

**EL PASO COALITION FOR THE HOMELESS  
HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)  
PRIVACY NOTICE**

**THIS PRIVACY NOTICE EXPLAINS UNDER WHAT CIRCUMSTANCES WE MAY SHARE  
AND DISCLOSE YOUR INFORMATION FROM THE EPCH HMIS. THIS NOTICE ALSO  
EXPLAINS YOUR RIGHTS REGARDING YOUR CONFIDENTIAL INFORMATION.**

**PLEASE READ IT CAREFULLY.**

\_\_\_\_\_ **(Organization Name)** collects and shares information about individuals who access our services. The information is confidentially stored in a local electronic database called the El Paso Coalition for the Homeless Management Information System (EPCH HMIS). The EPCH HMIS securely records information (data) about persons accessing housing and homeless services within El Paso County/City.

We ask for your permission to share confidential personal information that we collect about you and your family. This confidential information is referred to as Protected Personal Information (PPI). We are required to protect the privacy of your PPI by complying with the privacy practices described in this Privacy Notice.

### **Why We Collect and Share Information**

The information we collect and share in the HMIS helps us to efficiently coordinate the most effective services for you and your family. It allows us to complete one universal intake per person; better understand homelessness in your community; and assess the types of resources needed in your local area.

By collecting your information for HMIS, we are able to generate statistical reports requested by the Department of Housing and Urban Development (HUD).

### **The Type of Information We Collect and Share in the HMIS**

We collect and share both PPI and general information obtained during your intake and assessment, which may include but is not limited to:

- Name and contact information
- Social security number
- Birthdate
- Demographic information such as gender and race/ethnicity
- History of homelessness and housing (including current housing status and where and when services have been accessed)
- Self-reported medical history including any mental health and substance abuse issues
- Case notes and services

- Case manager's contact information
- Income sources and amounts; and non-cash benefits
- Veteran status
- Disability status
- Household composition
- Emergency contact information
- Domestic violence history
- Photo (optional)

### **How Your Personal Information Is Protected in the HMIS**

Your information is protected by passwords and encryption technology. Each HMIS user and Participating Organizations must sign an agreement to maintain the security and privacy of your information. Each HMIS user or Participating Organizations that violates the agreement may have access rights terminated and may be subject to further penalties.

### **How PPI May Be Shared and Disclosed**

Unless restricted by other laws, the information we collect can be shared and disclosed under the following circumstances:

- To provide or coordinate services.
- For payment or reimbursement of services for the Participating Organizations.
- For administrative purposes, including but not limited to HMIS Administrator(s) and developer(s), and for legal, audit personnel, and oversight and management functions.
- For creating de-identified PPI.
- When required by law or for law enforcement purposes.
- To prevent a serious threat to health or safety.
- As authorized by law, for victims of abuse, neglect, or domestic violence.
- For academic research purposes.
- Other uses and disclosures of your PPI can be made with your written consent.

### **Providing Your Consent for Sharing PPI in the HMIS**

If you choose to share your PPI in the EPCH HMIS, we must have your written consent. *Exception:* In a situation where we are gathering PPI from you during a phone screening, street outreach, or community access center sign-in, your verbal consent can be used to share your information in HMIS. If we obtain your verbal consent, you will be requested to provide written consent during your initial assessment. If you do not appear for your initial assessment, your information will remain in HMIS until you revoke your consent in writing.

**You have the right to receive services even if you do not consent to share your PPI in the EPCH HMIS.**

### **How to Revoke Your Consent for Sharing Information in the HMIS**

You may revoke your consent at any time. Your revocation must be provided either in writing or by completing the *Revocation of Consent* form. Each Participating Organization that entered information into HMIS will continue to have access to your PPI, but the information will no longer be available to any other Participating Organization.

### **Your Rights to Your Information in the HMIS**

You have the right to receive the following, no later than five (5) business days of your written request:

- A correction of inaccurate or incomplete PPI;
- A copy of your consent form;
- A copy of the EPCH HMIS Privacy Notice;
- A copy of your HMIS records; and
- A current list of Participating Organizations that have access to your HMIS data.

You can exercise these rights by making a written request to this organization.

### **Right to Make Corrections**

If you believe that your PPI in HMIS is incorrect or incomplete, you have the right to request a correction. To ask for either of these changes, send a written request, including the reason why you believe the information is incorrect or incomplete, to the HMIS Administrator of the organization that entered the information into HMIS. The organization may turn down your request if the information:

- Was not created by the organization you are requesting the change from;
- Is not part of the information that you would be allowed to look at and copy;
- Is related to another individual;
- Is found to be correct and complete.
- Is otherwise protected by law.

However, if your request for correction is denied, you have the right to request that the following language is entered next to a particular entry: “The participant disputes the accuracy of this entry.”

### **Your Privacy Rights Regarding Your Information in the HMIS**

If you believe your privacy rights have been violated, you may send a written grievance to this organization. You will not be retaliated against for filing a grievance.

If your grievance is not resolved to your satisfaction, you may send a written grievance appeal to your CoC Lead.

### **Amendments to this Privacy Notice**

The policies in this notice may be amended at any time. These amendments may affect information obtained by this organization before the date of the change. Amendments regarding use or disclosure of PPI will apply to information (data) previously entered in HMIS, unless otherwise stated. All amendments to this privacy notice must be consistent with the requirements of the federal HMIS privacy standards. This organization must keep permanent documentation of all privacy notice amendments.