

**MONTGOMERY COUNTY  
DEPARTMENT OF HEALTH AND HUMAN SERVICES (MCDHHS)  
CONTINUUM OF CARE  
HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS)  
USER AGREEMENT  
Revised 01/27/2014**

**HMIS STATEMENT OF CONFIDENTIALITY AND REQUEST FOR HMIS USER**

**Please complete the following:**

**Employee Name:** \_\_\_\_\_  
(Please print clearly.)

**Business Phone:** \_\_\_\_\_

**Business Physical Address:** \_\_\_\_\_  
\_\_\_\_\_  
(Please print complete address including city and zip code.)

**Business Email Address:** \_\_\_\_\_  
(Please print clearly.)

**Training:** ☐ Agency Trained (by Internal Staff)    or    ☐ DHHS Trained

**Access Level:** \_\_\_\_\_  
(Please see page 3 and print clearly.)

**Agency and Provider Name:** \_\_\_\_\_  
(Please see pages 3 to 5.)

**Important**

If you have any questions regarding the completion of this request,  
please contact the County's Helpdesk at 240-777-2828 or send an email to  
[HelpIT@MontgomeryCountyMD.gov](mailto:HelpIT@MontgomeryCountyMD.gov).

After filling out this form, please scan and email it to [HelpIT@MontgomeryCountyMD.gov](mailto:HelpIT@MontgomeryCountyMD.gov).

**STATEMENT OF CONFIDENTIALITY**

**I AGREE TO MAINTAIN THE STRICT CONFIDENTIALITY OF INFORMATION OBTAINED THROUGH the Montgomery County Department of Health and Human Services Continuum of Care, Homeless Management Information System. This information will be used only for legitimate client services and administration of the above named agency. Any breach of confidentiality will result in immediate termination of participation in the MCDHHS HMIS.**

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor's/Executive Director's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## REQUEST FOR ACCOUNT

Each user requires a unique username and password, which is to be kept private. Use of another user's username (account) is grounds for immediate termination from the Montgomery's County Continuum of Care Homeless Management Information System.

## USER'S RESPONSIBILITY STATEMENT

**Your username and password give you access to the Department of Health and Human Services homeless management information system. Initial each item below to indicate your understanding of the proper use of your username and password, and sign where indicated. Any failure to uphold the confidentiality standards set forth below is grounds for immediate termination from the Montgomery County's HMIS.**

### *Initial Only*

\_\_\_\_\_ I understand that I must abide by all protocols outline in the HMIS Policy and Procedure Manual.

\_\_\_\_\_ I understand that I must take all reasonable means to protect personal information that is in hard copy format, including, but not limited to, reports, data entry forms, and signed consent forms.

\_\_\_\_\_ I understand those hard copies of HMIS information must be kept in a secure file.

\_\_\_\_\_ I understand that once the hard copies of HMIS are no longer needed, they must be properly destroyed to maintain Confidentiality.

\_\_\_\_\_ I understand that I must take all reasonable means to protect personal information that is stored within the application, including, but not limited to, a network, desktop, laptop, and external storage drive.

\_\_\_\_\_ I understand that I must take all reasonable means to keep my password physically secure.

\_\_\_\_\_ I understand that my username and password are for my use only and should not be shared with any other user.

\_\_\_\_\_ I understand that the only individuals who can view HMIS information are authorized users and the clients to whom the information pertains.

\_\_\_\_\_ I understand that I may only view, obtain, disclose, or use the database information that is necessary in performing my job.

\_\_\_\_\_ I understand that these rules apply to all users of the DHHS HMIS whatever their work role or position.

\_\_\_\_\_ I understand that if I notice or suspect a security breach, I must immediately notify DHHS HMIS Administrator.

**I understand and agree to the above statements.**

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please fax this form back to:**

HMIS Administrator  
240-777-1575

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To be completed by the HMIS Administrator:

1. Verified user was HIPAA trained. [ ] Yes [ ] No
2. Verified user was Agency or DHHS application trained. [ ] Yes [ ] No
3. Added user's business email to the HMIS Outlook distribution list. [ ] Yes [ ] No
4. Submitted Helpdesk Ticket to create County ID. [ ] Yes [ ] No [ ] N/A-User is an employee or onsite contractor.

**User ID (Assigned by MCDHHS):** \_\_\_\_\_

**HMIS Admin Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## SERVICEPOINT USER ACCESS LEVEL CHART

Note: Case Manager II will have permission to "Allow User to Back-date Releases of Information" and "Allow User to create/edit Client Infractions".

