COMMISSION ON IMPROVING THE STATUS OF CHILDREN IN INDIANA

DATA SHARING & MAPPING TASK FORCE

INFORMATION SHARING SURVEY

February 2016

Contents

Executive Summary

In August of 2015, the Commission on Improving the Status of Children in Indiana conducted a survey of agencies that request and share information related to children's well-being; 1,590 individuals from a variety of agencies responded to the survey.

Respondents believe that both obtaining and sharing information on children and their families can be vital in creating a better understanding of the child and his/her circumstances, potentially leading to better and more effective services. Respondents also indicated that information sharing can promote collaboration across service providers, increase communication, decrease duplication of efforts, and ensure a better continuum of care.

While most respondents indicated that they are able to obtain information that they request (and generally share information that is requested from them), provided the proper authority or releases of information are in place, there were still a number of respondents who identified real barriers to obtaining or sharing information Such barriers create significant challenges to determining the best placement, course of action, or appropriate set of services for a child, and to ensuring a child's safety and well-being.

This report was made possible in collaboration with Casey Family Programs, whose mission is to provide, improve—and ultimately prevent the need for—foster care. The findings and conclusions presented in this report are those of the authors alone, and do not necessarily reflect the opinions of Casey Family Programs.

Key findings of the survey include:

A number of benefits result both from receiving information from other agencies and from sharing information with other agencies:

- Receiving and sharing information helps to create a more holistic picture and better understanding of the child and helps to more effectively meet the needs of the child and family. It also promotes collaboration across agencies to work toward the common goal of providing the most effective and efficient services for children and families.

Respondents cited barriers to receiving information from and sharing information with other agencies:

- Confidentiality requirements under laws such as HIPAA and FERPA or lack of parental consent were the most frequently mentioned reasons why agencies cannot receive data or do not share data.
- Inconsistent agency policies, lack of staff knowledge of what information can be shared, poor relationships between agencies, and lack of staff time were also mentioned as barriers to both sharing and receiving data.

System professionals identified several types of information they would like to receive or share but currently cannot due to barriers or restrictions:

- Respondents especially indicated that ability to more readily access law enforcement records, Department of Child Services reports, medical records, and mental health records would be helpful.
- Respondents indicated that they would find it beneficial to be able to more easily share information with schools, probation offices, DCS, and medical or mental health providers.

There are a variety of mechanisms/agreements by which agencies either obtain or share information:

- Written consent from parents and court order are the two most common mechanisms by which data are both shared and received, followed by informal agreements between agencies and mandates by existing data sharing laws.
- Only a small percentage of respondents indicated formal agreements between agencies or Memoranda of Understanding (MOUs) as reasons for receiving or sharing data.

Recommendations

Based on survey findings and suggestions provided by respondents, the Data Sharing and Mapping Task Force recommends the following:

Reduce Information Sharing Barriers Caused by Lack of Knowledge

- Provide guidance to agencies in the form of training materials, training protocols, guidance documents, or toolkits about what types of information can be shared, with which agencies, and in which circumstances.
- Consider incentivizing agencies to provide ongoing training to staff on information sharing laws, policies, and regulations, including applicable exceptions to confidentiality laws. Recommend that agencies familiarize staff with existing information sharing agreements and protocols on a regular basis.

Reduce Information Sharing Barriers Caused by Inconsistencies across Agencies, Poor Agency Relationships, or Inconsistent Individual Decision Making

- Explore the possibilities of creating state-level MOUs or information sharing agreements between agencies that can be shared with county and regional offices for consistent usage. Ensure that these MOUS are widely shared with regional and local offices and that staff are properly trained on following the protocols delineated in the agreements.
- Research ways to further build bridges and collaboration across agencies to promote information sharing in a secure manner. Provide communication to agencies on the ways in which information sharing can benefit both the agency and the families and children served.

Reduce Information Sharing Barriers Caused by Delays in Sharing Information and Time Needed to Fulfill Requests

- Consider providing recommendations, guidance, or training on creating efficient mechanisms for storing information, and consistent methods for putting information and data together to cut down on the amount of time necessary for compilation. Explore the possibility of leveraging technology for information sharing.

- Explore the possibility of a universal consent form. In many cases, time is of the essence in obtaining information to assist in making case management decisions or for client advocacy. Reducing bureaucracy and agency differences, while at the same time maintaining confidentiality, may help reduce delays in legitimate access to information.

Information Sharing Survey: Commission on Improving the Status of Children in Indiana

In August of 2015, the Data Sharing and Mapping Task Force of the Commission on Improving the Status of Children in Indiana conducted a survey. The survey was designed to collect information from a variety of agencies in Indiana to identify the types of information, related to children's well-being, safety, and security, that agencies request and/or share, and from where the information are requested/shared. The survey also collected information on perceived reasons for, and barriers to, information sharing, and it identified perceptions of why and how sharing may be beneficial to agencies. Finally, the survey asked respondents what types of information they would like to obtain or share but are not currently able to, as well as any recommendations for policy changes that may facilitate information sharing.

Survey Description

The survey consisted of three sections. The first section asked respondents about information they **request.** Respondents were asked to identify the agencies from which they request information; the types of information they request from these agencies; the types of information they receive from these agencies; and under what type of mandate or agreement they believed they received information. Part one of the survey also asked respondents about their perceptions why an agency might not share information with them. Finally, respondents were asked what benefits they receive as a result of obtaining information from the agencies, and which types of information they would like to receive but currently do not.

The second section of the survey asked respondents about information they **share**. Respondents were asked to identify the agencies with which they share information; the types of information that agencies request from them; the types of information they actually share; and under what type of mandate or agreement they share the information. Part two of the survey also asked respondents to indicate why they do not share information with another agency or individual. Respondents were asked to indicate their perceptions of the benefits of sharing information with other agencies, and what additional information they would like to share but cannot.

Part three of the survey asked respondents to identify additional, general information-sharing challenges that they see and ways in which they believe these challenges could be alleviated. Finally, the survey asked respondents for any additional comments or general information.

Survey Methodology

The survey of system professionals was conducted using a web-based methodology. A survey link (created through Survey Monkey) was sent to agency representatives via email; the message invited recipients to respond to the survey. Survey results were then downloaded and analyzed using a combination of quantitative and qualitative analysis techniques. Descriptive analysis was used for quantitative data. For qualitative data (open-ended responses), responses were reviewed using thematic analysis, grouping related responses into themes.

Respondent Types

A total of 1,590 individuals responded to the survey. Respondents represented a variety of agencies, but the vast majority were from child welfare. Three quarters of respondents worked in child welfare (74.5 percent, n=1,182), followed by probation (seven percent, n=115), education (six percent, n=95), and mental health/substance abuse (six percent, n=88). Only 50 respondents represented Guardians ad litem/CASAs (three percent); 32 represented prosecution (two percent); 17 represented defense (one percent); and 7 represented detention centers (less than one percent).
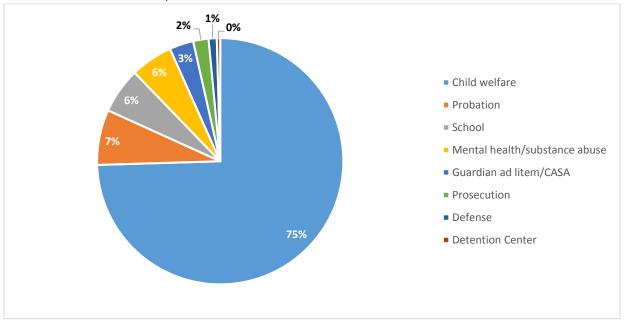
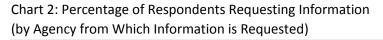Chart 1: Distribution of Respondents' Professional Roles
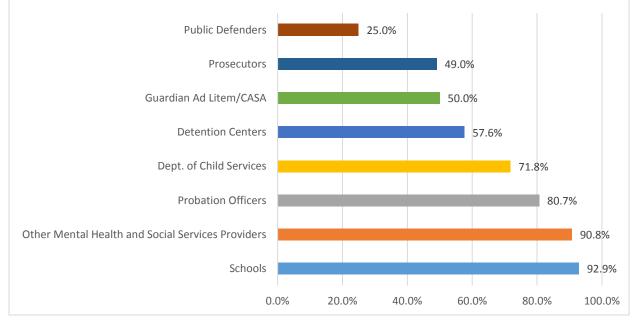

Survey Part 1: Requesting Information

As indicated, Part 1 of the survey focused on questions related to the types of information that respondents **request** from other agencies.

