

# **Institute for Community Alliances**

## **Alaska Homeless Management Information System (AKHMIS)**

### **Interagency Data Sharing & Coordinated Services Agreement**

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The following agencies hereby enter into an Interagency Data Sharing & Coordinated Services Agreement:

- **Fairbanks Rescue Mission**
- **No Limits**
- **Salvation Army, Fairbanks**
- **Fairbanks Youth Advocates**
- **Restore Incorporated**
- **Interior Alaska Center for Non-Violent Living (Burch House and Our House only)**

The Fairbanks Network of Homelessness Providers utilizes a computerized record-keeping system that captures information about people experiencing homelessness. This system, Alaska Homeless Management Information System (AKHMIS), is administered by the Institute for Community Alliances. AKHMIS creates an unduplicated count of individuals and households experiencing homelessness, and develops aggregate information that will assist in developing policies to end homelessness. In addition, the system allows agencies, if they agree, to share information electronically about clients, including their service needs, in order to better coordinate services.

Client-level information can only be shared between agencies that have established an Interagency Data Sharing & Coordinated Services Agreement, and have received written consent from any given client agreeing to share his or her personal information with other agencies. The agency receiving the client written consent has the ability to “share” that client’s information electronically through the system with collaborating agencies.

This process can benefit clients by reducing duplicate intakes. Intake and exit interviews can be shared, with written consent, between collaborating agencies. By establishing this Agreement, the collaborating agencies agree that within the confines of the Fairbanks Network of Homelessness Providers and the HMIS software:

1. Acknowledge that in transmitting, receiving, storing, processing, or otherwise dealing with any client-protected information, they are fully bound by state and federal regulations governing confidentiality of patient records, including the Federal Law of Confidentiality for Alcohol and Drug Abuse Patients (42 CFR, Part 2) and the Health Insurance Portability and Accountability Act of 1996 (‘HIPAA’, 45 CFR, Parts 160 & 164), and cannot use or disclose the information except as permitted or required by this agreement or by law.
2. Acknowledge that they are prohibited from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by state and federal regulations governing confidentiality of patient records, including the Federal Law of Confidentiality for Alcohol and Drug Abuse Patients (42 CFR, Part 2) and the Health Insurance Portability and Accountability Act of 1996 (‘HIPAA’, 45 CFR, Parts 160 & 164). A general authorization for the release of information is NOT sufficient for this purpose.
3. Agree to use appropriate safeguards to prevent the unauthorized use or disclosure of the client-protected information.

4. Agree to notify each of the other participating agencies, within one business day, of any breach, use, or disclosure of client-protected information not provided for by this agreement.
5. Agree to adhere to the standards outlined within the Health Insurance Portability and Accountability Act of 1996 ('HIPAA', 45 CFR, Parts 160 & 164) which provides consumers access to their protected information, (164.524), the right to amend protected information (164.526), and receive an accounting of disclosures of protected information (164.528).
6. Information that is shared with written consent will not be used to harm or deny any services to a client.
7. The Agency shall not solicit or input information from clients into the Coordinated Intake Network database (AKHMIS) unless it is essential to provide services.
8. Clients have the right to request information about who their information was released to in the Fairbanks Network of Homelessness Providers.
9. Agree to notify each of the other participating agencies of their intent to terminate their participation in this Agreement.
10. Agree to resist, through judicial proceedings, any judicial or quasi-judicial effort to obtain access to client-protected information pertaining to consumers, unless expressly provided for in state and / or federal regulations.
11. A violation of the above will result in immediate disciplinary action.

Whereby the above-named Agencies agree to share, where applicable, the following protected personal information via the Fairbanks Network of Homelessness Providers (electronic, web-enabled):

- Client Full Name, including any Alias entered into AKHMIS
- Client Social Security Number
- Client Date of Birth
- Entry / Exit Assessment and Information
- Case Manager Information
- Incident History
- Client Service Transactions History
- Client Program Goals
- Client Photo

***The signatures below constitute acceptance of the "Data Sharing & Coordinated Services Agreement":***

DocuSigned by:  
*Rodney Gaskins*  
7A5CE37913B8484...

6/14/2017

Rodney Gaskins

Fairbanks Rescue Mission

DocuSigned by:  
*Kelvin Lee*  
BFBA6E39F3954D0...

6/16/2017

Kelvin Lee

No Limits Inc.

DocuSigned by:  
*Marylee Bates*  
3B8131D482764AD...

6/13/2017

Marylee Bates

Fairbanks Youth Advocates

DocuSigned by:  
*Brenda Stanfill*  
9B18F553E35D4E4...

6/16/2017

Brenda Stanfill

Interior Alaska Center for Non-Violent Living

DocuSigned by:  
*Shelissa Thomas*  
2B5B713AD469444...

6/20/2017

Shelissa Thomas

Restore Incorporated Reentry Program

DocuSigned by:  
*C Joseph Murray*  
A6F81E161599444...

6/15/2017

C Joseph Murray

The Salvation Army, Fairbanks Corps