



# Homelessness Response System Notice of Privacy Practices



This Notice of Privacy Practices (“Notice”) describes how your personal information may be used and disclosed by the San Francisco Department of Homelessness and Supportive Housing (HSH) and its partners. In addition, it describes your rights regarding your personal information. Please review this Notice carefully.

As San Francisco’s Homeless Management Information System (HMIS), the Online Navigation and Entry System (“ONE System”) is a shared, protected database and software application that enables HSH and its partners to collect and input client-level data, manage services, and generate reports in order to improve service delivery and coordination of client care, track client outcomes, and facilitate reporting requirements for persons experiencing – or at risk of experiencing – homelessness in San Francisco. The ONE System is administered by HSH and its software provider, Bitfocus, Inc. Personal information in the ONE System is protected and may only be accessed by licensed personnel from HSH and its authorized partners within the homelessness response system, each a “Partner Agency,” and collectively, the “Partner Agencies.” Partner Agencies include other government entities, nonprofits, community organizations, and philanthropic agencies. A list of Partner Agencies is available on the HSH website at: [www.sf.gov/hsh-partner-agencies-one-system-access](http://www.sf.gov/hsh-partner-agencies-one-system-access).

Partner Agencies collect, use, and share personal information to provide and coordinate housing and services, including:

- Homelessness prevention services to prevent people at highest risk of homelessness from entering homelessness
- Coordinated Entry to match people to the appropriate resource (including housing) to end their crisis
- Outreach to connect people living outside with the homelessness response system
- Shelter to provide temporary places for people to stay while accessing services and seeking housing solutions
- Crisis interventions to support people experiencing unsheltered homelessness
- Housing problem solving to divert or rapidly exit people from homelessness by supporting them through a creative, strengths-based conversation to identify resources
- Housing to provide exits from homelessness through subsidies and supportive services

In addition, the Partner Agencies may use and disclose personal information for functions related to payment or reimbursement for services; to carry out administrative functions; and other uses and disclosures consistent with U.S. Department of Housing and Urban Development Homeless Management Information Systems Data and Technical Standards (2004) Final Notice (“HMIS”). A list of authorized uses and disclosures is included in pages 2-4 of this Notice.

Personal information in the ONE System is protected by limiting access rights and limiting the parties to whom personal information may be disclosed, in compliance with federal, state, and local regulations governing the confidentiality of personal information. All personnel authorized to use or disclose personal information must complete privacy training and sign a confidentiality agreement pledging compliance with privacy laws. Upon any violation of the agreement, access rights may be terminated and the person or agency found to be in violation of the agreement may be subject to further penalties.

HSH may disclose personal information to – and receive personal information from – other City and County of San Francisco (CCSF) departments for the purposes authorized in this Notice. For example, HSH and its partners may use client information to assist a client in applying for eligible social services benefits through the Human Services Agency (HSA), while HSA may use information about the individual’s housing history from HSH to provide or coordinate their social services benefits. Similarly, HSH and its partners may use an individual’s health information from the Department of Public Health (DPH) to determine their eligibility for Medi-Cal funded financial assistance for security deposits, application fees, and other initial costs associated with housing, while DPH may use information about the individual’s housing history to provide or coordinate their health care. CCSF departments with access to personal information are included in the list of Partner Agencies.

HSH may use and disclose personal information to members of the San Francisco Homeless Adult and Family Multidisciplinary Personnel Teams (“HMDT”), a collaboration of CCSF departments that support or engage with the homelessness response system, to expedite identification, assessment, and linkage to housing and other City-funded services. To ensure compliance with privacy and security requirements for health care providers, information used and disclosed to H-MDT members is subject to the Health Insurance Portability and Accountability Act, 45 C.F.R., Parts 160 and 164 (“HIPAA”).

### Compliance with Laws

Access to protected personal information (PPI) and/or protected health information (PHI) may be limited by federal, state, and local regulations, including but not limited to, HMIS; HIPAA; California Welfare and Institutions Code Section 18999.8; and San Francisco Administrative Code Chapter 12M. Access to medical, HIV/AIDS, mental health, and drug and alcohol treatment records may be limited by federal and state regulations, including but not limited to, the Confidentiality of Medical Information Act, California Welfare and Institutions Code Section 5328 and California Civil Code Sections 56.10 et seq. (CIMA); HIPAA; and Federal Regulations Governing Confidentiality of Drug Abuse Patient Records, 42 C.F.R., Part 2. Personal information and records can only be used or disclosed in compliance with this Notice, with the written consent of the individual, or when required by law. The following entities, sites, and persons must comply with this Notice:

- All agencies and divisions of CCSF authorized to use and disclose personal information;
- Partner Agencies, contracted providers, authorized research institutions, or business associates of CCSF;
- Employees, staff, and other personnel of the above; and
- Volunteers who provide or coordinate services on behalf of the above.