Types of Information and Agencies from Which Respondents Request Information

Respondents were asked to select from a list of agencies and types of information to indicate what they typically request, and from which agencies. Types of agencies from which information is requested included a) prosecutors; b) public defenders; c) probation officers; d) detention centers; e) Guardians ad litem/CASA (Court Appointed Special Advocate); f) Department of Child Services; g) other mental health and social service providers; and h) schools. Types of information requested included: a) judicial case records; b) child welfare case records; c) Department of Correction case records; d) medical records; e) mental health records; f) substance abuse records; and g) education records.

At least one respondent indicated requesting information from all of the agencies listed in the survey. Respondents were most likely to request information from schools (93 percent indicated requesting some type of information), followed by other mental health and social services providers (91 percent) and probation officers (81 percent). Seventy-two (72) percent of respondents indicated requesting some type of information from the Department of Child Services. In contrast, only 25 percent of respondents

indicated requesting some type of information from public defenders; 49 percent from prosecutors; and 50 percent from guardians ad litem/CASAs.

Chart 2: Percentage of Respondents Requesting Information
(by Agency from Which Information is Requested)

Prosecutors: Of those requesting information from Prosecutors (n=537), the vast majority (74 percent) request judicial case records, followed by Department of Correction case records (31 percent) and child welfare case records (19 percent).

Public Defenders: Of those requesting information from Public Defenders (n=261), over half (58 percent) request judicial case records; 26 percent request Department of Correction case records; and 23 percent request child welfare case records.

Probation Officers: Sixty (60) percent of those requesting information from Probation Officers (n=926) request judicial case records. Fifty (50) percent request Department of Correction case records, and 39 percent request substance abuse records.

Detention Centers: Forty-five (45) percent of those requesting information from Detention Centers (n=620) request Department of Correction case records. Thirty-six (36) percent request judicial case records, and 30 percent request mental health records.

Guardians ad Litem/CASAs: Of those requesting information from Guardians ad Litem/CASAs (n=519), 44 percent request child welfare case records; 22 percent request judicial case records; and 17 percent request mental health records.

Department of Child Services: Eighty-seven (87) percent of those requesting information from the Department of Child Services (n=811) request child welfare case records. Forty-four (44) percent request mental health records, and 41 percent each request medical records or substance abuse records.

7

Other Mental Health and Social Service Providers: Many respondents—1,061—report requesting records from other mental health and social service providers. Of those, 92 percent request mental health records; 70 percent request substance abuse records; and 47 percent request medical records.

Schools: Of the 1,089 respondents who request information from schools, 96 percent request education records. Nine percent request medical records and nine percent request mental health records.

The table below identifies the top three types of information requested from each type of agency, based on respondents indicating that they request information from the listed agency. (For example, of the 537 respondents who indicate that they request information from prosecutors, 74 percent request judicial case records).
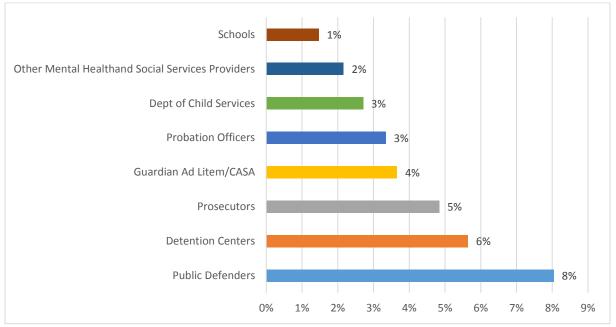
Table 1: Top Three Types of Information ***Requested*** by Agency

Agency Type	Type of Information/Information Requested		
	Most common	**Second most common**	**Third most common**
Prosecutors	Judicial case records (74%)	DOC case records (31%)	Child welfare case records (19%)
Public defenders	Judicial case records (58%)	DOC case records (26%)	Child welfare case records (23%)
Probation officers	Judicial case records (60%)	DOC case records (50%)	Substance abuse records (39%)
Detention centers	DOC case records (45%)	Judicial case records (36%)	Mental health records (30%)
Guardian ad Litem/CASA	Child welfare case records (44%)	Judicial case records (22%)	Mental health records (17%)
Dept. of Child Services	Child welfare case records (87%)	Mental health records (44%)	Medical records (41%)
Other Mental Health/Social Services Providers	Mental health records (92%)	Substance abuse records (70%)	Medical records (47%)
Schools	Education records (96%)	Medical records (9%)	Mental health records (9%)

Other Information: Two hundred twelve (212) respondents described requesting some type of other information. Of those who were specific and mentioned information not already listed on the survey, the most frequent types of "other" information requested included behavior and/or compliance records (e.g., behavior while in a detention center, school behavioral information, etc.); CASA or Guardian ad Litem reports; and police/court records.

Obtaining Information Requested

Fortunately, most respondents who request information from various agencies report that these agencies DO share information with them, based on the percentage of respondents who indicated receiving some type of information that they request. Chart 3 shows the percentage of respondents who indicated requesting information from each agency listed below who said that the agency DOES NOT share information with them (for example, in calculating the percentage for schools, only respondents indicating that they request information from schools were used as the denominator).

Chart 3: Percentage of Respondents Requesting Information from an Agency Who Do Not Receive Information from that Agency

Eight percent of respondents who request information from Public Defenders do not receive information from public defenders. Six percent of respondents who request information from detention centers do not receive information, and five percent of respondents who request information from prosecutors do not receive information. In contrast, only one percent of respondents who request information from schools do not receive information; two percent of respondents who request information from other mental health and social services providers do not receive information; and three percent of respondents who request information from the Department of Child Services or probation officers do not receive information.

Types of Information Received

The types of information that agencies share generally corresponds to the types of information requested of those agencies.

Prosecutors: Seventy-three (73) percent of respondents receive judicial case records from prosecutors; 31 percent receive DOC case records; and 20 percent receive child welfare case records.

Public Defenders: Sixty-two (62) percent of respondents receive judicial case records from public defenders; 28 percent receive DOC case records; and 28 percent receive child welfare case records.

Probation Officers: Fifty-three (53) percent of respondents receive judicial case records from probation officers; 47 percent receive DOC case records; and 34 percent receive substance abuse records.

Detention Centers: Forty-five (45) percent of respondents receive DOC case records from detention centers; 35 percent receive judicial case records; and 25 percent receive mental health records.

Guardians ad Litem/CASAs: Fifty-one (51) percent of respondents receive child welfare case records from Guardians ad Litem/CASAs; 25 percent receive judicial case records; and 22 percent receive mental health records.

Department of Child Services: Eighty-two (82) percent of respondents receive child welfare case records from the Department of Child Services; 41 percent receive mental health records; and 39 percent receive substance abuse records.

Other Mental Health and Social Service Providers: Eighty-six **(**86) percent of respondents receive mental health records from these providers; 65 percent receive substance abuse records; and 40 percent receive medical records.

Schools: Ninety (90) percent of respondents receive education records from schools; 8 percent receive medical records; and seven percent receive mental health records.

Table 2 represents the top three types of information shared by agency, based on respondents who indicated requesting information from that agency. (For example, of the 537 respondents indicating they request any type of information from prosecutors, 73 percent indicated receiving judicial case records from prosecutors).

Table 2: Top Three Types of Information *Shared* by Agency

Agency Type	Type of Information/Information Shared		
	Most common	**Second most common**	**Third most common**
Prosecutors	Judicial case records (73%)	DOC case records (31%)	Child welfare case records (20%)
Public defenders	Judicial case records (62%)	DOC case records (28%)	Child welfare case records (28%)
Probation officers	Judicial case records (53%)	DOC case records (47%)	Substance abuse records (34%)
Detention centers	DOC case records (45%)	Judicial case records (35%)	Mental health records (25%)
Guardians ad Litem/CASA	Child welfare case records (51%)	Judicial case records (25%)	Mental health records (22%)
Dept. of Child Services	Child welfare case records (82%)	Mental health records (41%)	Substance abuse records (39%)
Other Mental Health/Social Services Providers	Mental health records (86%)	Substance abuse records (65%)	Medical records (40%)
Schools	Education records (90%)	Medical records (8%)	Mental health records (7%)

Perceived Agreement or Mandate for Receiving Information Requested

Respondents were asked why they believe agencies share information with them. Nearly half of the respondents indicated that sharing was based on requests made by parents or guardians with written consent (about 49 percent of all types of requests and providers), followed by court orders (about 36 percent) and informal agreements between agencies (27 percent). Least common were requests made by parents or guardians without consent (14 percent), followed by written MOUs or other formal agreements between agencies (20 percent) and verbal requests made to colleagues at the collaborating agency (21 percent).

