HMIS Authorization

to Enter Personal Information



The County of Delaware Department of Human Services operates the Homeless Management Information System (HMIS) on behalf of the Delaware County Continuum of Care (CoC), a network of agencies working together to provide services to people experiencing or at risk of homelessness. HMIS is used to collect and maintain certain information about you and other members of your household (if applicable) as you access homeless and housing services in Delaware County. The information is considered confidential and privileged and cannot be exchanged, shared and/or released outside of the CoC without your express and informed written consent, except in cases of threat of harm to self or others, child abuse, or court order. HMIS is also used to submit information required by the federal government for CoC Participating Agencies to receive funding for homeless services and help identify unmet service needs.

Every Participating Agency that is authorized to access HMIS has signed an agreement to maintain the security and confidentiality of your personal information. Furthermore, the information collected in HMIS is protected in compliance with the standards set forth in the Health Insurance Portability and Accountability Act (HIPAA).

Why do we collect information about you in HMIS?

- To help agencies and case managers better understand your needs and work together to achieve your goals for housing stability.
- Connect you with other helpful agencies or benefits you may be eligible for.
- Reduce the number of times you have to tell your story.
- Identify gaps in our community resources so we can work to fill them.

What information is collected and shared?

Basic Identifying Information such as: Name, Social Security Number, date of birth, gender, race and ethnicity, Veteran status and contact information. In addition, Personal, Financial, Program and Health information such as:

- Family information
- Homeless status and history
- Type of housing you are eligible for
- Domestic violence history
- Insurance information
- Income information
- Public assistance payments and allowances
- Employment and education level
- Medical information including presence of mental or physical health conditions, disability, substance use, pregnancy status
- Program entry and exit dates, destination, type of exit, services received, and residential information

Note: HIV/AIDS status will only be shared with your written consent with other Participating Agencies.

With Whom can my Collected HMIS Information be Discussed?

Many Delaware County agencies use HMIS to improve services for you through coordination of care. If you receive services from multiple agencies that participate in HMIS, they may refer and communicate your information. The Participating Agencies include:

- Breaking Bread Community
- CareLink
- Catholic Social Services
- Community Action Agency of Delaware County (CAADC)
- Delaware County Government Offices:
 - ➤ Adult & Family Services
 - Children & Youth Services (CYS)
 - Department of Human Services
 - Housing & Community Development
 - Social Services Department of the Public Defender

- Domestic Abuse Project
- Family and Community Service of Delaware County
- Horizon House, Inc.
- Hunt's Haven
- Mental Health Partnerships
- Mothers' Home
- St. Joseph's Family Hope Center
- The Salvation Army
- Valley Youth House

Every Participating Agency (PA) that provides services to you will be able to see your basic identifying information. If you are referred to a PA through Coordinated Entry (CE), that agency will also be able to see the personal, financial, program, and health information listed above.

What are my Privacy Rights in HMIS?

You have the right to not have your personal information entered into HMIS without being denied access to services. If you do not wish to have your information entered into HMIS, the Participating Agency may enter a unique identifier in place of identifying information into HMIS to track which services are provided to you.

You have a right to inspect the data entered into HMIS. You must follow the policies and procedures in place with each Participating Agency regarding your access to agency files and records. All records and data are protected by federal, state, and local regulations governing confidentiality of Participant records and cannot be disclosed without your written consent unless otherwise authorized by law. If you have any questions or desire further information regarding this document, please contact Linda L. Loughin, Homeless Services Coordinator, Adult & Family Services at (610) 713-2365.

Consent to Release Information

Please sign below to indicate that you have read or had read to you this release, you understand the information, and that you consent to the release of information and records for the purposes indicated above. NOTE: Consenting to release your information in HMIS is not a guarantee that you will receive assistance due to limited resources and federal eligibility criteria for some programs and services. Alternatively, refusing to release your information does not affect your opportunity to receive assistance if it is available.

Participant Signature:	Dat	e:	
Staff Signature:	Date:		
Verbal Consent: Staff Initials 1:	Staff Initials 2:	Date:	
☐ Participant declined the creation of.	or addition to, their HMIS r	ecord. Date:	