

Revised 11/9/2016

CT-HMIS AUTHORIZATION FOR RELEASE OF INFORMATION



It is up to you whether you want to sign this form. The information you allow us to disclose could later be re-disclosed by the recipient and if that person or organization is not a health plan or health care provider, the information may no longer be protected by Federal privacy regulations. Your decision whether to complete this form will not affect your eligibility for benefits, treatment, payment, or enrollment in other services.

The Connecticut Homelessness Management Information System (CT HMIS) is a shared system. This means that authorized CT HMIS Participating Agencies will enter your information into the CT HMIS database. These participating agencies will have access to the information that is entered into HMIS. Sharing your data allows service providers to see if they have housing services that fit your needs. It does not guarantee that you will receive housing. The type of information collected in the system includes basic identifying information for you and each member of your household (including name, SSN, date of birth, gender, race, ethnicity, household information, phone number, military veteran status, phone numbers, military veteran status, and disability status). The information entered into HMIS may include information regarding your physical and mental health, including history of substance abuse or HIV/AIDs; whether you are currently receiving services or treatment; and about referrals for services and housing by participating agencies.

A list of participating agencies which will have access to your information is attached. To see a list of participating agencies please go to this website: CT HMIS Participating Agencies List
Amendments and/or changes are made to this list from time to time. You may request an updated paper copy from The Connecticut Coalition to End Homelessness (860-721-7876) at any time.

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|-------------------|--|--|
| NA | ME (LAST, FIRST): | DATE OF BIRTH: |
| info | uthorize the agencies referenced above to input my information ormation stored there for the purpose of ensuring effective coor cessed from CT HMIS will not be used in any way to diagnose of | rdination of services. Information entered into or |
| 0 | I understand that my information may be used for research, erresearch projects that match my needs with other agencies or will always be protected by federal and state privacy laws. My research reports. | r programs that may assist in getting me housing. I |
| 0 | A representative of the Columbus House, Inc. has explained me and given me a written copy of the explanation. | d my rights with regard to the CT HMIS Project to |
| 0 | I can ask to see a document which lists the persons who have have any concerns about how my personal data is being used contact Maria Laporto Director of Quality Assurance at 203 | d or entered into the CT HMIS database I can |
| l ui | nderstand that if I need homeless assistance in the future, I will | be asked to complete this consent form again. |
| pro per suf | NOTICE TO RECIPIENT OF CL or part of this information may have been disclosed to you from recombinities you from making any further disclosure of this information working, or as otherwise permitted by said law(s). A general authorize ficient for this purpose. In addition, Federal rules (42 C.F.R. Part 2) esecute any alcohol or drug abuse patient. | cords protected by Federal and/or Connecticut state law which without the specific written consent of the person to whom it retains for the release of medical or other information is NOT |
| tim | nderstand that this form will expire two years from the date I signe; however, I understand that revoking it will not change anythicurred. | |
| Cli | ent Signature: | Date: |
| Pri | nt Name | |



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Note: If you are a legal guardian or representative, you must attach a copy of your legal authorization to represent the member and complete the following:

Signature of Guardian/Pepresentative:

| Signature of Guardian/Representative: | | |
|---------------------------------------|------------|------|
| Print: | Date: _ | |
| Legal Authority: | | |
| | | |
| | | |
| | | |
| | | |
| Agency witness signature | Print Name | Date |

If you have any questions or need additional information regarding this form please contact the Connecticut Coalition to End Homelessness at 860-721-7876 or online at cceh.org.



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Agencies that Participate in CT HMIS as of 11/9/2016

CT HMIS - List of Participating Agencies

| FAIRFIELD COUNTY CAN | | |
|---|---|--|
| ABCD, Inc. | Laurel House | |
| ABRI - Homes for the Brave | Liberation Programs (LMG) | |
| AIDS Project Greater Danbury | Malta House, Inc. | |
| Alpha Community Services | MCCA-Midwestern Connecticut Council on Alcoholism | |
| Association of Religious Communities (ARC) | Mid Fairfield AIDS Project | |
| Bridge House | New Opportunities, Inc. | |
| Bridgeport Rescue Mission | New Reach, Inc | |
| Bridgeport Tabernacle Community Development | Norwalk Emergency Shelter (Open Door Shelter) | |
| Casa Inc. | Operation Hope | |
| Catholic Charities of Fairfield County (Bridgeport) | Refocus Abbey's House | |
| Catholic Charities of Fairfield County (Danbury) | Refocus Outreach Ministry | |
| Center for Human Development - Conn. Outreach West | RNP - Recovery Network of Programs, Inc. | |
| City of Bridgeport | Shelter For The Homeless | |
| City of Danbury (COD) | South Western CT S+C | |
| Danbury Housing Authority | St. John's Family Center | |
| Family and Children's Agency | St. Vincent's CRS | |
| Family and Children's Aid | Supportive Housing Works | |
| Frank Habanksy Food Pantry | The Connection | |
| Healing Tree Economic Development | The Workplace | |
| Homes with Hope Inc. | Western Connecticut Mental Health Network | |
| Inspirica, Inc. | | |

