## THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND/OR DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW CAREFULLY.

### Introduction

Breakthrough Urban Ministries ("this agency") wants to ensure that the information maintained in your client record remains confidential and secure and can be accessed only by individuals authorized to do so. This Notice of Privacy Practices for Protected Personal Information ("Notice") describes how your record is maintained, who has access to your record, and your rights to access the information in your record.

### What Is Protected Personal Information ("PPI")?

This agency defines PPI as any data elements that can be used directly, indirectly, or in combination to identify a client, living or deceased, and which relate to the guest's past, present, or future physical or mental health or condition, including:

Name

Date of birth

Address

Social security number

Health/disability status or condition

Telephone number

### How Will Your PPI Be Collected?

Breakthrough Urban Ministries collects PPI directly from you for the reasons discussed above. This agency may be required to collect some PPI by law or by organizations that give BTM money to operate programs. Other PPI this agency collects is important to run programs, to improve services for homeless persons, and to better understand the needs of homeless persons. BTM only collects information that this agency considers to be appropriate. The collection and use of all PPI is guided by strict standards of confidentiality.

### When And How Will Your PPI Be Used Or Released?

Your client record, or sections of it, will be released on a need-to-know basis. This means that only the information that is necessary to accomplish the specific service or treatment will be released. Your entire record will only be released in those situations when it is necessary.

Your PPI may be used for the following purposes:

To provide or coordinate services to a program participant.

To carry out administrative functions such as personnel planning and oversight functions.

For creating de-personalized client identification for unduplicated counting.

Contractual research where privacy conditions are met (including a written agreement).

Your record will be released in the following circumstances:

1. You have authorized BTM to share your information with another agency or entity to coordinate services, care and treatment on your behalf.

- 2. In some cases of government funding, Federal, State, or Local monitors or auditors are sent to BTM to conduct on-site reviews of services and client records. The records are typically selected on a random basis. This review might include the evaluation of your complete client record with BTM. This may include the review of your PPI.
- 3. Government programs at the Federal, State and Local levels, and national and local foundations require that this agency submit reports and invoices that detail the services that were provided to BTM clients. Sometimes these reports are very statistically detailed and other times the reports require only a minimal amount of information. These reports are generally submitted on a monthly, quarterly and/or annual basis. These same agencies may periodically require direct access to client records for audit purposes.

For research unrelated to your direct care and treatment, no PPI is released.

4. Each time a section of or your entire record needs to be released, you will be asked to sign an Authorization to Release/Obtain Information ("Authorization").

Authorizations are time limited; they may be valid for one (1) day or it may be valid for six (6) months. The time limit depends on the services or treatments that you are receiving.

Authorizations help you control the type and amount of your information being released.

Your decision to sign an Authorization shall be voluntary. You cannot not be denied services if you choose not to authorize sharing of your information. Disclosure of certain information, however, may enable representatives of BTM or other agencies to better link you with appropriate services.

5. An Authorization may not be required to release some or all of your PPI in the following circumstances:

You have made a serious and imminent threat to harm yourself or others.

You have committed a crime or intend to commit a crime, including abuse, neglect, or domestic violence.

BTM has received a subpoena for client records for court proceedings.

In the event of a medical emergency when you are unable to respond, to Emergency Medical Personnel.

NOTE: No release will be made without your approval except in those conditions noted above.

### How Are My PPI And Client Record Maintained And Kept Secure?

BTM receives funding from the U.S. Department of Housing and Urban Development (HUD). A requirement of this funding is that BTM use a secured Homeless Management Information Systems ("HMIS") computer system to collect information about clients receiving services from this agency. Your Electronic Client Record ("ECR") is maintained in the HMIS computer system ("Provide"), which is only accessible on BTM computers at BTM locations. Access is restricted to users who have been assigned a valid user ID by BTM. Provide automatically records every access of records by user ID, date, and time of access.

Some of the information maintained in your ECR is encrypted.

While corrections can be made to your ECR, no information can be permanently deleted.

Provide is maintained by a systems administrator who adheres to BTM security guidelines for confidentiality.

