

Cambridge, MA HMIS and Cambridge
Coordinated Access Network (C-CAN)
Client Consent Form

What is the Cambridge HMIS and Cambridge CAN?

The Homeless Management Information System (HMIS) is a computerized data collection system designed to collect client information about the characteristics and service needs of individuals and households at risk of or experiencing homelessness. The information collected in HMIS will help us to analyze and improve service delivery, identify programs you are eligible for, better understand homelessness, and evaluate the effectiveness of our services. The Planning and Development Office of the Department of Human Services for the City of Cambridge is the HMIS Lead Agency as defined by HUD. Clarity Human Services is the HMIS application used by the Cambridge Continuum of Care (CoC). The Cambridge Coordinated Access Network (Cambridge CAN/C-CAN) is the coordinated homeless response system for the City of Cambridge, MA.

In Cambridge, all the agencies that participate in entering client data in HMIS share some of that data with each other if needed. This means that if you receive services from a program participating in the Cambridge HMIS and later need assistance in another program that also participates, staff at the second agency will search for your name and be able to find your profile. Then you will be asked to confirm your existing information in HMIS (like your name, date of birth and social security number). The second agency will be able to see what kind of services you've received in the past. If you are enrolling in C-CAN, staff you work with will be able to use your HMIS record to help provide documentation of your time experiencing homelessness.

If you would like to see a list of the agencies that participate in the Cambridge HMIS, please ask the agency you are receiving services from presently for a list of the Participating Agencies or visit cambridgecoc.org/hmis-participating-agencies/. Please note that the list of agencies contributing data to HMIS can change frequently and without notice, therefore the website should be referred to for the most current list.

Because Cambridge HMIS contains sensitive data, we take your privacy very seriously. The following protections for your data are in place:

- Individual client data is only viewable by certain qualified staff at each participating agency
- In order to participate in the Cambridge HMIS, leaders at each agency must sign a Partner Agency Agreement that includes a commitment to protecting client data and maintaining confidentiality.
- In order to use HMIS, agency staff must successfully complete trainings that inform them of how to protect client privacy.
- The Cambridge HMIS is hosted on a secure server and is data encrypted.

What information is collected in the HMIS database?

We collect Personal Identifying Information (PII) and general information obtained during your intake and assessment, which may include but is not limited to:

- Your name and your contact information and address
- Your social security number and date of birth
- Your basic demographic information such as gender, race and ethnicity
- Your veteran status
- Your photo (at select agencies only and is optional)
- Your history of homelessness and housing (including your current housing status, and where and when you have accessed services)
- Documents related to housing eligibility

If you are assessed for C-CAN, we also may share self-reported medical history and disability status, including mental and physical health concerns, substance abuse history, and HIV/AIDS status, income sources and amounts, and non-cash benefits, information about other members of your household and your self-reported history of domestic violence.

Why is this information collected?

- To provide and coordinate services
- To assess your needs and the needs of others in our community
- To reduce the duplication of information
- To reduce the amount of time you spend trying to get services and make sure you get the services you need
- To meet requirements of funders such as the U.S. Department of Housing and Urban Development (HUD)
- To develop and improve programs to work towards ending homelessness in our community

How is the information used?

- Based on your needs, social service and housing provider agencies may use HMIS to exchange, share and/or release information collected about you. The purpose of this form is to receive your permission to share this information as needed.
- This may include coordinating referrals for housing services and, if applicable, help in verifying instances of homelessness.
- Information may be used for research and evaluation. If so, your personal identity will never be a part of any research reports.

What are my rights?

- You have the right to receive services, even if you do not sign this consent form. Providers may not refuse to provide you with services if you refuse to sign, but they are still required to ask you questions for intake and enter that information into HMIS, however, they will either lock the

record (preventing it from being seen by other participating agency staff) or de-identify it so there is no way of determining your identity. If you are actively fleeing domestic violence, we are prohibited from entering any identifying data about you in HMIS. If you are assessed for C-CAN, your signature on this document will help us determine your eligibility for housing programs.

- If you have enrolled in C-CAN, you may stop your participation in that program at any time by contacting the C-CAN Coordinator at cambridgeCAN@cambridgema.gov or 617-349-7715.
- You have a right to see a copy of the information in your HMIS record and to ask for changes upon written request.
- You have a right to request a copy of our Privacy Notice, which provides more detail on how we may use or disclose information collected in HMIS.
- This form will expire seven years from the date you signed it. You may revoke your consent at any time prior, but your revocation must be provided either in writing or by completing the Revocation of Consent form. The agency you are receiving services from must make this form available to you if you ask. You understand that revoking consent will not change anything about information disclosures that have already occurred.
- If you have any questions or you feel your information has been misused in any way you can contact the Cambridge CoC by emailing PlanningDev@cambridgema.gov or calling 617-349-6206.

SIGNATURE AND ACKNOWLEDGEMENT

By signing below, I affirm that I have read this document, or it was read to/or explained to me and I understand and agree with the terms of this document.

NOTE: If you have a family/household with dependents under age 18, please complete the back of this form as well.

Client Name (printed) _____

Client Signature _____

Date ___/___/___

Agency Witness/Staff Name _____

Agency Witness/Staff Signature _____

Date ___/___/___

Agency Name _____

Minor Children (if any):

Name: _____ DOB: __/__/__

Name: _____ DOB: __/__/__

Name: _____ DOB: __/__/__

Name: _____ DOB: __/__/__

Name: _____ DOB: __/__/__

Name: _____ DOB: __/__/__