Chart 4 illustrates that percentage of respondents selecting each type of information sharing request or mandate. Note that respondents could select all that applied, so percentages do not equal 100.
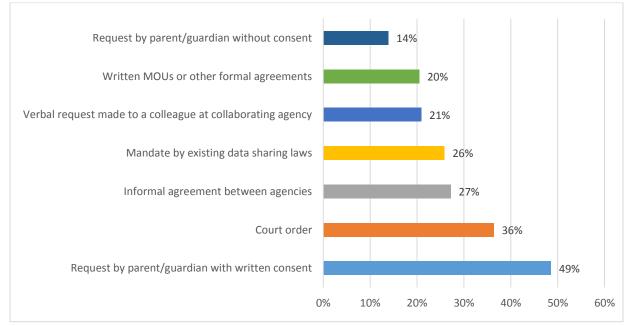
Chart 4: Basis for Receiving Information

It may be worth noting that over one quarter of respondents indicated that they believe informal agreements with other agencies are used for some type of information sharing, and just over 20 percent of respondents indicated receiving information through verbal requests to colleagues. While informal agreements and verbal requests may result in successful information sharing, these types of agreements may compromise confidentiality requirements, if authority for obtaining information and formal agreements are not in place.

Even in cases where formal agreements are in place between agencies and information-sharing authority exists, if individuals believe that information sharing is occurring is as a result of informal agreements or personal relationships, staff turnover or personnel changes within an agency may hamper continued sharing. If a staff member at one agency has an informal agreement with a staff member at another agency, there is always the possibility that one of the staff members may leave or move to another position. In those cases, the individual who replaces the staff member who left or moved may not have the same relationship with the other agency or individual. If the new staff member is not aware of formal agreements or information sharing requirements, she may not agree to share information that has historically been shared and that the requesting agency has authority to receive.

If staff members in all agencies that are sharing or receiving information are not formally trained on existing agreements, authority, policies, and procedures, this may result in delays or time-consuming back-and-forth requests. The more formalized and consistent that information sharing policies and agreements, the more likely they are to be followed in a way that protects confidentiality and meets legal standards while facilitating information sharing. Additionally, the more formalized and consistent the agreements, the less they may be dependent upon individual interpretation or individual relationships.

It is also worth noting, however, that questions in this section were based on respondents' ***perceptions*** of why information is shared with them by agencies from which they request information. For example, a respondent may perceive that a prosecutor's office shares information primarily based on parental consent, but the reality may be that it is shared based on court orders, MOUs between agencies, parental consent, other reasons, or some combination thereof. The section on Agreement or Mandate for Sharing Data in Part 2 of the survey provides more information about the agreements or mandates under which respondents' agencies actually share data.

Basis for Receiving Information Requested by Agency Type

This section provides the top three perceived requests or mandates for sharing information based on the agency from which information are requested. Note that responses in this section are based solely on requestors' ***perceptions*** of why information are shared. The denominator for percentages is based only on individuals indicating that they request information from that agency. Perceived reasons for sharing differed somewhat among agencies, but requests made by parents or guardians with written consent and court orders were among the top three reasons at all but one type of agency (Prosecutors).

Prosecutors: Of those requesting information from prosecutors, 42 percent receive information by court order; 41 percent based on informal agreements between agencies; and 36 percent based on a mandate by existing information-sharing laws.

Public Defenders: Of those requesting information from public defenders, 77 percent receive information by court order; 73 percent based on requests made by parents or guardians with written consent; and 44 based on a mandate by existing information sharing laws.

Probation Officers: Forty-one (41) percent receive information from probation officers based on requests made by parents/guardians with written consent; 30 percent based on court order; and 29 percent based on informal agreements between agencies.

Detention Centers: Forty-five (45) percent receive information from detention centers based on requests made by parents/guardians with written consent; 38 percent based on court order; and 27 percent based on informal agreements between agencies.

Guardian ad Litem/CASA: Forty-nine (49) percent receive information from guardians ad litem/CASAs based on court orders; 42 percent based on informal agreements between agencies; and 40 percent based on requests made by parents/guardians with written consent.

Department of Child Services: Forty-three (43) percent receive information based on requests made by parents/guardians with written consent; 38 percent by court order; and 32 percent based on mandate under existing information sharing laws.

Other Mental Health and Social Services Providers: Sixty-seven (67) percent receive information based on requests made by parents/guardians with written consent; 30 percent by court order; and 20 percent by written MOUs or other formal agreements between agencies.
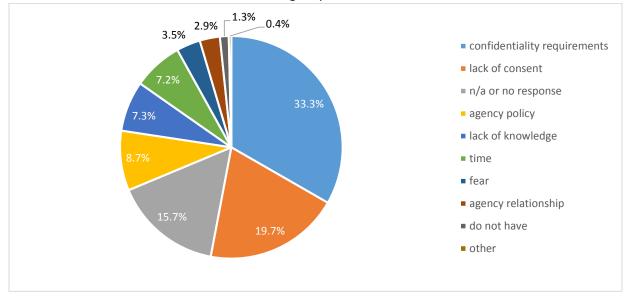
Schools: Forty-nine (49) percent receive information from schools based on requests made by parents/guardians with written consent; 26 percent by court order; and 22 percent based on informal agreements between agencies.

Table 3: Top Three Types of Request or Mandate for Receiving Information by Agency

Agency Type	Top Three Perceived Reasons for Information Sharing		
	Most common	Second most common	Third most common
Prosecutors	Court order (42%)	Informal agreement between agencies (41%)	Mandate by existing information-sharing laws (36%)
Public defenders	Court order (77%)	Request by parent/guardian w/ written consent (73%)	Mandate by existing information-sharing laws (44%)
Probation officers	Request by parent/guardian w/ written consent (41%)	Court order (30%)	Informal agreement between agencies (29%)
Detention centers	Request by parent/guardian w/ written consent (45%)	Court order (38%)	Informal agreement between agencies (27%)
Guardian ad Litem/CASA	Court order (49%)	Informal agreement between agencies (42%)	Request by parent/guardian w/ written consent (40%)
Dept. of Child Services	Request by parent/guardian w/ written consent (43%)	Court order (38%)	Mandate by existing information-sharing laws (32%)
Other Mental Health/Social Services Providers	Request by parent/guardian w/ written consent (67%)	Court order (30%)	Written MOUs/formal agreements (20%)
Schools	Request by parent/guardian w/ written consent (49%)	Court order (26%)	Informal agreement between agencies (22%)

Perceived Reasons for Not Receiving Information

Respondents were asked an open-ended question as to why they believe they may not receive information when they request it. Most (1,093) respondents provided an answer to this question, with 172 indicating not applicable or that information they requested were always shared with them. Four responses could not be grouped into a theme and were put in an "other" category. Responses were inter-related and similar, and generally fell into eight categories.

Chart 5: Perceived Reasons for Lack of Receiving Requested Information

The most common reason individuals believed they did not receive information involved confidentiality requirements. Responses in the confidentiality requirements category primarily mentioned specific laws, such as the Health Insurance Portability and Accountability Act (HIPAA) or Family Education Rights and Privacy Act (FERPA). Some respondents in this category also indicated simply confidentiality, patients' rights, or attorney/client privilege. Notably, several respondents mentioned HIPAA as a reason that they do not receive information but suggested that the agency(ies) were "hiding" behind HIPAA because they do not want to share information.

The second most common theme was lack of consent from parents (or children if 18 or over)— indicating that agencies would not or could not share information unless written consent from the parent was in place. In some cases, comments about lack of consent also mentioned failure to obtain information due to using an old or obsolete form, or the form being filled out incorrectly.

About 17 percent of respondents either indicated that they always receive the information they request or that they don't know why information is not shared. Approximately nine percent of respondents suggested that agency policy is the reason that they cannot receive information. Some respondents seemed accepting of this (simply identifying that agency policy prohibits information sharing), while other respondents suggested that agency policies may be overly strict or may prohibit information sharing that should be permitted.

Seven percent of respondents suggested that lack of knowledge among staff members at the agencies from which they request information may be a barrier to information sharing. Respondents commenting in this area generally expressed frustration at differences among individuals within the same agencies; for example, some individuals not understanding an agency's right to receive information or individual perceptions of information required for information sharing. Others pointed to staff turnover and lack of training for reasons that staff members at agencies do not know what they are able to share or that they are able to share information with the requestor.

Seven percent of respondents blamed lack of staff time or delays for not receiving information. Approximately four percent suggested that fear may be a reason for not sharing information, specifically

fear of liability, negative perception of the agency for sharing information, or fear of lawsuits. Three percent suggested negative relationships between agencies as reasons for not being able to receive information, and one percent indicated that the agencies do not have the information being requested.

Table 4, below, provides a breakdown of each theme, the percentage of responses that fall into each theme, and sample quotes.

