HMIS User Agreement

Name (End User): _____

Service Provider: _____

RECITALS

The Idaho Housing and Finance Association (IHFA) Homeless Management Information System (HMIS) of choice is ServicePoint. ServicePoint (trademarked and copyrighted by Bowman Systems L.L.C. a Mediware Company) is a client information system that records the use of housing and services which communities can use to determine the utilization of services of Affiliated Service Providers[1], hereafter referred to as "Service Provider (s)", identify gaps in the local service continuum, and develop standardized measurements and report outcomes.

IHFA has instituted the use of HMIS in response to the requirements of the United States Congress under the HUD Appropriations Act HR_2620 and as directed by the United States Department of Housing and Urban Development (HUD) requiring the implementation and operating of management information systems for the purposes of collecting unduplicated counts of Clients accessing homeless and housing services and analyzing patterns of use of assistance funded by the federal government.

IHFA is the owner and operator of the IHFA Homeless Management Information System (HMIS). IHFA has been designated as the HMIS Lead for the Idaho Balance of State Continuum of Care and serves as the system administrator for HMIS under the terms of this Agreement.

The Service Provider is assisting persons experiencing or at risk of homelessness and is therefore a participant in using HMIS for individual recipients, hereafter referred to as "Client (s)".

The Parties hereto agree to the following terms and conditions, which include the recitals.

GENERAL SECTION

Service Providers may share information for the provision of services to eligible persons through a networked infrastructure.

Service Providers shall at all times have rights to the data pertaining to their Clients that was created or entered by them in HMIS, subject to requirements under the law. Service Providers shall be bound by all restrictions imposed by the Service Provider's Clients pertaining to the use of Protected Personal Information[2] (PPI).

It is a Client's decision whether their PPI entered into HMIS shall be shared with other Service Providers. The Client Consent & Release of Information Authorization shall be signed if the Client agrees to share their information with other Service Providers.

Minimum data entry required on each Client includes, but is not limited to, the Universal Data Elements as listed below:

Refer to the HMIS Data Standards Manual released by HUD for additional information.

Universal Data Elements		
Name	Gender	Destination
Social Security Number	Veteran Status	Relationship to Head of Household
Date of Birth	Disabling Condition	Client Location
Race	Project Start Date	Housing Move-In Date
Ethnicity	Project Exit Date	Living Situation

Data necessary for the development of aggregate reports of homelessness services, including services needed, services provided, referrals and Client goals and outcomes should be entered to the greatest extent possible, subject to the Client's consent or restrictions.

HMIS is used to assist Service Providers in focusing services and locating alternative resources to help persons experiencing or at risk of homelessness. Therefore, the Service Provider staff should use the Client information in the HMIS system to target services to the Client's needs.

USER RESPONSIBILITY

Your User ID and password give you access to HMIS for the Idaho Balance of State Continuum of Care. As an HMIS User you are responsible both for entering data that is as complete and accurate as possible and abiding by strict security, privacy, and confidentiality standards governing how you treat Client data that is collected for, entered into, and generated by HMIS.

Initial each item below to indicate your understanding and acceptance of the proper use of your User ID and password. Failure to uphold the standards set forth below is grounds for immediate termination from the HMIS system and may be subject to further penalties including, but not limited to, legal action.

_____ **My User ID and Password are for my use only and must not be shared with anyone; I must take all reasonable means to keep my Password secure.**

_____ I understand that the only individuals who are allowed to view information in HMIS are authorized users and the Clients to whom the information pertains.

_____ I may only view, obtain, disclose, or use the database information that is necessary to perform my job.

_____ If I am logged into HMIS and must leave the work area where the computer is located, I **must lock-up or log-off** of HMIS before leaving the work area. A computer that has HMIS open and running shall never be left unattended. Failure to lock up or log off HMIS appropriately may result in a breach in Client confidentiality and system security.

_____ Hard copies of HMIS information, if needed, must be kept in a secure file.

_____ When hard copies of HMIS information are **no longer needed**, they must be properly destroyed.

_____ If I notice or suspect a security breach, I must immediately notify the Service Provider Administrator for the HMIS system or the System Administrator.

_____ Any person or Service Provider that is found to violate their agreement may have their access rights terminated and may be subject to further penalties including but not limited to legal action.

_____ I understand that to maintain the security of HMIS my computer must install system updates at least every 30 days and be equipped with antivirus software that scans my computer regularly as well as a password-protected screensaver that times out during periods of inactivity.

USER CODE OF ETHICS

1. I will maintain high standards of professional conduct in my capacity as an HMIS User.
2. I will maintain the confidentiality of client data as outlined above and in the HMIS Policy and Procedures Manual.
3. I will treat affiliated Service Providers and their Clients with respect, fairness, and good faith.

I understand and agree to comply with all the statements listed above.

_____

HMIS User Signature   **Date**

_____

HMIS Lead Agency Signature   **Date**

NOTE: The User Agreement Forms will be retained by the HMIS Lead for a period of time not less than the duration the User has a User ID and password.

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[1] All entities that have agreements to access the HMIS system as administered by IHFA, as well as IHFA and HUD.

[2] Protected Personal Information: Any information that can be used to identify a particular individual. Protected Personal Information includes without limitation a Client's name, Social Security Number, Date of Birth, and such personal identifying information that identifies directly, indirectly, by linking with other identifying information to identify a specific individual, or can be manipulated by a reasonably foreseeable method to identify an individual.