All reasonable and prudent steps have been taken to ensure confidentiality.

Even though BTM uses ETOs, paper-based correspondence will still be generated while you are receiving services; therefore, the agency must maintain a small paper client record ("PCR") to store this documentation. Security of PCRs is maintained in the following manner:

Paper Client Records remain in locked filing drawers or cabinets within staff work area.

Paper Client Records of clients no longer receiving services are maintained in a locked central location.

Only authorized staff have access to PCRs.

Both Electronic Client Records and Paper Client Records will be retained by BTM for seven (10) years. After seven (10) years of complete inactivity (i.e. no services have been provided, no requests for file access have been made), BTM will delete or destroy (i.e. shred) the file.

### How Can I Inspect Or Review My Records?

You may inspect or review your client record and request copies of sections or the entire record.

1. You may request to review your file. While you will not be given electronic access to your file, upon request you may review a complete print-out. You must give at least 5 business days notice when requesting to review your file. During your review of your file, an agency staff person will be available to explain any entries you do not understand.

- 2. You may request to have your personal information corrected so information is up-to-date and accurate. An agency staff person will document your correction request and, if the request is valid, make a corrective entry.
- 3. You may request copies of all or part of your file; you must give BTM at least 2 business days notice for printed copies. This agency charges \$.05 per page for copies made.

### How Can I Report My Concern That My Confidentiality Has Been Broken?

Any former or current program participant/client of this agency who has a concern or complaint about their privacy rights being violated as it pertains to their PPI can file a grievance in writing to the BTM Human Resources, at the address listed below. This agency will not retaliate against you if you file a grievance.

Breakthrough Urban Ministries 402 N. St. Louis, 2nd Floor Chicago, IL 60624

### How Can I Get A Copy Of This Notice?

This Notice is displayed in different areas at every BTM location.

A copy of this Notice is available to you at any time upon request. This Notice is also available at any time on this agency's website, www.breakthrough.org. The last revision date is noted on the bottom of every page of the Notice.

A representative of BTM will review this Notice with you on the day you receive your first service, and then provide you with a copy of it for your records. You will be asked to a Consent and Acknowledgment form stating that you have received and understand this Notice

### **Chicago Homeless Management Information System (HMIS)**

### **Standard Agency Privacy Practices Notice**

Version 1.3, Adopted 01/14/2015

THIS NOTICE DESCRIBES HOW INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. <u>PLEASE REVIEW IT CAREFULLY</u>.

If you have questions about this Notice, or need additional information, contact information is listed below:

Participating Agency Information	HMIS Lead Agency Information
Breakthrough Urban Ministries	Chicago Alliance to End
402 N. St. Louis Ave.	Homelessness 651 W.
	Washington, Suite 504
Chicago, IL 60624	Chicago, IL 60661

### **Chicago Homeless Management Information System (HMIS)**

The City of Chicago has a group of private agencies and City departments working together to prevent homelessness and provide services to homeless and formerly homeless individuals and families in Chicago. This Agency is one of those agencies and when you request services from us, we enter information about you and members of your family into a computer system referred to as the Homeless Management Information System ("HMIS").

HMIS is a software system and database used by many agencies in Chicago that provide services to persons and families in need. HMIS is administered and governed by the Chicago Planning Council on Homelessness, which is staffed by the Chicago Alliance to End Homelessness, referred to as the HMIS Lead Agency. The information collected in HMIS help this Agency improve service delivery, better understand homelessness, and evaluate the effectiveness of our services.

### **Your Benefits For Providing Information**

The information you provide will be entered into the HMIS. Authorized individuals at this Agency will have access to your information for the uses described in this Notice. We can also use your information to more quickly help you find the services you need and to determine whether or not you are eligible for them. We use HMIS to reduce the amount of time we spend preparing reports to organizations that fund our programs, allowing us to provide more services to you.

In addition, this Agency shares information with other participating agencies that use HMIS and your personal identifiers will be disclosed to these agencies so they can easily locate your record if you seek services from them. Your personal identifiers are listed in the section below. You may request that this information is not shared.