Table 4: Themes Identified: Reasons Respondents Believe They Cannot Receive Information

Response Category	#/% of Responses	Sample Quotes
Confidentiality	33% (364)	"Confidentiality can be a factor for sharing of information." *Child Welfare Agency* "Ethnically abiding by confidentiality [requirements] is necessary." *School* "Generally speaking the only information I have been unable to get is bound by confidentiality." *Child Welfare Agency* "HIPAA laws and juvenile laws." *Child Welfare Agency* "Legal liability laws and such as HIPAA and legal confidentiality of clientele." *Child Welfare Agency*
Lack of consent	20% (215)	"Agencies will not share information if client has not signed a written consent for agency to share information." *Child Welfare Agency* "[There may be] difficulty securing a release/exchange of information from the parent, or in some cases the youth (if teenage). *Mental Health/Substance Abuse Agency* "Medical records are difficult to get without consent." *Child Welfare Agency* "No release form, or form filled out incorrectly, incomplete, or release form is out of date and no longer being used by this agency." *Child Welfare Agency*
N/A or always receive information	16% (172)	"Any agency that we request information from generally shares with us." *Guardian ad litem/CASA* "I have always been able to get documents with the correct releases." *Child Welfare Agency*
Agency policy	9% (95)	"[Our contracted provider] has the most strict guidelines to receive documents. They will not accept DCS releases even signed by parents." *Child Welfare Agency* "Local rules for informal discovery are not automatically yielding all discovery materials which should be automatically shared by local child welfare agency. Repeated, specific

Response Category	#/% of Responses	Sample Quotes
		requests for documents seem to be required, which wastes time. *Defense Agency* "Mental health providers do not share everything needed due to their own privacy policy (despite the court order granting access). DCS does not share previously open cases on families even if there is a new open case." *Guardian ad litem/CASA*
Lack of knowledge	7% (80)	"I have encountered two employees at DCS who believe they need their own signed releases of information to share information. They do not recognize the release of information I have acquired from parents for DCS. I have also encountered that some mental health agencies will only recognize their own release." *Probation Agency* "Inconsistencies in practice among individual workers and a misunderstanding of confidentiality as it applies to welfare cases." *Child Welfare Agency* "Misunderstanding of the role of the CASA volunteer and the Court Order that releases the records to the CASA Volunteer or CASA Program." *Guardian ad litem/CASA*
Time needed/delays	7% (79)	"Claiming they don't have the time to gather the information." *Guardian ad litem/CASA* "Insufficient staffing/insufficient time to respond to all requests for information." *Probation Agency*
Fear	4% (38)	"Belief of being sued for release of information." *Child Welfare Agency* "Fear of getting involved with DCS or testifying in court hearings." *Child Welfare Agency*
Agency relationship	3% (32)	"Lack of good working relationship between agencies." *Child Welfare Agency* "Other agencies do not want to share information because my agency has refused to share with them." *Child Welfare Agency*
Do not have	1% (14)	"Information is not available to them." *Child Welfare Agency* "They do not have the records themselves." *Mental Health/Substance Abuse Agency*

Perceptions of Reasons for Not Receiving Information by Respondent Type

When looking at perceived reasons for not being able to obtain information based on type of respondent, there were some differences among respondent types. Confidentiality and lack of parental consent were the top two reasons cited by four of the six agencies for which information was reported. However, Guardians ad litem/CASAs were most likely to cite lack of knowledge on the part of staff at the agencies from which they request information. Table 5 provides a breakdown of the top three reasons respondents believe they cannot receive information, based on type of respondent.
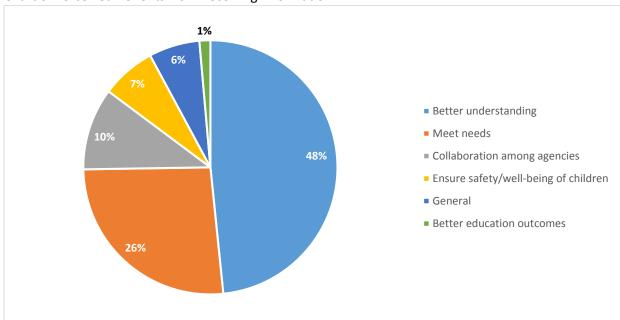
Table 5: Top Three Reasons Respondents Cannot Receive Information by Respondent Type[1]

Respondent Type	Top Reason	#2 Reason	#3 Reason
Child welfare (n=843)	Confidentiality (35%)	Lack of consent (20%)	N/a (17%)
Probation (n=87)	Confidentiality (23%)	Lack of consent (22%)	Agency policy (18%)
Mental health/substance abuse (n=65)	Confidentiality (25%)	Lack of consent (17%)	Time needed/delays (17%)
Guardian ad litem/CASA (n=38)	Lack of knowledge (29%)	Confidentiality (26%)	Lack of consent and time needed/delays (11%)
Schools (n=37)	Confidentiality (46%)	Lack of consent (24%)	N/a (11%)
Prosecution (n=13)	Confidentiality (54%)	N/a (15%)	Fear, agency policy, lack of knowledge, do not have (all 8%)

Benefits of Receiving Information

Respondents were asked to describe the benefits gained by receiving information. Most respondents (1,130 individuals) answered this question. Thirty-three (33) responses were categorized as "not applicable" because either the respondent indicated N/A or indicated that s/he did not know enough to answer the question. Sixteen (16) responses could not be coded into themes, as they did not directly answer the question (in some cases, responses expressed frustration at not being able to obtain information; expressed desire for a universal consent form; or provided information about how information is obtained, but not why information is helpful). Of the remaining 1,081 responses, answers fell into one of six categories.

---

[1] Defense attorneys and Detention Centers are not included because fewer than 10 respondents answered the question.

Chart 6: Perceived Benefits from Receiving Information

The most common type of response (48% of respondents) indicated that receiving information from other agencies provides a better understanding of the client, the child, or the situation. Better understanding can result in a more holistic picture of the case or the individual's or family's needs; helps create a better understanding of what the true situation is; helps fill in holes for information not provided by the family or child; and helps to make more informed decisions.

About 26 percent of respondents indicated that receiving information helps to better meet the needs of the children or families that they are serving. Ten (10) percent indicated that information sharing helps increase collaboration among agencies for the benefit of the families/children, and that the collaboration that information sharing creates can result in fewer duplications of efforts and more efficiency. Seven percent of respondents suggested that information sharing can help ensure the safety and security of children, and one percent specifically indicated that information sharing can improve educational outcomes for children.

About six percent of respondents fell into the "general" category. "General" comments included blanket statements such as how helpful it is to receive information; that the agency couldn't do its job without the information; and simple statements such as "yes it's helpful."

Table 6 provides a breakdown of responses by category, percentage of responses in each category, and sample quotes.

Table 6: Benefits to Receiving Information by Category

Response Category	#/% of Responses	Sample Quotes
Better understanding	48% (523)	"We get a more detailed look at a family's life." *Child Welfare Agency*

Response Category	#/% of Responses	Sample Quotes
		"It gives us information to make critical decisions during cases and assessments." *Child Welfare Agency* "It allows our agency a more holistic view of the juvenile's background and therefore we take a more tailored approach for supervision and programming." *Probation Agency*
Meet needs	26% (285)	"I have developed a more accurate diagnosis and treatment strategy for the client/family, based on documentation." *Mental Health/Substance Abuse Agency* "We can benefit the child's outcome and well-being by knowing all the information." *Guardian ad litem/CASA*
Collaboration	10% (113)	"We all benefit by sharing information so that we are not giving families duplicate services." *Child Welfare Agency* "Cooperation makes it easier to complete cases and closes them out. It makes things run more smoothly." *Child Welfare Agency*
Ensure safety and security	7% (75)	"I am able to make a complete assessment to advocate for the safety, permanency, and well-being of the child." *Guardian ad litem/CASA* "Access to pertinent information in a timely manner is critical to DCS's ability to assess the safety and needs of families and children." *Child Welfare Agency*
General	6% (70)	"We benefit greatly." *Child Welfare Agency* "Enables us to work efficiently." *Child Welfare Agency*
Better educational outcomes	1% (15)	"Any information I receive about a student/family helps me assist the student/cope with his/her situation and be more successful in school." *School*

Information Desired but Unable to Receive

Respondents were asked a final open-ended question about the types of information that they would like to receive but currently cannot. Of the 860 responses, 405 (47 percent) indicated no desire to receive information—responses were either N/A, none, or to the effect of "I receive all of the information that I need." The remaining responses fell into 16 categories, including 12 responses that could not be categorized and fell into an "other" category. About nine percent of respondents wished to receive more information from legal records or law enforcement, including probation information, criminal history, and pending or past court cases. Eight percent wished to receive more complete information from Department of Child Services, such as reports, services that had been provided, and information about placements. Seven percent wished to receive mental health or medical records.