| GREATER HARTFORD COUNTY CAN | |
|-------------------------------------|--|
| AIDS CT (ACT) | Journey Home |
| Capitol Region Mental Health S+C | Judah House |
| Christian Activities Council (CAC) | Manchester Area Conference of Churches, Inc. |
| Chrysalis Center Inc. | Mercy Housing and Shelter |
| Columbus House Inc. | My Sister's Place |
| Community Health Resources | Open Hearth Association |
| Community Renewal Team (CRT) | Salvation Army Marshall House - Hartford |
| Cornerstone Shelter | South Park Inn |
| Hands On Hartford | Tabor House |
| House of Bread | Tri-Town Shelter Services, Inc. |
| Imma Care | VA Connecticut - Outreach |
| Inter Community Mental Health Group | YWCA Of The Hartford Region |
| Hartford Dispensary | |

| GREATER NEW HAVEN CAN | | |
|---------------------------------------|---------------------------------|--|
| Area Congregations Together | Jewish Family Services | |
| Beth El Center | Leeway | |
| BHcare | Liberty Community Services Inc. | |
| Christian Community Action Inc. | New Reach | |
| Columbus House Inc. | The City of New Haven | |
| CMHC Community Services Network | The Connection | |
| Continuum of Care | Youth Continuum | |
| Emergency Shelter Management Services | | |

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| NORTH WEST CAN | |
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| Catholic Charities of Waterbury - Food Pantry | New Opportunities, Inc. |
| Center for Human Development - Conn. Outreach West | NWCT YMCA |
| Charlotte Hungerford Hospital Beh. Health Center | Salvation Army Family Shelter - Waterbury |
| FISH of NW CT | St. Vincent DePaul Mission Shelter of Waterbury |
| Independence Northwest (INW) | Torrington Y Limited Partnership |
| McCall Foundation | Waterbury Hospital |
| Mental Health Association of CT | Western Connecticut Mental Health Network |

| NORWICH/NEW LONDON CAN | | |
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| Alliance for Living | Reliance House | |
| Bethsaida Community Inc. | Southeastern Mental Health Authority | |
| Columbus House | Thames River Community Service, Inc. | |
| Covenant Shelter | Thames Valley Council for Community Action | |
| Mystic Area Shelter and Hospitality | The Connection - Supportive Housing New London | |
| New London Hospitality Center | United Way of Southeastern CT | |
| Norwich Human Services | St. Vincent de Paul Place | |

| MIDDLESEX CAN | |
|------------------------------------|--------------------------------|
| Chrysalis Center Inc. | River Valley Services |
| Columbus House Inc. | Rushford Center Inc. |
| Community Health Center Inc. (CHC) | St. Vincent de Paul Middletown |
| Mercy Housing and Shelter Corp | The Connection - Eddy Center |
| New Opportunities, Inc. | Wallingford Emergency Shelter |
| New Reach | Gilead Community Services |

| CENTRAL CT CAN | | |
|--|--|--|
| Chrysalis Center Inc. | Salvation Army - New Britain Corps Community Center | |
| Columbus House Inc. | St. Philip House | |
| Community Mental Health Affiliates | St. Vincent DePaul Mission of Bristol | |
| Friendship Service Center of New Britain, Inc. | Veterans Inc. | |
| Human Resources Agency of New Britain | YMCA | |
| Prudance Crandall | Salvation Army - New Britain Corps Community Center | |
| Community Health Resources | Hartford Dispensary | |
| City of New Britain | The Hospital of Central Connecticut / Midstate Medical | |

| NORTH EAST CAN | |
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| Access Agency, Inc. | Perception Programs |
| Columbus House | United Services Inc. (Balance of State) |
| Holy Family Home and Shelter | Windham Regional Community Council |
| The Windham Region No Freeze Project, Inc. | |

| STATEWIDE ORGANIZATIONS | |
|--|---|
| STATE OF CONNECTICUT | UNITED WAY OF CONNECTICUT |
| Department of Social Services | 211 Infoline |
| Department of Housing | Nutmeg Consulting |
| Department of Mental Health & Addiction Services | Connecticut Coalition to End Homelessness |