

# Authorization of Release of Confidential Information

Organization:	Program:
Head of Household:	Date of Birth:
Other Household Names:	

When you request or receive services through a homeless response program within the Central Virginia Continuum of Care, we collect information about you and members of your household to improve service coordination, help meet your needs, and fulfill program requirements.

#### What information is collected?

Depending on your situation, you may be asked for some or all of the following for you and your household:

- Basic identifying information (name, SSN, date of birth, etc.)
- Demographic information (race, ethnicity, gender, etc.)
- Housing information (homeless status, length of time homeless)
- Income and benefit information (source and amounts, employment information)
- Health related information (disability information, substance abuse history, etc.)
- Housing barriers (criminal convictions, eviction history, etc.)

#### Why is information collected?

- To better assess your needs and the needs of others experiencing or at risk of homelessness
- To make it easier for households to access housing resources and receive services across multiple agencies
- To analyze aggregate data on issues and programs related to homelessness

#### How is information stored?

Collected information is stored both in your physical case file, a by-name-list of all homeless persons and in a Homeless Management Information System (HMIS). The HMIS is a system that uses computers to collect information about homelessness in order to help pay for and coordinate services to people who are homeless. Households residing in domestic violence shelters will not have their information stored in a HMIS.

#### How is information protected?

All CVCoC agencies must abide by state and federal laws to protect your data. CVCoC Policies and Procedures establish additional requirements to ensure that your information is kept confidential. All paper files are kept in locked cabinets and information entered into the CVCoC's database (HMIS) is encrypted to ensure security. Information will only be shared outside of the CVCoC as required by law.

#### How is information shared?

Witness

- If you choose to sign the release of information, your household record will be made available to agencies within the Central Virginia Continuum of Care who also enter household data into the HMIS. Households residing in domestic violence shelters will not have their information entered into the HMIS.
- Representatives from agencies working with the CVCoC may also receive limited information through participation in the Coordinated Entry System in order to help resolve your housing crisis.
- This agreement may be revoked at any time.
- You may obtain a copy of your information at any time upon written request.
- Your decision to sign or not sign this consent document will not be used to deny outreach, shelter or housing services.
- If you have questions or complaints regarding the privacy or security of your information, you may contact:

Miriam's House, 409 Magnolia Street, Lynchburg, VA 24503 OR email francis@miriamshouse.org

### Consent

# I have read the above information and authorize agencies within the Central Virginia Continuum of Care to share my information as outlined for the purposes outlined. I agree that this consent is in effect for three years.

Signature of Head of Household	Date
Signature of Agency Witness	Date
Printed Name of Agency Witness	Expiration Date (3 years from start)

## **Consent Revocation**

I, (client), wish to rev as of (date). This revocation will not affect any disclosur notice.		voke the above release of information effective ures already made prior to the cancellation	ē
Signature of client		Date	

Date