

HMIS End User Policy and Code of Ethics

HMIS User Name and Title (Please Print)

Let		

USER POLICY

Partner Agencies who uses Chicago Homeless Management Information System (HMIS) and each User within any Partner Agency is bound by various restrictions regarding Protected Personal Information ("PPI")¹. The employee, contractor, or volunteer whose name appears above is the **User**.

It is a Client's decision about what level of PPI information is to be shared with any Partner Agencies.

The **Client Consent Form** for data sharing shall be signed by the Client before any PPI is designated for sharing with any Partner Agencies, or in the case of the Homelessness Prevention Call Center, verbal consent shall be obtained as described in the HMIS Standard Operating Procedure. The User shall ensure that prior to obtaining Client's consent; the agency's HMIS Notice of Privacy Practices was fully reviewed with Client in a manner to ensure that Client fully understood the information.

USER PRINCIPLES

A User ID and Password gives you access to the Chicago HMIS. **You must initial each item below** to indicate your understanding and acceptance of the proper use of your ID and password. Failure to uphold the confidentiality standards set forth below is grounds for your immediate termination from HMIS.

(Initial each line below)

I understand that I have an obligation to maintain Client privacy and to protect and safeguard the confidentiality of Client's PPI. PPI shall include, but not be limited to, the Client's name, address, telephone number, social security number, type of medical care provided, medical condition or diagnosis, veteran status, employment information, and any and all other information relating to the Client's programming.	
My User ID and Password are for my use only and must not be shared with anyone, including my supervisor(s). I must take all reasonable means to keep my Password physically secure.	
I understand that the only individuals who can view information in the HMIS are authorized users who need the information for legitimate business purposes of this Agency and the Clients to whom the information pertains.	
I may only view, obtain, disclose, or use information within the HMIS that is necessary to perform my job.	
If I am logged into the HMIS and must leave the work area where the computer is located, I must secure the computer before leaving the work area.	
Any hard copies of PPI printed from the HMIS must be kept in a secure file, and destroyed when no longer needed, in accordance with Agency's records retention policy. I will not leave hard copies of PPI in public view including, but not limited to on desks, or on a photocopier, printer, or fax machine.	
I will not discuss PPI with anyone in a public area.	
I have reviewed the Agency's HMIS Notice of Privacy Practices and the HMIS Standard Operating Procedures understand each of those documents, and agree to abide by them.	
If I notice or suspect a security breach, I must immediately notify the Executive Director of the Agency and the HMIS System Administrator at hmis@allchicago.org	

¹ Protected Personal Information is information about a client: (1) whose identity is apparent from the information or can reasonably be ascertained from the information; or (2) whose identity can be learned, taking into account any methods reasonably likely to be used, by linking the information with other available information or by otherwise manipulating the information.



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I understand that any violation of this Agreement may also be considered a violation of my employment relationship with this Agency, and could result in disciplinary action, up to and including termination of my employment or affiliation with Agency, as well as potential personal civil and criminal legal fines and penalties.

USER CODE OF ETHICS

- A. Users must be prepared to answer Client questions regarding the HMIS.
- B. Users must respect Client preferences with regard to the sharing of PPI within the HMIS. Users must accurately record Client's preferences by making the proper designations as to sharing of PPI and/or any restrictions on the sharing of PPI.
- C. Users must allow Client to change his or her information sharing preferences at the Client's request (*i.e.*, to revoke consent) (except if that policy is over-ridden by Agency policy or if the information is required to be shared as a condition of a provider agreement).
- D. The User has primary responsibility for information entered by the User. Information Users enter must be truthful, accurate and complete to the best of User's knowledge.
- E. Users will not solicit from or enter information about Clients into the HMIS unless the information is required for a legitimate business purpose such as to provide services to the Client.
- F. Users will not include profanity or offensive language in the HMIS; nor will Users use the HMIS database for any violation of any law, to defraud any entity or conduct any illegal activity.

PASSWORD PROCEDURES

By signing this Agreement, the User agrees to the following:

Passwords are the User's responsibility and the User may not share passwords. They should be securely stored and inaccessible to other persons—including your supervisor(s). Passwords should never be stored or displayed in any publicly accessible location without All Chicago's permission.

I understand and agree to comply with the above User Policy, User Principles, User Responsibilities,
Password Procedures, and User Grievance Procedure.

USER GRIEVANCE PROCEDURE

If a User has a grievance with this Code of Ethics, that User may send a written complaint to their HMIS Agency Technical Administrator (ATA). If the complaint is not resolved to the User's satisfaction, the User may send a written complaint to: All Chicago Making Homelesness History; 651 W. Washington, Suite 504, Chicago IL 60661

Attn: HMIS System Administrator.

HMIS User Signature	Date
HMIS User Login (Username)	
Email Address	
Supervisor Signature	Date