### **How Your Information In HMIS May Be Used**

Agencies that use HMIS share basic information (such as Name, Social Security number, Date of Birth, Gender and Veteran Status) with other participating agencies. Unless restricted by law or by the person who contributes that personal information, HMIS client information may be used or disclosed for any of the reasons set forth below. Uses involve sharing parts of HMIS client information with persons within an agency. Disclosures involve sharing parts of HMIS client information with persons or organizations outside of an agency.

### **Chicago Homeless Management Information System (HMIS)**

- Case Management Uses and Disclosures: Agencies may use or disclose client information for
  case management purposes associated with providing or coordinating services. Unless a
  client requests that his/her record remain hidden, personal identifiers will be disclosed to
  other participating HMIS agencies so other agencies can easily locate the client's record if
  he/she goes to them for services. Beyond personal identifiers, each agency can only disclose
  other client information with other agencies if the client has provided a written client consent
  or another type of specific waiver.
- Administrative Uses and Disclosures: Agencies may use or disclose client information
  internally to carry out administrative functions, including but not limited to legal, audit,
  personnel, oversight and management functions. Client information will be stored on a central
  citywide case management database; client information will be disclosed for system
  administration purposes to the Lead Agency or to service providers who work on our behalf.
- Billing Uses and Disclosures: Agencies may use or disclose client information for functions
  related to payment or reimbursement for services. An example might include generating
  aggregate reports for the people and organizations that fund an agency. A client's personal
  information may be disclosed for billing or reimbursement purposes, if required by the
  funder/billing agency.
- Analytical Uses and Disclosures: Agencies may use client information for internal analysis. An example would be analyzing client outcomes to evaluate program effectiveness. Agencies will also disclose client personal identifiers to the central system administrators for uses related to creating an unduplicated database on clients served within the system, ultimately resulting in the creation of de-identified personal information. Agencies and the HMIS lead may disclose client's information for research and purposes related to analyzing client data, including but not limited to understanding trends in homelessness and needs of persons who are homeless, and assessing the implementation of Chicago's Plan to End Homelessness. The Agency or HMIS lead must ensure that there are signed research agreements with the research entity or individual before sharing any data. Only aggregate data will appear Name, Social Security Number and other identifying information will not appear in any publication or research report.

Agencies may always disclose HMIS client information for any of the following reasons set forth below.

- As Required by Law: Agencies may disclose your personal information to comply with requirements of law.
- To Avert a Serious Threat to Health and Safety: Agencies may disclose your personal information if any such agency believes it is necessary to prevent or lessen a serious and imminent threat to the health and safety of an individual or the public, and if that information can be disclosed to a person who is reasonably able to prevent or lessen that threat.
- To Report Victims of Abuse, Neglect or Domestic Violence: Agencies may disclose your information to an agency or governmental authority authorized by law to receive reports of abuse, neglect or domestic violence if any such agency believes you are a victim of abuse, neglect or domestic violence. The agency may only disclose information in this circumstance if (1) the disclosure is required by law, (2) if you agree to the disclosure, or (3) if this agency believes the disclosure is necessary to prevent serious harm.
- **For Law Enforcement Purposes**: Agencies may disclose your information to law enforcement entities only in response to appropriate legal requests. A subpoena or court order may be required, but the disclosure must meet the minimum standards necessary for the immediate purpose and not disclose other information about the individuals.

### **Chicago Homeless Management Information System (HMIS)**

A HMIS client information record will be stored in the HMIS with personal identifiers for the period of time required by applicable law. Beyond that point, all personally identifying information will be removed and the remaining information will only be retained in a de-identified format. Unless client information is required to be shared or disclosed by applicable law, due to agency policy or as a condition of a provider agreement, you may revoke your consent to share your client information with other agencies at any time in writing, except with regard to any information this Agency has already used or disclosed in accordance with this Notice.