Approximately six percent of respondents lamented the loss of access to ICES, a database they found very helpful to use in locating clients and obtaining information about Medicaid and other public assistance. Relatedly, four percent of respondents wished to be able to obtain information about public assistance that clients are receiving (e.g., Medicaid, TANF, etc.). Two percent wanted more information on drug screening results and/or results of substance abuse treatment. Another two percent wished to be able to receive contact information (address, phone numbers, etc.) to assist in locating clients, and two percent desired better access to education records. Less than one percent of respondents requested "any" information they could receive that would be helpful; other information, such as access to social media, discharge reports, or inpatient logs; unspecified information from other states; more timely information without delay; birth certificates; a universal consent form; or ability to obtain information without consent.

Chart 7: Types of Information Desired but Unable to Receive

Survey Part 2: Sharing Information

As a reciprocal to the questions asked in the first section of the survey, respondents were asked what type of information they are requested to share; which agencies request the information; and which information they do in fact share. They were also asked to describe reasons they might not share information; what they believe the benefits are from sharing information with other agencies; and additional information that they would like to share but are not currently able to.

Types of Information and Agencies that Request Information from Respondents

Respondents indicated that Guardians ad litem/CASAS were mostly likely to request information from them, with 46 percent of respondents indicating that this group requests information. Forty-five (45)

percent of respondents said that other mental health/social services providers request information, and 42 percent indicated that probation officers request information. Conversely, less than one quarter of detention centers request information, and only 30 percent of public defenders request information. Chart 8 identifies the percentage of respondents indicating information requests from each agency type.
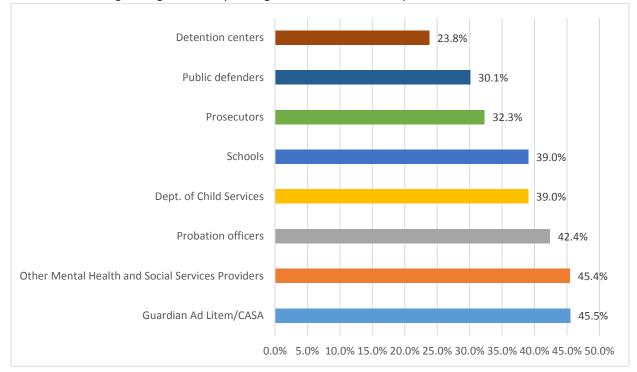
Chart 8: Percentage of Agencies Requesting Information from Respondents

Information Requested from Respondents by Type of Agency Requesting

Prosecutors: Five hundred thirteen (513) respondents indicated that prosecutors request information from them. Respondents indicated that when prosecutors request information, 70 percent request child welfare case records; 29 percent request mental health records; and 29 percent request substance abuse records.

Public Defenders: Four hundred seventy-eight (478) respondents said that public defenders request information from them. When public defenders request information, 68 percent request child welfare case records; 37 percent, mental health records; and 35 percent, substance abuse records.

Probation Officers: Six hundred seventy-three (673) respondents indicated receiving information requests from probation officers. Fifty-eight (58) percent of probation officers request information on child welfare case records; 39 percent request substance abuse records; and 34 percent request mental health records.

Detention Centers: Three hundred seventy-eight (378) respondents receive requests from detention centers. Fifty-three (53) percent of detention centers request child welfare case records; 37 percent request mental health record;, and 34 percent request education records.

Guardians ad Litem/CASAs: Seven hundred twenty-three (723) respondents receive requests from this group. Seventy-four (74) percent of guardians ad litem/CASAs request child welfare case records; 49 percent, mental health records; and 44 percent substance abuse records and education records.

Department of Child Services: Six hundred twenty (620) respondents receive information requests from staff at the Department of Child Services. Sixty (60) percent of this group request child welfare case records; 42 percent, mental health records; and 37 percent, substance abuse records.

Other Mental Health and Social Service Providers: Seven hundred twenty-two (722) respondents receive requests from this group. Of this group, 51 percent request mental health records; 49 percent, child welfare case records; and 45 percent, substance abuse records.

Schools: Six hundred twenty (620) respondents receive requests from schools. Forty-five (45) percent of schools request education records; 38 percent, child welfare case records; and 21 percent, mental health records.

Regardless of agency type requesting information, child welfare case records were by far the most common piece of information requested. Mental health records were also commonly requested, as well as substance abuse records. The combination of child welfare case records, mental health records, and substance abuse records made up the top three types of information requested for four of six agencies (all but detention centers and schools). While child welfare case records and mental health records were in the top three types of information requested by detention centers and schools, education records were the most common type of information requested by schools, and the third most common type of information requested by detention centers. Agencies were least likely to request information on Department of Correction case records.

The table below summarizes the top three types of information that are shared by respondents, based on type of agency requesting the information.
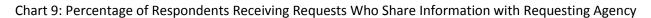
Table 7: Top Three Types of Information *Requested for Sharing* by Agency Requesting

| Agency Type | Type of Information/Information Requested | | |
	Most common	Second most common	Third most common
Prosecutors	Child welfare case records (70%)	Mental health records (29%)	Substance abuse records (29%)
Public defenders	Child welfare case records (68%)	Mental health records (37%)	Substance abuse records (35%)
Probation officers	Child welfare case records (58%)	Substance abuse records (39%)	Mental health records (34%)
Detention centers	Child welfare case records (53%)	Mental health records (37%)	Education records (34%)
Guardian ad Litem/CASA	Child welfare case records (74%)	Mental health records (49%)	Substance abuse records/Education records (44%)
Dept. of Child Services	Child welfare case records (60%)	Mental health records (42%)	Substance abuse records (37%)
Other Mental Health/Social Services Providers	Mental health records (51%)	Child welfare case records (49%)	Substance abuse records (45%)

Agency Type	Type of Information/Information Requested		
	Most common	Second most common	Third most common
Schools	Education records (45%)	Child welfare case records (38%)	Mental health records (21%)

Sharing Information Requested

The majority of respondents indicated that they do share information with agencies that request information. On average, about 87 percent of respondents indicated that they share information with the agencies that request it. Chart 9 identifies the percentage of respondents who indicated sharing information with requesting agencies (percentages are based on number of respondents indicating that they DO share information with this agency / number of respondents indicating that the particular agency requests information from them).

Chart 9: Percentage of Respondents Receiving Requests Who Share Information with Requesting Agency

Ninety-one (91) percent of respondents indicated sharing information with Guardians ad litem/CASAs when it is requested, followed by 89 percent sharing information with staff from the Department of Child Services and 89 percent with detention centers. Only 83 percent of respondents indicated sharing information with public defenders when it is requested.

Types of Information Shared by Agency Requesting

Respondents also indicated the types of information that they share with requesting agencies. The top three types of information shared are identical to the top three types of information requested. Percentages are based on the number of respondents indicating they share information with the particular agency / the number indicating that that agency requests information from them.

Prosecutors: Seventy-one (71) percent of respondents share child welfare case records with prosecutors; 30 percent, substance abuse records, and 30 percent, mental health records.

Public Defenders: Sixty-five (65) percent of respondents share child welfare case records with public defenders; 36 percent, substance abuse records; and 35 percent, mental health records.

23

Probation Officers: Fifty-eight (58) percent of respondents share child welfare case records with probation officers; 39 percent, substance abuse records; and 35 percent, mental health records.

Detention Centers: Fifty-two (52) percent share child welfare case records with detention centers; 36 percent, mental health records; and 35 percent education records.

Guardian ad Litem/CASAs: Seventy-three (73) percent share child welfare case records with this group; 49 percent share mental health records; and 46 percent share substance abuse records or education records.

Department of Child Services: Sixty (60) percent share child welfare case records with this group; 43 percent, mental health records; and 39 percent, substance abuse records.

Other Mental Health and Social Service Providers: Fifty-two (52) percent share mental health records with this group; 47 percent, substance abuse records; and 47 percent child welfare case records.

Schools: Forty-seven (47) percent share education records with schools; 32 percent, child welfare case records; and 21 percent mental health records.

Table 8 represents the top three types of information shared by agency, based on respondents who indicated requesting information from that agency.

