool drawing from the SHIE rolled out in September 2019
- The CHR allows providers to view a thin, timely slice of information on client utilization, diagnosis, and who else is working with them.
- 30 organizations, 100+ programs, and 1000+ users have been onboarded

# Data Security and Privacy

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## The Documents

- **Data Sharing Agreement (DSA)**
  - ✓ All data contributing and receiving organizations have signed a mostly identical agreement clarifying how the data exchange will operate and to maintain common understanding across all those involved
- **Information Sharing Authorization (ISA)**
  - ✓ The consent integrated into the CHR for a consumer to agree to share more data with more providers for more effective care coordination, including those that are not HIPAA-covered

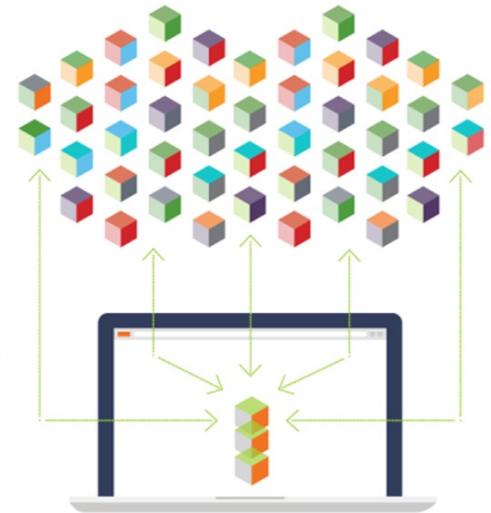
# “Best of Breed” technology solutions

## Goals:

- Patient matching across diverse sectors and data standards
- Privacy and Security:
  - Providing appropriate access: Attribution
  - Integration of patient consent

## Solutions:

- Social Health Information Exchange – SHIE = Thrasys + Collective Medical Technology + Verato
- Community Health Record – CHR = Provider portal with curated consumer information and consent management



# Alameda County CHR



Curated, actionable information designed for **inter-agency**  
**and inter-sector** care coordination to promote  
**real-time action.**

# What data are available?

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- Care Team Members and Social Contacts
- Medi-Cal coverage status and health plan
- Clinical encounters, programs, providers, diagnoses, and assigned primary care medical home
- Mental Health services (including County hospital and crisis), programs and utilization
- Housing programs and Coordinated Entry System information from HMIS
- Current County Jail incarceration
- Public benefit information from Social Services Agency, including CalWorks, CalFresh, General Assistance, and Medi-Cal Re-enrollment due date
- HIV test results, if opted-in on the ISA
- Detailed hospital info including discharge summaries



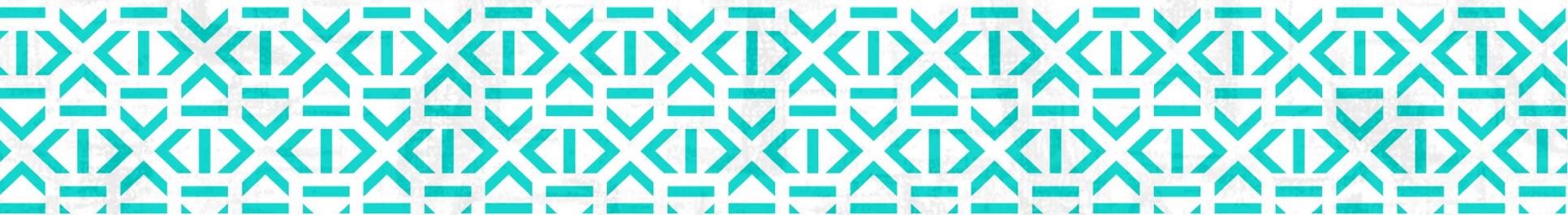
# Monterey Bay San Benito Continuum of Care



Questions?

# Breaking Down Silos: How to Share Data to Improve the Health of People Experiencing Homelessness

Homebase's health care webpage:  
[www.homebaseccc.org/healthcare](http://www.homebaseccc.org/healthcare)



# Thank you!

Michelle Schneidermann: CHCF [mschneidermann@chcf.org](mailto:mschneidermann@chcf.org)

Julie Silas: Homebase [julie@homebaseccc.org](mailto:julie@homebaseccc.org)

Cristi Iannuzzi: Alameda County [cristi@candcadvisors.com](mailto:cristi@candcadvisors.com)

Grant Tuioti: Monterey Bay/San Benito County [gtuioti@chsp.org](mailto:gtuioti@chsp.org)