	Resource Specialist I	Resource Specialist II	Resource Specialist III	Volunteer	Agency Staff	Case Managers I & II	Agency Administrator	Executive Director	System Operators	System Administrator I	System Administrator II
<b>ClientPoint</b>											
Profile				X	X	X	X	X		X	X
Assessments						X	X	X		X	X
Case Notes						X	X	X		X	X
Case Plans						X	X	X		X	X
Service Records				X	X	X	X	X		X	X
<b>ServicePoint</b>											
Referrals				X	X	X	X	X		X	X
Services Provided					X	X	X	X		X	X
<b>ResourcePoint</b>	X	X	X	X	X	X	X	X	X	X	X
<b>ShelterPoint</b>				X	X	X	X	X		X	X
<b>Reports</b>											
<i>Audit Reports</i>											
Client/Service Information											X
User Information			X				X	X	X	X	X
Client/Service Access Information											X
<i>Provider Reports</i>											
Client Served						X	X	X		X	X
Daily Bed Report			X			X	X	X		X	X
HUD 40118 APR						X	X	X		X	X
Outstanding Referrals			X			X	X	X		X	X
Service Transaction						X	X	X		X	X
Needs Report						X	X	X		X	X
<i>ReportWriter</i>						X	X	X		X	X
<b>Administration</b>											
Add/Edit Users							X	X	X	X	X
Reset Passwords							X	X	X	X	X
Add Provider			X						X	X	X
Edit Provider		#	X				#	#	X	X	X
Delete Provider		%	X				%	%	X	X	X
Agency News		X	X		X	X	X	X	X	X	X
System Wide News			X						X	X	X
Picklist Data									X	X	X
Licenses									X	X	X
Assessment Admin									X	X	X
Shadow Mode											X
System Preferences											X

**X:** Users have access to this section of ServicePoint.  
**%:** Users can neither delete the provider they belong to, nor any of their parent providers.  
**#:** Users cannot edit their parent provider, they may edit their provider or child providers only.

## SERVICEPOINT AGENCY AND PROVIDER CHART

Agency Name	Provider Name	Place an “x” next to the Agency/Provider you need access to.
Bethesda Cares Agency	Bethesda Cares	
Catholic Charities Services, Inc.	Bethesda House	
Catholic Charities Services, Inc.	Chase Partnership House	
Catholic Charities Services, Inc.	Dorothy Day Place	
City of Gaithersburg	DeSillum House	
City of Gaithersburg	Housing Initiative Program-Individual (City of Gaithersburg)	
City of Gaithersburg	Wells/Robertson House	
Community Clinic, Inc. Agency	Community Clinic, Inc.	
Community Ministries of Rockville	Jefferson House	
Community Ministries of Rockville	Mansfield Kaseman Health Clinic	
Department of Health Human Services	Arcola Transitional-Families	
Department of Health Human Services	Crisis Center	
Department of Health Human Services	Housing Initiative Program-Family (DHHS)	
Department of Health Human Services	Housing Initiative Program-Individual (DHHS)	
Department of Health Human Services	Housing Stabilization Services-Assessment Only	
Department of Health Human Services	Housing Stabilization Services-Diversion	
Department of Health Human Services	Housing Stabilization Services-Rapid Re-Housing-Family	
Department of Health Human Services	Housing Stabilization Services-Rapid Re-Housing-Individual	
Department of Health Human Services	Housing Stabilization Services-Shelter/Hotel	
Department of Health Human Services	Montgomery Cares Health Care for the Homeless	
Department of Health Human Services	Systems Planning and Management	
Department of Health Human Services	TB Outreach and Case Management	
Dwelling Place Agency	Dwelling Place	
Dwelling Place Agency	Housing Initiative Program-Family (The Dwelling Place)	
Dwelling Place Agency	Housing Initiative Program-Service Coordination (The Dwelling Place)	
Dwelling Place Agency	New Opportunity Homes	
Dwelling Place Agency	Permanent Supportive Housing (Dwelling Place)	
Housing Opportunities Commission	Housing Counseling Program	
Housing Opportunities Commission	Housing Initiative Program Housing Locators	
Housing Opportunities Commission	Housing Initiative Program-Service Coordination (HOC)	
Housing Opportunities Commission	Housing Initiative Program-Service Coordinator(s) (HOC)	
Housing Opportunities Commission	Lasko Manor	
Housing Opportunities Commission	McKinney 03	
Housing Opportunities Commission	McKinney 10-Family	
Housing Opportunities Commission	McKinney 10-Individual	