Table 8: Top Three Types of Information **Shared** by Agency Requesting

Agency Type	Type of Information/Information Shared		
	Most common	**Second most common**	**Third most common**
Prosecutors	Child welfare case records (71%)	Substance abuse records (30%)	Mental health records (30%)
Public defenders	Child welfare case records (65%)	Substance abuse records (36%)	Mental health records (35%)
Probation officers	Child welfare case records (58%)	Substance abuse records (39%)	Mental health records (35%)
Detention centers	Child welfare case records (52%)	Mental health records (36%)	Education records (35%)
Guardian ad Litem/CASA	Child welfare case records (73%)	Mental health records (49%)	Substance abuse records/Education records (46%)
Dept. of Child Services	Child welfare case records (60%)	Mental health records (43%)	Substance abuse records (39%)
Other Mental Health/Social Services Providers	Mental health records (52%)	Substance abuse records (47%)	Child welfare case records (47%)
Schools	Education records (47%)	Child welfare case records (32%)	Mental health records (21%)

Agreement or Mandate for Sharing Information

Respondents were asked why they share information with requesting agencies. Based on all types of agreements and mandates used, approximately 43 percent of respondents indicated they share information based on requests made by parents or guardians with written consent (compared to 49

percent who believe they **receive** information under this type of request). Twenty-nine (29) percent indicated they share information under court order (compared to 36 percent who believe they **receive** information under court order). Twenty-two (22) percent indicated sharing information based on a mandate from existing information-sharing laws (compared to 26 percent who believe they **receive** information for this reason). While 27 percent believe they **receive** information as a result of informal agreements between agencies, and 21 percent believe they **receive** information based on verbal requests to colleagues, only 20 percent indicated sharing information as a result of informal agreements, and 14 percent indicated sharing information through a verbal request. These differences may be based on a lack of knowledge as to why and how other agencies share information with the respondents; a lack of knowledge as to why and how respondents share information with other agencies; or a combination of the two.

Chart 10 illustrates that percentage of respondents selecting each type of information sharing request or mandate. Note that respondents could select all that applied, so percentages do not equal 100.
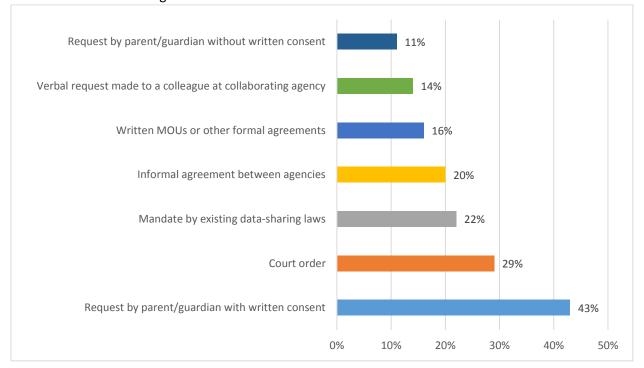
Chart 10: Basis for sharing information

As indicated in the analysis of Part 1 of the survey, although fewer respondents indicated sharing information through informal agreements or verbal requests than believe they receive information through these arrangements, it is still worth noting that about one-fifth of respondents do share information through informal agreements, and 14 percent share information based on verbal requests received by colleagues. Please refer to the analysis in Part 1 (Perceived Agreement or Mandate for Receiving Information) for more discussion on this.

Basis for Sharing Information by Agency Type

This section provides the top three reasons for which information is shared based on answers of respondents who share the information.

25

Prosecutors: Of those sharing information with prosecutors, 30 percent share based on court order; 30 percent believe sharing is mandated by existing information-sharing laws; and 30 percent share as a result of a request by parent/guardian with written consent.

Public Defenders: Of those sharing information with public defenders, 38 percent share based on court order; 36 percent, request by parent/guardian with written permission; and 20 percent, mandate from an existing information-sharing law.

Probation Officers: Forty-five (45) percent share information with probation officers based on requests made by parents/guardians with written consent; 26 percent share because of a court order, and 25 percent share based on informal agreements between agencies.

Detention Centers: Forty-two (42) percent share information with detention centers based on requests from parents/guardians with written permission; 29 percent share because of a court order, and 21 percent share based on a mandate from existing information-sharing laws.

Guardian ad Litem/CASA: Thirty-nine (39) percent share with this group because of a court order; 28 percent share jn response to requests with written consent from parent/guardian; and 23 percent share because of a mandate from existing information-sharing laws or an informal agreement between agencies.

Department of Child Services: Thirty-nine (39) percent share information with this group based on requests with written consent from parent/guardian; 29 percent share because of a mandate from existing information-sharing laws; and 28 percent because of a court order.

Other Mental Health and Social Services Providers: Sixty-two (62) percent share information with this group based on a request with written consent; 24 percent, because of a court order; and 17 percent, through written MOUs or other formal agreements.

Schools: Fifty-two (5)2 percent share information with schools based on written consent from parent/guardian; 22 percent because of a court order; and 19 percent share due to a mandate from existing information-sharing laws.

Table 9 summarizes the top three types of agreements/mandates used for sharing information, by agency type with which respondents share information.

Table 9: Top Three Types of Request or Mandate for Information Sharing by Agency

Agency Type	Top Three Perceived Reasons for Information Sharing		
	Most common	Second most common	Third most common
Prosecutors	Court order (30%)	Request by parent/guardian w/ written consent (30%)	Mandate by existing information-sharing laws (30%)
Public defenders	Court order (38%)	Request by parent/guardian w/ written consent (36%)	Mandate by existing information-sharing laws (20%)
Probation officers	Request by parent/guardian w/ written consent (45%)	Court order (26%)	Informal agreement between agencies (25%)

Agency Type	Top Three Perceived Reasons for Information Sharing		
	Most common	Second most common	Third most common
Detention centers	Request by parent/guardian w/ written consent (42%)	Court order (29%)	Mandate by existing information-sharing laws (21%)
Guardian ad Litem/CASA	Court order (39%)	Request by parent/guardian w/ written consent (28%)	Mandate by existing information-sharing laws/Informal agreement between agencies (23%)
Dept. of Child Services	Request by parent/guardian w/ written consent (39%)	Mandate by existing information-sharing laws (29%)	Court order (28%)
Other Mental Health/Social Services Providers	Request by parent/guardian w/ written consent (62%)	Court order (24%)	Written MOUs/formal agreements (17%)
Schools	Request by parent/guardian w/ written consent (43%)	Court order (29%)	Mandate by existing information-sharing laws (22%)

Reasons for Not Sharing Information

Respondents were asked why they do not share information that is requested. There were 949 responses to this question. Responses in this section were similar to responses as to why individuals feel information is not or cannot be shared with them, in Part 1 of the survey. About 40 percent of respondents mentioned confidentiality concerns (e.g., HIPAA, FERPA, attorney/client privilege, client right to privacy, etc.) as reasons that information cannot be shared. Twenty-six (26) percent indicated that they could or would not share information without parental consent. About 18 percent of the respondents were placed in the "N/A" category. These respondents either wrote "N/A" or indicated that they didn't know or always shared information when requested.

Interestingly, a theme arose in this section that did not surface in the reasons respondents believe information cannot be shared with them. About 56 respondents (approximately six percent of the total) stated that they do not share information because it's "not necessary." These respondents generally referred to making judgment calls about with whom to share information. Some used terms such as "they are on a need to know basis, and the information being requested is not necessary" or "I might hold things back to better assist the student if I know the child better than they do." Several respondents indicated hesitance to share information because it might create a bias against the child. While these types of responses represented a small percentage of those indicating that they cannot share information, there may be some cause for concern if decisions about information-sharing are being made on a personal and subjective basis, as opposed to consistent policies for release of information. An individual may feel s/he is acting in the best interest of a child, but information-sharing decisions made by an individual or on an individual basis may be problematic in the long run.

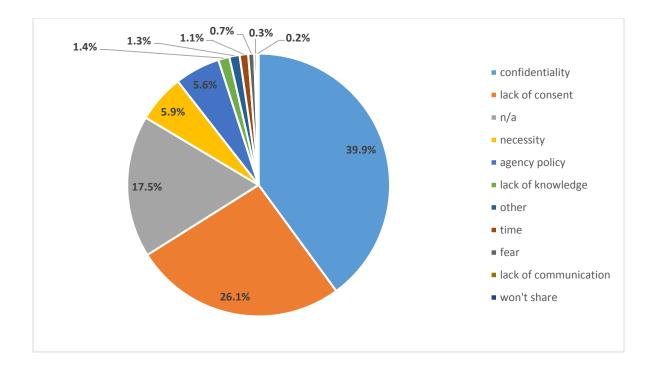Chart 11: Reasons for Not Sharing Requested Information

Table 10 provides a list of themes identified as reasons for not sharing information, as well as percentages of responses falling under each theme and sample quotes.