### **Your Rights Regarding Your Information In The HMIS**

- You have the right to inspect and obtain a copy of your own protected personal information for as long as it is kept in the HMIS, except for information compiled in reasonable anticipation of, or for use in, a legal proceeding. You have a right to have the form and format HMS client information record any information explained to you in reasonable detail.
- You have the right to request correction of your protected personal information in the HMS client
  information record when the information in the record is inaccurate or incomplete. This request
  must be made in writing to the HMS Lead Agency. Your request must explain why your protected
  personal information should be amended. We will provide you with a timely response on your
  request.
- The Agency provides service to any person or family regardless of age, gender, religion, disability, nationality, sexual orientation, race, ethnic or cultural group, who meets program requirements. We will make every effort to communicate with you in a familiar language and use communication technology to address difficulties in hearing and sight.

### **Exercising Your Rights Regarding Your Information In The HMIS**

You can exercise these rights by making a written request to this agency, or by making a written request to the HMIS Lead Agency. The addresses are listed at the beginning of this Notice.

### **Enforcement of Your Privacy Rights**

If you believe your privacy rights have been violated, you may send a written complaint to this Agency. If your complaint is not resolved to your satisfaction, you may send your written complaint to the HMIS Lead Agency. Addresses are listed at the beginning of this Notice. You will not be retaliated against for filing a complaint.

This Agency is required by law to maintain the privacy of your protected personal information, and to display a copy of the most recent Standard Agency Privacy Practices Notice.

### **Revisions to This Notice**

This Notice may be amended at any time and amendments may affect information obtained from you prior to the date of the change. An amendment will be effective to all information previously collected, unless otherwise stated. We will maintain a record of all amendments.

## **Chicago Standard HMIS Privacy Posting**

Version 1.3, adopted 01/14/2015

# **HMIS Client Information System**

This notice describes how this agency will use and protect the information about you that is entered into Chicago's HMIS client

information sy Nα	information system and your rights to decide how your information is shared. The policies stated in the Standard Agency Privacy Notice can be amended at any time. Please read the full Standard Agency Privacy Practices Notice for more details.	<ul> <li>I. The policies stated in the Standard Agency Privacy Practices</li> <li>Agency Privacy Practices Notice for more details.</li> </ul>
Why we	• We use the personal information to run our programs and to help us improve services.	nd to help us improve services.
collect your information	<ul> <li>We use the information to get a more accurate picture o the need for different services.</li> </ul>	a more accurate picture of individuals and families who are homeless and to $$ identify $$
Agency use	• Information will be entered into Chicago's HMIS comput of information are shared with other agencies, unless you	ito Chicago's HMIS computerized client information system and only certain pieces other agencies, unless you specifically request otherwise.
or your information	<ul> <li>Your personal information entered into Chicago's HMIS will be shared only as permitted or required by law or as authorized by you.</li> </ul>	will be shared only as permitted or required by law or as
Your	<ul> <li>By providing your information, we may be able to reduce receive services at another agency.</li> </ul>	<ul> <li>By providing your information, we may be able to reduce the amount of information we have to ask you when you receive services at another agency.</li> </ul>
peneiits to	• We can use your information to more quickly identify se	• We can use your information to more quickly identify services you may need and those for which you are eligible.
information	<ul> <li>We use HMIS to reduce the amount of time we spend on preparing reports to our funders allowing us to provide more services to you.</li> </ul>	preparing reports to our funders allowing us to provide
	• You have the right to request a copy of the Standard Agency Privacy Practices Notice from this agency.	ncy Privacy Practices Notice from this agency.
Your rights and choices	<ul> <li>You have the right to change your mind about allowing your information to be shared with other Chicago HMIS partner agencies.</li> </ul>	our information to be shared with other Chicago HMIS
	<ul> <li>You have a right to review the personal information that they be corrected.</li> </ul>	personal information that we have about you. If you find mistakes you can request
	Agency Information (hereinafter "this agency")       H         Agency       Breakthrough Urban Ministries       A	HMIS Lead Agency Information: Chicago Alliance to End Homelessness
Contact Information	402 N. St. Louis Ave.	651 W. Washington, Suite 504 Chicago, Illinois 60661
	City, State, Zip Chicago, IL 60624	Phone: 3123790301