

**Orange County
Client Management Information System (CMIS)
Client Consent Form**

I. General Client Confidentiality:

The Client Management Information System (CMIS) will gather and maintain data to: (a) provide individual case management; (b) produce reports regarding utilization of services; (c) track individual program outcomes; (d) provide accountability for individuals and entities that provide funds for use in Orange County; (e) identify unfilled service needs and plan for the provision of new services; and (f) allocate resources among agencies engaged in the provision of services in and around Orange County.

Generally, an agency may not disclose any information contained within this system that could identify a client unless:

1. The client consents in writing;
2. The disclosure is allowed by a court order; or
3. The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research audit or program evaluation.

Federal law and regulations do not protect any information about a crime committed by a client either at the shelter or against any person who works for the shelter or about any threat to commit such a crime.

Federal laws and regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate state or local authorities. (See 42 USC 290dd-3 and 42 USC 290ee-3 for federal laws and 42CFR Part 2 for federal regulations.)

_____(Please initial) I understand and acknowledge that the data pertaining to the services provided to me by the Agency and the records maintained by the Agency may include medical/health information and other information the privacy of which may be protected by federal and or California law and expressly consent to the release of such information as well as the information expressed in the sections above regarding crimes and child abuse/neglect.

II. The OC CMIS and LA/OC HMIS:

The Orange County CMIS is an electronic, web-enabled database used to store information about clients utilizing housing and homelessness services in Orange County. Within the Los Angeles/Orange County HMIS Regional Collaborative, there are four separate Continua of Care including: the Los Angeles Homeless Service Authority (LAHSA), the Orange County Continuum of Care, the City of Glendale and the City of Pasadena. HMIS data for each continuum resides in a secure database containing data from agencies within their respective continuum. As a general rule, data sharing will be initially limited to participating agencies within a particular continuum. However, with client consent, data may be shared within the LA/OC Regional HMIS to avoid duplicative client intakes. The LA/OC Regional HMIS Collaborative reserves the right, at a later date, to expand data sharing to include collaborative wide data. This database enhances the delivery of client services by providing the ability for program staff to electronically track individual cases over time. The LA/OC Regional HMIS is also used to produce aggregate reports that can be used to track program outcomes, provide accountability for program funders, identify unfilled service needs, and plan for new service provision.

All agencies, which have been granted access to the LA/OC HMIS, have agreed to abide by all laws, and the LA/OC HMIS Policies and Procedures pertaining to client confidentiality and user conduct. Individual client data is available through the LA/OC Regional HMIS to non custodial agencies only in cases where the internal policies of the agency entering the data, specific inter-agency data sharing agreements and client consent forms allow such sharing.

III. Inter-Agency Client Intake Data Sharing:

Basic client profile data, which includes client intake information, may be shared with agencies participating in the OC CMIS in an effort to reduce the event of duplicative client intakes. The information that may be shared includes client and household demographics, education and employment history, photo identification and other related documents. No individual client data will be shared outside of the OC CMIS or with any LA/OC Regional HMIS user without explicit client permission.

With the exception of the data indicated above, no individual client data will be shared outside of the LA/OC HMIS, or with any other LA/OC Regional CMIS user, without explicit client permission. The client has the right to decline permission to share their information within in the LA/OC Regional HMIS

IV. Agency-Specific Extended Data Sharing

Client may consent to having other data in addition to Client Intake Information shared with specified agencies throughout the LA/OC region. The client will acknowledge on the Extended Data Sharing form each instance of sharing to be allowed with a specific agency. Please complete the form Agency-Specific Extended Data Sharing to provide extended data sharing consent. Extended data sharing to specific agencies will *only* be provided if client signs the Agency-Specific Extended Data Sharing form.

V. Client Rights and Consent:

By signing below, I understand and acknowledge that, based on agency policy, I have the right to: (a) inspect, copy, and request amendment of records maintained by the Agency related to the provision of services to me and to receive a paper copy of this form; (b) request restriction of how my data, information and records are utilized and disclosed but that the Agency is not required to agree to such requested restrictions; (c) request that the Agency communicate with me about my services in a manner designed to promote confidential communications; and (d) if I believe my privacy rights have been violated I may file a grievance with the Agency or the OC CMIS by providing written notice of the alleged violation. I understand I will not be retaliated against for filing such a complaint.

By signing below, I also understand and acknowledge that I have the right to opt out of having my data, information and records shared with the OC CMIS and other affiliated agencies upon written notice to the Agency. I understand I have the right to not answer any questions unless entry into the Agency's program requires it. I further understand and acknowledge that I may revoke this consent at any time upon written notice to the Agency. However, I understand and acknowledge that regardless of my decision to opt out or revoke consent, my data may be disclosed to the OC CMIS and included in an aggregated and de-identified form for purposes of making future policy and program decisions.

By signing below I consent to the collection of OC CMIS data pertaining to my participation in this shelter program. I understand that data pertaining to my shelter stay may be used for case management as well as research and evaluation, and I am entitled to the results of any such research or evaluation reports.

I understand that I am entitled to services even if I choose not to consent to data sharing subject to the agency's specific program requirements.

Consent Level (please initial one): _____ Region _____ Organization

Signature

Date

_____(Please initial) I understand and acknowledge that the Agency is required to abide by the terms of this notice but that the Agency reserves the right to change the terms of this notice and to make such revised or changed notice effective for information already held by the Agency as well as information received in the future.