Table 10: Themes Identified: Reasons for Not Sharing Information

Response Category	#/% of Responses	Sample Quotes
Confidentiality	40% (379)	"State, federal, and organizational laws and ethical standards prohibit our agency from sharing all information with other agencies." *Probation Agency* "Confidentiality for the child. Our job is to gather information for the Judge and parties of the case only." *Guardian ad litem/CASA* "Some information can't be shared due to confidentiality." *Child Welfare Agency*
Lack of consent	26% (248)	"Information at times is not shared without a signed release of information provided by a client." *Child Welfare Agency* "Do not share information received from other agencies without written consent of the parents." *Child Welfare Agency* "If a release is required and a client is unable to be located to sign the release or refusal to sign." *Child Welfare Agency*

Response Category	#/% of Responses	Sample Quotes
N/a	18% (166)	"Information is not requested." *Child Welfare Agency* "We share when asked." *Probation Agency*
Necessity	6% (56)	"Sometimes agencies (i.e. schools) ask to be nosy rather than for specific purposes/cases." *Child Welfare Agency* "[I don't share because of] the method in which they would share the information and how they would use the information or tell the family what I have said." *Probation Agency* "Some agencies don't need information they may be requesting." *Child Welfare Agency*
Agency policy	6% (53)	"Office policy based on judicial advice." *Probation Agency* "It is normally against policy." *Child Welfare Agency*
Lack of knowledge	1% (13)	"Confusion about confidentiality laws." *Probation Agency* "I'm uncertain about whether I can share information." *Child Welfare Agency*
Time	1% (10%	"Not enough time to get to everything." *Child Welfare Agency*
Fear	0.7% (7)	"DCS is very strict on what can be shared. If we break those rules, we can be disciplined or fined." *Child Welfare Agency*
Lack of communication	0.3% (3)	"Lack of communication." *Child Welfare Agency*
Won't share	0.2% (2)	"I refuse to share information regarding a child with outside agencies." *Child Welfare Agency*

Benefits to Sharing Information

Respondents were asked to identify the benefits of sharing information with other agencies. Open-ended responses to this question were similar to the question asked in Part 1, concerning respondents' beliefs about the benefits of receiving information from other agencies. There were 898 responses to the question (for this section, respondents who answered N/A are excluded). Thirty-four (34) percent of respondents believe that information sharing helps agencies to better meet the needs of children and families being served. Thirty-two (32) percent indicated that sharing information with other agencies helps improve cross-agency collaboration, by ensuring that everyone is on the same page, helping to ensure continuity of services, helping to avoid duplication of effort, and helping agencies work toward a common goal. Twenty-nine (29) percent of respondents believe that sharing information with other

agencies leads to a better, more holistic understanding of the situation, whether related to the child, family, or both.
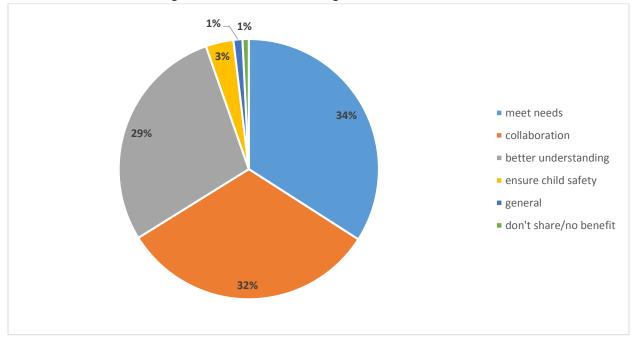
Chart 12: Benefits of Sharing Information with Other Agencies

Three percent of respondents believe that sharing information with other agencies helps ensure the safety and well-being of children. One percent of respondents had general comments about the benefits of information sharing, and another one percent indicated that they do not share information or do not see any benefits to information sharing (one individual even believed that sharing information is harmful to a child).

Themes for each response are identified below, along with the percentages of responses falling into each category and sample quotes for each theme.

Table 11: Themes Identified: Benefits of Sharing Information

Response Category	#/% of Responses	Sample Quotes
Meet needs	34% (306)	"Sharing information helps determine the best care for the family." *Child Welfare Agency* "It assists with comprehensive case management and fully addressing the family's needs." *Child Welfare Agency* "To ensure the child and family's needs are being met." *Child Welfare Agency*
Collaboration	32% (288)	"All agencies benefit from knowing what services clients are receiving…and how agencies can work together to help the family." *Probation Agency*

Response Category	#/% of Responses	Sample Quotes
		"[It helps] to coordinate care and decision making." *Child Welfare Agency* "Consistent support is provided across agencies." *Child Welfare Agency* "The benefit is that all service providers are on the same page and it prevents confusion." *Child Welfare Agency*
Better understanding	29% (256)	"Sharing information is critical to the learning aspect of the case and ensuring that the case progresses forward." *Child Welfare Agency* "I believe that all providers need to be aware of the other services in place and other treatments." *Child Welfare Agency* "This ensures that all parties to the family team are aware of all circumstances and allows me to stay transparent with the team." *Child Welfare Agency*
Ensure child safety	3% (31)	"To better ensure child safety and assess a report with more consistency." *Child Welfare* "To ensure the safety and well-being of children and keep them safe from abuse and neglect." *Child Welfare Agency*
General	1% (10)	"It's most generally positive." *Child Welfare Agency* "Enables us to better do our job." *Child Welfare Agency*
Don't share/no benefit	1% (7)	"Not sharing all information. People have the right to privacy." *Child Welfare Agency* "There are none. It endangers the well-being of the child." *Child Welfare Agency*

Information Agencies Would Like to Share but Currently Cannot

Respondents were asked to describe the types of information that they would like to share but are currently unable to; 157 individuals described information they would like to share (an additional five responded to the question but their responses referred to information they would like to receive).

Forty (40) percent of respondents identified the types of agencies with which they would like to share information. Thirty-six (36) percent of respondents identified specific information elements, such as mental health records, medical records, or case histories (e.g., parent history, child's involvement with DCS, etc.), that they would like to share. Other respondents answered generally, indicating that any type of additional information sharing that benefits the child and/or family would be helpful. Eight respondents would like to be able to share certain information points (when helpful to a child) without

having to obtain parental consent or release. Three respondents indicated that they would like to have access to some type of information portal in which they could securely share information, and two respondents said that they would like to have some type of universal release. Eight respondents had answers that could not be categorized and fell into a more general "other" category.
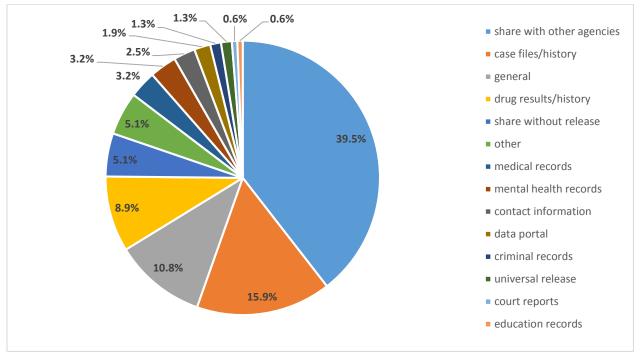
Chart 13: Additional Barriers and Recommendations

Of the 40 percent of respondents (n=62) who indicated a desire to share information with other agencies:

- 37 percent would like to share information with schools
- 19 percent would like to share information with probation
- 6 percent each would like to share information with DCS, doctors, or public assistance (FSSA)
- 5 percent would like to share information with mental health providers
- 3 percent each would like to share information with CASAs or law enforcement
- 2 percent each would like to share information with courts, prosecutors, treatment teams, or out of state agencies

Survey Part 3: General Comments and Recommendations

In Part 3 of the survey, respondents were asked to identify any additional information-sharing challenges that they see and any policy changes or recommendations to alleviate those challenges. Respondents were also asked if they had anything else to add.

Additional Barriers/Recommendations for Policy Changes

Respondents provided information about additional barriers to information sharing and suggestions for policy or implementation changes to eliminate the identified barriers. Three hundred seventy-four (374) respondents answered this question (excluding those who responded with N/A, none, or I don't know). Most respondents again reiterated types of records they wish they could receive; issues with confidentiality requirements; or issues with obtaining releases. Some respondents recommended ways to mitigate barriers and misunderstandings, while 10 responses were general and fell into an "other" category.

Twenty-two (22) percent of respondents indicated issues related to obtaining specific information, information, or records. Of the 84 respondents indicating specific records that they have trouble obtaining:

- 24 percent indicated challenges obtaining medical records
- 15 percent indicated challenges obtaining mental health records
- 12 percent wished to access public assistance records
- 8 percent wanted better access to out-of-state information (from agencies out-of-state)
- 7 percent wished for better access to law enforcement records
- 6 percent each wished for better access to criminal records or DCS records
- 5 percent wanted more access to family history information
- 4 percent each wanted better access to probation records or social media information
- 2 percent wanted more access to education records

Of the remaining respondents, 17 percent recommended improving technology to allow systems to talk to one another better across agencies, or to create an information repository or data portal that would allow for secure, role-based access to information. According to respondents, this may result in less time necessary to manually pull records or data and quicker access to timely information. On a related note, 11 percent of respondents indicated that they would like to see mechanisms put in place to reduce the amount of time that it takes to get information (although these respondents did not provide specific recommendations as to how to accomplish this). Nine percent of respondents stated that they faced issues obtaining releases from parents and/or young adults over the age of 18, which resulted in lack of access to information.

