

# HMIS Privacy Notice and Participant Consent Form

**\*\*Please read carefully\*\***

This organization enters data into the Homeless Management Information System (HMIS). HMIS is a computer system that collects information about the experiences and needs of people experiencing homelessness or having trouble with housing. Strategies to End Homelessness (STEH) manages the HMIS. Clarity Human Services is the HMIS software.

**How is your information protected?** All information entered into HMIS is secured to protect your privacy.

- Only trained and approved staff with a reason to use HMIS have access.
- All staff must commit in writing to keep information private and only access information for a specific business reason (like working with a specific person/family or supervising a specific program).
- The HMIS is hosted on a secure server and data is unable to be read when not being used.

**Sharing Data with Other Service Providers:** You have the right to share your information in HMIS to help:

- Improve access and provide quality services to you.
- Coordinate referrals for housing or services such as food, utility help, counseling, etc.
- Reduce the need for you to repeat your story to every service provider.
- Provide information needed to match you to a housing provider (if available).

**What information is shared in the HMIS?**

- Only information needed to provide you with help will be collected.
- Personal information like your name, address, date of birth, social security number, and contact information.
- Intake, assessment, and enrollment data such as notes, services, and referrals.
- Details to understand your situation.
- History of homelessness and other services provided by organizations who share information in HMIS.
- You may agree to share your data and still ask our staff to set specific information to private.

**Your rights:** You have the right to:

- Request all or specific HMIS data not be shared with other service providers.
- Ask for a copy of your personal information in HMIS and ask for changes.
- Access services whether you agree or do not agree to share information in HMIS.
- Request a copy of the HMIS Policies and Procedures Manual.

We take your privacy very seriously. It would be impossible to locate every person when this form is changed. For that reason, this form may be changed at any time and affects all information collected.

Your name and social security number will be removed after 7 years. You will be asked to sign a new form if you are still receiving services after 7 years. You can cancel this permission by returning a completed Revocation of Consent form. This will affect sharing future information. Information shared earlier cannot be unshared.

**Questions?** Just ask. If you have questions or if you think your information was mishandled contact this agency's HMIS grievance contact. You can contact Strategies to End Homelessness if you need additional assistance:

email [HMISupport@end-homelessness.org](mailto:HMISupport@end-homelessness.org), call 513-263-2790, or mail 2368 Victory Parkway, Suite 600, Cincinnati, Ohio 45206.

**Signature:** By signing I agree to share my information with other service providers.

I understand my data may still be used:

1. To coordinate services within this organization.
2. To report the services I received to funders.
3. Complete reports, supervision, auditing, or oversight needed to get funding for homeless services.
4. When demanded by law through a court order or in a public health emergency.
5. For research to better understand homelessness and housing problems in our region.
6. By HMIS managers to troubleshoot problems or help HMIS users who work with you.

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Participant Signature

Date

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Printed Name