Housing Opportunities Commission	McKinney 12-Individual	
Housing Opportunities Commission	New Neighbors 1	
Housing Opportunities Commission	New Neighbors 2	
Housing Opportunities Commission	Shelter Plus Care	
Interfaith Works	Becky's House	
Interfaith Works	Carroll House	
Interfaith Works	Community Vision	
Interfaith Works	Community Vision Winter Overflow Shelter	
Interfaith Works	Housing Initiative Program-Family (Interfaith Works)	
Interfaith Works	Housing Initiative Program-Individual (Interfaith Works)	
Interfaith Works	Housing Initiative Program-Service Coordination (Interfaith Works)	
Interfaith Works	Interfaith Housing Coalition	
Interfaith Works	Interfaith Homes	
Interfaith Works	Watkins Mill House	
Interfaith Works	Wilkins Avenue Women's Assessment Center	
Mental Health Association	Places for People 1	
Mental Health Association	Places for People 3	
Montgomery Avenue Women's Center Agency	Montgomery Avenue Women's Center	
Montgomery County Coalition for the Homeless	Ashmore	
Montgomery County Coalition for the Homeless	Aurora Apartments	
Montgomery County Coalition for the Homeless	Back to Work	
Montgomery County Coalition for the Homeless	Cordell Place	
Montgomery County Coalition for the Homeless	Cordell Place HUD	
Montgomery County Coalition for the Homeless	Flower	
Montgomery County Coalition for the Homeless	Home First I	
Montgomery County Coalition for the Homeless	Home First II	
Montgomery County Coalition for the Homeless	Hope Housing-Forest	
Montgomery County Coalition for the Homeless	Hope Housing-Gallop	
Montgomery County Coalition for the Homeless	Hope Housing-Grandin	
Montgomery County Coalition for the Homeless	Hope Housing-Hutton	
Montgomery County Coalition for the Homeless	Hope Housing-Jump	
Montgomery County Coalition for the Homeless	Hope Housing-Peony	
Montgomery County Coalition for the Homeless	Hope Housing-Pier	
Montgomery County Coalition for the Homeless	Hope Housing-Rolling	
Montgomery County Coalition for the Homeless	Hope Housing-Shea	
Montgomery County Coalition for the Homeless	Hope Housing-Van Buren	

the Homeless		
Montgomery County Coalition for the Homeless	Housing Initiative Program-Family (MCCH)	
Montgomery County Coalition for the Homeless	Housing Initiative Program-Individual (MCCH)	
Montgomery County Coalition for the Homeless	Men's Emergency Shelter	

Montgomery County Coalition for the Homeless	Partnership for Permanent Housing 1-Family	
Montgomery County Coalition for the Homeless	Partnership for Permanent Housing 1-Individual	
Montgomery County Coalition for the Homeless	Partnership for Permanent Housing 2-Family	
Montgomery County Coalition for the Homeless	Partnership for Permanent Housing 2-Individual	
Montgomery County Coalition for the Homeless	Safe Havens-Adrienne's	
Montgomery County Coalition for the Homeless	Safe Havens-Gaithersburg	
Montgomery County Coalition for the Homeless	Safe Havens-Laytonsville	
Montgomery County Coalition for the Homeless	Safe Havens-Maplewood	
Montgomery County Coalition for the Homeless	Seneca Heights	
Montgomery County Coalition for the Homeless	Seneca Heights Apartments Family Housing	
Montgomery County Coalition for the Homeless	Seneca Heights Private Living Quarters (PLQ)	
Montgomery County Coalition for the Homeless	Seneca Heights Private Living Quarters (PLQ) HUD	
Mount Calvary Baptist Church	Helping Hands Center	
National Center for Children and Families	Greentree Shelter	
National Center for Children and Families	Rapid Re-Housing (RRH)	
National Center for Children and Families	Supportive Housing Program (NCCF)	
People Encouraging People	Homeless Outreach Service	
Quest, Inc. Agency	Housing Initiative Program-Family (Quest)	
Quest, Inc. Agency	Housing Initiative Program-Individual (Quest)	
Quest, Inc. Agency	Housing Initiative Program-Service Coordination (Quest)	
Rockville Presbyterian Church	Rainbow Place	
Shepherd's Table Agency	Shepherd's Table	
Stepping Stones Agency	Stepping Stones Shelter	
The Coordinating Center Agency	Housing Initiative Program-Individual (The Coordinating Center)	
Village of Friendship Heights	Friendship Heights	