Seven percent of respondents again mentioned that they wish they had access to the ICES database like they used to, as it was helpful in obtaining client contact information and public assistance information. Another seven percent expressed a desire for training or training documents to be provided, including training related to HIPAA and FERPA information sharing exceptions; training on information that can and cannot be shared; and training on best practices in sharing information (as well as the importance of information sharing). Six percent wished for agreements to be created between agencies (where they don't exist) or better collaboration among agencies. Five percent of respondents each mentioned agency policy issues and confidentiality requirements as barriers to obtaining information. Another five percent of respondents specifically mentioned a desire to have a universal release created that would be valid across all agencies and types of information sharing.

Table 12 provides a synthesis of types of responses received, number and percentage of responses falling into each category, and sample quotes.

Table 12: Themes Identified: Additional Barriers and Recommendations

Response Category	#/% of Responses	Sample Quotes
Specific records	22% (84)	"Information sharing information with other states would alleviate many challenges associated families we work with. This would provide insight into DV, neglect, abuse, substance use not readily shared by individuals that become involved with DCS in Indiana." *Child Welfare Agency* "It would be beneficial for case managers to have access to limited criminal history and Interact (IMPD's database). A case manager works all hours of the day and a lot of the time supervisors are not available to get limited history or access police reports." *Child Welfare Agency* "Physicians' offices need to have a meeting with DCS to see what we need because they are afraid to share information fearing that they will have to go to court." *Child Welfare Agency* "Some mental health providers ignore our requests for records, or send incomplete records, prohibiting me from looking at the whole picture." *Probation Agency*
Information portal or repository/Improve technology	17% (63)	"Computer databases are not communicating between state programs and my programs or each other's programs." *Mental Health/Substance Abuse Agency* "It would be nice to have one information storage center that a search could produce information from many sources." *Child Welfare Agency* "Web-based accessibility always aids in time constraints in information sharing." *Child Welfare*
Reduce delays/time constraints	12% (45)	"It is very tedious to make time to request all of the information and follow up to obtain said information. Oftentimes I will have to make three phone calls and a fax to get school records." *Child Welfare Agency* "Sometimes it takes a long time to get requested information." *Mental Health/Substance Abuse Agency* "The length of time it takes to make contact with the other agency and then the length of time it takes to receive the records [is a challenge]." *Child Welfare Agency*
Release issues	9% (33)	"When a parent denies to sign a release for medical records during an assessment it is very difficult to get the medical professionals to accept our policy stating that we can obtain the information without a signed release." *Child Welfare Agency*

Response Category	#/% of Responses	Sample Quotes
		"If a parent refuses to allow you to release information to other agencies then it creates a gap in treatment and services." *Mental Health/Substance Abuse Agency*
Access to ICES	7% (26)	"Access to the ICES program was an immense help in better understanding the family household and financial situation, as well as helping with information about medical coverage, etc." *Child Welfare Agency* "ICES access provided valuable information that is no longer available to DCS." *Child Welfare Agency*
Training	7% (25)	"Having a greater understanding of what information can be shared and what cannot be shared [would be helpful]." *Child Welfare Agency* "There seems to be a lack of clarity as to what can be shared and cannot be shared." *Child Welfare Agency* "I think educating the records' offices for medical and mental health agencies would be helpful as they believe HIPAA restricts them from giving information to CASA." *Guardian ad litem/CASA*
Agreements/collaboration	6% (24)	"Agreements between agencies would allow agencies to communicate more freely between one another." *Child Welfare Agency* "Lack of sharing and communication between agencies at the state level inhibits progress at the county level. Collaboration and communication at the state level for everything from information sharing, to resource sharing and funding would assist [in ensuring that children don't fall through the cracks.]" *School*
Agency policy issues	5% (20)	"I do not usually have a problem getting information from my county agencies; however, I struggle with getting information from other agencies in other counties. For example, Marion agencies will tell me they cannot release information even though the Johnson county office from the agency releases the same information to me without problem." *Child Welfare Agency* "It seems as though policies of some agencies/providers change on a daily basis. It totally depends on who you talk to as to what information will be shared on that day." *Guardian ad litem/CASA* "Some agencies seem reluctant to share pertinent information with detention officers and it's frustrating

Response Category	#/% of Responses	Sample Quotes
		because we deal with them on a daily basis much closer than other agencies." *Detention Center*
Confidentiality	5% (17)	"HIPAA laws prevent all information sharing. Agencies use HIPAA as an excuse to not provide court agencies with the information needed to effectively assist youth." *Probation Agency* "There is so much red tape and fear on everyone's part to say or share anything for fear of breaking confidentiality." *Child Welfare Agency*
Universal release	5% (17)	"A more universal and possibly standardized process would be helpful. Navigating multiple processes and procedures for different entities can become cumbersome." *Mental Health/Substance Abuse Agency* "Having a form that works for everyone and having to only have it signed one time by one parent [would be helpful]." *Child Welfare Agency* "So many different release forms across agencies…shouldn't be so complicated." *Child Welfare Agency*
Legal change	1% (5)	"Changing the HIPAA laws regarding information that can be provided to Child Welfare Agencies." *Child Welfare Agency* "Legislation allowing the release/exchange of treatment information between agencies providing services for youth as appropriate." *Probation Agency*
Information inaccuracy	1% (3)	"[There is] inaccuracy of information in the system. " *Child Welfare Agency*
Do not share	1% (2)	"Sharing information can damage things even more, therefore I do not have any suggestions for more sharing." *Child Welfare Agency*

Overall Recommendations Based on Survey Responses

Based on responses to the survey, several recommendations are made in this section. While some of the identified barriers to sharing or receiving information are legally mandated (e.g., HIPAA, FERPA, etc.), in many cases, based on the responses, inability to share or receive information may be based on factors that are preventable and can be addressed through policy, procedure, and training.

Reduce Information Sharing Barriers Caused by Lack of Knowledge

- Provide guidance to agencies in the form of training materials, training protocols, guidance documents, or toolkits about what types of information can be shared, with which agencies, and in which circumstances. Training materials should explicitly address existing confidentiality laws to ensure that privacy is protected. At the same time, materials should note and give guidance on existing exceptions to confidentiality rules to ensure that information is being shared in a manner that meets the best interests of families and children. Agencies may also benefit from training and guidance around creating formalized sharing agreements among agencies and training staff on implementation of information sharing agreements.

- Consider incentivizing and/or monitoring agencies to provide ongoing training to staff on information sharing laws, policies, and regulations. Recommend that agencies familiarize staff with existing information sharing agreements and protocols on a regular basis. This may help mitigate staff turnover and lack of knowledge that occurs when new staff come on board.

Reduce Information Sharing Barriers Caused by Inconsistencies across Agencies, Poor Agency Relationships, or Inconsistent Individual Decision Making

- Explore the possibilities of creating state-level MOUs or information sharing agreements between agencies that can be shared with county and regional offices for consistent usage. Specific, clear, and consistent agreements may help eliminate barriers caused by policies from agency to agency, especially at a regional or local level. Further, clear and consistent agreements will help ensure confidentiality and security of information sharing. In addition, ensure that if state-level MOUs are created that they are widely shared with regional and local offices and that staff are properly trained on following the protocols delineated in the agreements.

- Research ways to build bridges and collaboration across agencies to promote information sharing in a secure manner and to communicate with each other the ways in which information sharing can benefit both the agency and the families and children served. While confidentiality and legal protections are of utmost importance, some respondents indicated that they cannot obtain information or information requested even with a court order or other legal right, due to poor relationships between agencies or individuals or lack of staff understanding.

Reduce Information Sharing Barriers Caused by Delays in Sharing Information and Time Needed to Fulfill Requests

- Consider providing recommendations, guidance, or training on creating efficient mechanisms for storing information, and consistent methods for putting data and information together to cut down on the amount of time necessary for compilation. Explore the possibility of leveraging technology for information sharing. This may include creating electronic information releases; identifying ways to simplify information exchanges across systems; or identify mechanisms for secure, role-based access to existing databases.

- Some respondents suggested creating a centralized information repository or portal from which agency staff with the proper authority may be able to access information without having to request it, have someone manually pull it, and then send it to the requestor. This type of system

may not be possible or feasible due to cost, time, and confidentiality issues, but there may be other ways of leveraging technology to facilitate secure and proper exchange of information (such as those described above).

- Explore the possibility of a universal consent form. This was mentioned by several respondents as a recommendation for mitigating barriers to information sharing, as well as cutting down the amount of time necessary, in some cases, to get consents approved. In many cases, time is of the essence in obtaining information to assist in making case management decisions or for client advocacy. Reducing bureaucracy and agency differences, while at the same time maintaining confidentiality, may help reduce delays in legitimate access to information.