Each of the above persons, entities, and sites are subject to the terms of this Notice and are referred to below by the words “we,” “us,” and “our.”

### Our Pledge About Your Information

We understand that your personal information (including PPI and PHI) is private and confidential. Partner Agencies and other organizations authorized to access your personal information are required to protect your information, including records of the housing and services you receive, whether it is collected or stored on paper, on computers, or online. This Notice applies to all records of your care, regardless of whether they are collected, used, or processed by us or other authorized parties. We reserve the right to amend this Notice and make the amended Notice effective for information previously collected, used, or processed as well as any information collected, used, or processed in the future. Amended versions of this Notice will be published on the HSH website.

### Our Authorized Uses and Disclosures

While HSH cannot describe every possible way we use and disclose personal information subject to this Notice, most of the authorized uses and disclosures fall within one of the descriptions below, and subject to HMIS baseline privacy requirements. HSH and its partners (“We”) may infer consent for all uses and disclosures specified in this Notice and for uses and disclosures determined to be compatible with those specified in this Notice.

To provide or coordinate housing and services	We may use and disclose your information to Partner Agencies to provide and coordinate housing and services offered through the homelessness response system, including to the H-MDT, and for services offered through CCSF departments.
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<p>For payment or reimbursement for services</p>	<p>We may use and disclose your information to bill and receive reimbursement from entities that fund our housing and services. For enrolled members of a Medi-Cal Managed Care Plan, including San Francisco Health Plan (SFHP), Anthem Blue Cross, and Kaiser Permanente, we may use and disclose your information for the purpose of providing or coordinating your health care or to administer coordination, authorization, and billing for CalAIM Community Supports, including but not limited to housing transition navigation services, housing deposits, housing tenancy and sustaining services, transitional rent, and recuperative care.</p>
<p>For administrative functions</p>	<p>We may use and disclose your information to carry out administrative functions, including but not limited to legal, audit, personnel, oversight, and management functions. We may disclose your information with authorized entities that perform oversight functions, including audits, investigations, inspections, and licensure. We may disclose your information to address workers' compensation claims or similar programs that provide benefits related to work-related injuries or illnesses.</p>
<p>For creating de-identified information</p>	<p>We may use deidentified or aggregated information about you and other individuals to secure funding for our programs, fulfill our reporting obligations, monitor the effectiveness of our programs, identify opportunities to strengthen the homelessness response system, and carry out similar functions.</p>
<p>To comply with the law</p>	<p>We may disclose your information when required by federal, state, or local law. We may disclose your information in response to a court or administrative order, or in response to a subpoena, discovery request, or other dispute process. In cases regarding immigration status, we will comply with San Francisco Administrative Code Chapters 12H and 12I ("Sanctuary City Ordinance"), which prohibits the use of City funds or resources to assist in the enforcement of federal immigration law or to gather or disseminate information regarding the release status or other personal information of an individual, unless it is required by federal or state law, regulation, or court decision.</p>
<p>To prevent a threat to health or safety</p>	<p>We may use or disclose your information to prevent or lessen a serious and imminent threat to the health or safety of an individual or the public.</p>
<p>To report abuse or neglect</p>	<p>We may disclose your information to a government authority, such as a social service or protective services agency, to report suspected abuse or neglect of a minor or disabled adult.</p>
<p>To conduct research</p>	<p>We may use and disclose your information for academic research purposes. Research projects are subject to a formal review and approval process.</p>
<p>To law enforcement for limited purposes</p>	<p>We may disclose your information to a law enforcement official in the following situations:</p> <ul style="list-style-type: none"> <li>• In response to a lawful court order, court-ordered warrant, subpoena, or summons issued by a judicial or administrative officer, or a grand jury subpoena;</li> <li>• In response to a law enforcement official's written request under certain conditions;</li> <li>• To notify law enforcement of criminal conduct that occurred on our premises;</li> <li>• In response to an oral request from a law enforcement official for the purpose of identifying or locating a suspect, fugitive, material witness, or missing person; or</li> <li>• For special government functions such as national security, intelligence activities, and presidential protective services.</li> </ul>

