Idaho HMIS Privacy Notice

Agency Name: SCCAP Address: 550 WASHINGTON ST. S. PO BOX 531 Programs: EMERGENCY SHELTER GRANT CONTINUUM OF CARE RAPID REHOUSING Supporting Services FOR VETERANS + Idaho Housing		
Phone:	PO BOX 531 Phone: (208) 733.9361 PANILIES NON PEDERAL HONGLESS PREVENTION Supportive Services for Veterans + FANILIES Association Association	
This Agency participates in the Idaho Homeless Management Information System (HMIS)		
This notice briefly describes how we may use and disclose information we have about you and how you can access that information.		
Scope	This statement applies to Idaho HMIS, the Affiliated Service Providers having an agreement to access this HMIS, as well as Idaho Housing and Finance Association (IHFA) and the Department of Housing and Urban Development (HUD). HMIS is a human services database that keeps track of the clients we serve and the services that we provide. We collect information that we consider to be appropriate or as defined in the HUD HMIS Data Standards.	
Uses and Disclosures	 Information you provide will be entered into the Idaho HMIS network system. Information you provide will be used for administrative and operational purposes to improve, provide and coordinate services that can be offered you. Information you provide will be used for functions related to payment or reimbursement for services. Information you provide will be used to monitor program effectiveness. Information you provide will be used to prepare reports and statistical information without Protected Personal Information. Information you provide concerning physical or mental health problems will not be shared with anyone other than the HMIS System Administrator, the COC System Administrator, or this Service Provider, unless authorized by you. Protected Personal Information will not be disclosed to any third-party, unless authorized by you. Protected Personal Information will not be disclosed to any State or Federal Agency except as required by law; or to avoid a serious threat to health or safety. Failure to provide the requested information may limit the Service Provider's ability to provide services or refer you to other necessary services. 	
Your Rights and Choices	 Determine the level of disclosure of your information; allow or refuse to share May terminate the Client Privacy Notice & Release of Information Authorization notice. Are entitled to a copy of this notice. May request information on your records, profile and services information on Are allowed to view your record, have corrections made to your record, and 	ation at any time, by providing this service provider ontained in the Idaho HMIS database.
Other Important Information	For more information contact the Idaho HMIS System Administrator. We reserve the right to change this notice at any time. This notice is not a legal contract. We accept and consider all questions or complaints regarding HMIS Idaho	HMIS Security & Compliance Coordinator Dave Rossow Idaho Housing and Finance Association 208-331-4785 Toll Free 1-877-447-2687 Fax 208-331-4808 hmis@ihfa.org http://www.ihfa.org/grants.hmisdocuments.asp