### **DISTRICT OF COLUMBIA HMIS DATA PRIVACY NOTICE**

This organization required or has chosen to collect personal information about the people we serve in a database called the District of Columbia HMIS (Homeless Management Information System). HMIS is a local information technology system used to collect person-level information as well as data on the provision of housing and services to individuals and families experiencing homelessness as and persons at risk of experiencing homelessness. The Community Partnership for the Prevention of Homelessness (TCP) administers the HMIS on behalf of the District of Columbia, and many organizations use HMIS, including street outreach, shelters, and housing programs to document, store, and share the information collected, as detailed below. A list of these organizations is located at community-partnership.org.

### Why do we collect this information in HMIS?

- To aid this organization in serving you and/or your family.
- To understand the needs of the individuals and families we serve, and to plan services to meet these needs.
- It is required by funders.

#### Who can see information that is in the DC HMIS?

- People who work for this organization will use your information to provide services to you and/or your family.
- Auditors or funders, such as the U.S. Department of Housing and Urban Development and other District
  Government entities, who have legal rights to review the work of this organization may request to see HMIS
  records as a part of their monitoring activities.
- TCP, the organization that administers the HMIS, has access to your information as a part of their work to administer the system. Staff from TCP may see your information when preparing reports to funders or the community or when matching individuals and families to housing resources, however, your personally identifiable information will **never** appear in research reports.
- Organizations that use HMIS will be able to see existing records in the system for the purpose of reducing
  unnecessary duplication of participant records and to verify information previously entered in HMIS. However,
  this information is limited to personally identifiable information and basic demographic information unless the
  consumer has signed a separate Release of Information.
- Organizations that participate in the District's Coordinated Assessment and Housing Placement (CAHP) system
  will be able to see CAHP related information during the resource matching process. CAHP is the process for
  implementing a "no wrong door" approach by creating standardized access to permanent housing resources.
  This process includes assessment, case conferencing, referral, and/or placement.
- Organizations and District government agencies with whom TCP enters into data sharing agreements for
  administrative or research purposes may receive raw data exports from HMIS. If at all possible, the release of
  identified data will be avoided and will be redacted from data sets. If identifiable data is needed, TCP will
  ensure that proper procedures and precautions are in place prior to releasing data.
- As required by law, this organization must:
  - o Report physical or sexual abuse of children and vulnerable adults. If this organization thinks that there is abuse or neglect in your household, we will report it to Child or Adult Protection services.
  - o Release your information to protect the health and safety of you or others.
  - Provide other disclosers as required by law, including to officials with a valid subpoena, warrant, or court order.

# How is your privacy protected?

- All persons who use HMIS must go through training and must sign an agreement stating that they will protect your privacy and comply with state and federal laws and related policies before seeing any information.
- The software used for this purpose has industry standard security protocols that is updated regularly to meet these security requirements.

# What are your rights?

- You have the right to tell your intake worker if you do not want your name, social security number, and/or
  date of birth entered in HMIS. This organization will continue to assist you even if you do not wish to allow
  the organization to enter the information. However, federal and state regulations may require that we obtain
  information from you in HMIS to maintain funding.
- You have the right to request a copy of your record within the DC HMIS.
- You have the right to correct, amend or update your information in HMIS.
- If you think this organization or the DC HMIS violated your privacy rights, you have the right to complain or appeal. You may call the complaint line at 202-671-4409 or ask a staff person for a complaint and appeal form.

# Why might I be asked to sign a Release of Information?

• In order to provide you the best services possible and coordinate assistance across service providers, like this one, we may ask you to sign a separate Release of Information (ROI) to give your permission to share more of your information with other service providers and stakeholders. If you choose to sign a ROI, more information such as your services history, household configuration, whether you (or a member of your household (are living with any disabling conditions (general terminology only, e.g., "history of mental health concerns" as opposed to specific diagnoses) and living situations prior to and/or upon exiting other programs will be visible to other organizations that use HMIS. This information will not include histories of domestic or intimate partner violence, text case notes from previous case managers, or specific diagnoses (except when necessary for CAHP purposes).

☐ I have received/reviewed a copy of the District of Columbia HMIS Policy Notice.	
☐ Verbal consent obtained.	
SIGNATURE OF PARTICIPANT OR GUARDIAN	DATE
SIGNATURE OF ORGANIZATION WITNESS	DATE
Signature of Perso	nal Representative (if applicable)
Signature	Date (required)
Relationship to the individual (required):	

You may be asked to provide us with the relevant legal document giving you legal authority to act on behalf of the individual in making decisions related to healthcare.

NOTICE TO RECIPIENT OF INFORMATION This information has been disclosed to you from records the confidentiality of which may be protected by federal and/or state law. If the records are protected under the federal regulations on the confidentiality of alcohol and drug abuse patient records (42 CFR Part 2), you 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 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

If you have any questions about anything on this notice, please email The Community Partnership for the Prevention of Homelessness, at <a href="mailto:hmis@community-partnership.org">hmis@community-partnership.org</a>.