To court-appointed conservators and public guardians	We may disclose your information to an individual appointed by a court of law to look after your physical, mental health, or financial well-being.
For court-appointed treatment purposes	If you have been ordered to obtain services from us by a criminal court proceeding, you will be asked to approve the disclosure of your information to that court. If you subsequently revoke your approval, we must inform the court of your revocation.
For corrections purposes	We may disclose your information to jail or prison staff or a correctional officer for the following purposes: <ul style="list-style-type: none"> <li>• For the jail or prison to provide you with health care;</li> <li>• To protect your health and safety or the health and safety of others; or</li> <li>• For the security of the jail or prison staff.</li> </ul>
To share decedent information	We may disclose a decedent’s information with a coroner, medical examiner, funeral director, or legal next-of-kin.

### Your Rights and Choices

You have rights related to the personal information we collect and maintain about you. This section explains how you can access and correct your information, request accommodations, and authorize certain disclosures.

You have the right to decline to share information	You may decline to disclose information at any time. Except for programs that require information to determine program eligibility or assess needed services, you have the right to decline to disclose information without being refused access to services. If you decline to disclose information, it may limit the services you may receive.
You may request a copy of this Notice	You may request a paper or electronic copy of this Notice at any time. You may request a copy of this notice in a language other than English. We will provide you a copy of this Notice in your preferred language in a timely manner.
You may request a reasonable accommodation	You may request a reasonable accommodation on the basis of a disability at any time during the data collection process, including but not limited to a qualified language interpreter, reader, or materials in accessible formats such as sign, Braille, audio, or large type as needed.
You may inspect or request a copy of your information	You may inspect or request an electronic or paper copy of your information. Submit your request to the office or site where your care is given. We may deny your request, but we will provide a written explanation for the denial. Reasons for denying a request may include: <ul style="list-style-type: none"> <li>• The information was compiled in reasonable anticipation of litigation or comparable proceedings;</li> <li>• The information includes the protected information of another individual;</li> <li>• If the information was obtained under a promise of confidentiality and the disclosure would reveal the source of that information; or</li> <li>• The disclosure would be reasonably likely to endanger the life or safety of an individual.</li> </ul>

<p>You may submit a request to correct your information</p>	<p>You may request that we correct information about you that you believe is incorrect or incomplete. Submit your request in writing to the office or site where your care is given. You must explain the reason for the change. We may deny your request, but we will provide you with a written explanation for the denial.</p>
<p>You may ask us to disclose your information to a third party</p>	<p>You may ask us to disclose your information to a third-party person or entity, such as a relative, attorney, or hospital, for any reason. Submit your request in writing to the office or site where your care is given. If you make an ongoing request, you may request that we stop sharing any further information at any time. If you are unable to tell us your preference – for example, if you are unconscious – we may disclose your information if we conclude it is in your best interest.</p>
<p>You may designate someone to act on your behalf</p>	<p>If you have given someone power of attorney or if someone is your legal guardian or authorized representative, that person may exercise your rights and make decisions about your personal information. We will confirm that the person has the authority to act on your behalf before we take any action.</p>
<p>You may withdraw your consent to use or disclose your information</p>	<p>You may withdraw your consent to use and disclose your information at any time. Submit your request to the site or office where your care is given. If you withdraw your consent to use or disclose your information, further information about you may not be collected, but it will not reverse or remove any information previously collected, used, or disclosed with your consent.</p>
<p>You may file a complaint if you believe your rights have been violated</p>	<p>You may file a complaint without risk of retaliation if you feel we have violated your rights by using the information in the “Contact Us” section below. If you choose to file a complaint, the subject of your complaint will be different from the entity reviewing your complaint. You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting the HHS website at: <a href="http://www.hhs.gov/ocr/privacy/hipaa/complaints/">www.hhs.gov/ocr/privacy/hipaa/complaints/</a>.</p>

Contact Us

You may direct questions to the office or site or where your care is given. You may also contact HSH directly using the following information.

<p>Address</p>	<p>440 Turk St., San Francisco, CA 94102</p>
<p>Phone</p>	<p>628-652-7700</p>
<p>Email</p>	<p><a href="mailto:hsh.privacy@sfgov.org">hsh.privacy@sfgov.org</a></p>