



3740 Beach Blvd., Suite 304, Jacksonville, FL 32207
904-359-9650

Privacy Notice

A. What This Notice Covers

1. This notice describes the privacy policy and practices of Ability Housing, Inc. specifically in regards to the protection of information pertaining to clients, sponsors, and vendors affiliated with the organization. The mailing address for Ability Housing, Inc. is 3740 Beach Boulevard, Suite 304, Jacksonville, FL. 32207.
2. The policy and practices in this notice cover the processing of protected personal information for clients participating in the Ability Housing programs for Northeast and Central Florida.
3. Ability Housing is required to and complies with all HIPPA policies and procedures.
4. Protected Personal information (PPI) is any information we maintain about a client that:
 - a. allows identification of an individual directly or indirectly
 - b. can be manipulated by a reasonably foreseeable method to identify a specific individual, or
 - c. can be linked with other available information to identify an individual. When this notice further refers to personal information, it does so under the acronym PPI.
5. Ability Housing, Inc. adopted this policy to meet the standards for HIPPA and the Homeless Management Information Systems issued by the Department of Housing and Urban Development. We intend for all policies and practices to be consistent with those standards. See 69 Federal Register 45888 (July 30, 2004). Also see 42 U.S.C. 1320d; 45 CFR Parts 160, 162, and 164.
6. This notice serves to inform clients, staff, and others of how Ability Housing, Inc. processes personal information. We follow all policies and practices described in this notice.
7. We may amend this notice and change our policies or practices at any time. Amendments may affect personal information obtained before the effective date of the amendment. Notice of the amended policies and procedures will be made available electronically on our website at <http://abilityhousing.org/about-us/privacynotice/>.
 - a. A copy will specifically be made available to all Ability Housing, Inc. staff, volunteers, contractors, and associates who are required to comply with the privacy notice in addition a printed copy will be made available to all clients that are receiving supportive services from Ability Housing, Inc. or any subcontractor or associate of Ability Housing, Inc.
 - b. We will provide a hard copy of this privacy notice upon request.

B. How and Why We Collect Personal Information

1. We collect personal information in order to verify eligibility, to provide services, or when required by law. Waiving rights with regard to protected health information is not a condition of treatment or eligibility for treatment. We may collect information for these purposes:
 - A. to provide or coordinate services to clients

- B. to locate other programs that may be able to assist clients
 - C. for functions related to payment or reimbursement from others for services that we provide
 - D. to operate our organization, including administrative functions such as legal, audits, personnel, oversight, and management functions
 - E. to comply with government reporting obligations
 - F. when required by law
2. We use lawful and fair means to collect personal information.
 3. We collect personal information with the knowledge and consent of our clients. If you seek our assistance and provide us with personal information, we assume that you consent to the collection of information as described in this notice
 4. We may also obtain information about participants from:
 - a. Accompanying parties or individuals (i.e. Case Managers, Employers, Family Members, etc.)
 - b. Other private organizations that provide services (i.e. Quest, Health Care Providers, Legal Authorities, etc.)
 - c. Government agencies (i.e. SSI, Medicare, etc.)
 - d. Telephone directories and other published sources
 5. We post a sign at our intake desk or other locations explaining the reasons we ask for personal information. The sign says:

“We collect personal information when appropriate. We may use or disclose a participant(s) information in order to provide services. We may also use or disclose PPI to comply with legal entities and/or other obligators. We assume that you agree to allow us to collect information and use or disclose it as described in this notice. You may inspect the personal information that we maintain on file. You may also request for us to update or correct inaccurate or incomplete information. You may at any time inquire about our privacy policy or practices; we will respond to all questions or complaints. Read the full notice for more details. A copy of the full notice will be made available upon request.”

Participants may request copies of confidential communications of protected healthcare information and they may collect those documents in person from 3740 Beach Blvd., Ste. 304 Jacksonville, FL 32207. We will provide the documents via mail if the participant provides Ability Housing, Inc. with a self-addressed postage paid envelope. You may also request an accounting of disclosures of protected health information.

C. How We Use and Disclose Personal Information

1. We use or disclose personal information only for activities described in this notice. We reserve the right to uses PPI as it pertains to the following. We assume that you consent to the use or disclosure of your personal information for the purposes described here and for other uses and disclosures that we determine to be compatible with these uses or disclosures:
 - a. **to provide or coordinate services.** We share client records with other organizations that may have separate privacy policies and that may allow different uses and disclosures of the information.
 - b. for functions related to **payment or reimbursement for services**
 - c. **to carry out administrative functions** such as legal, audits, personnel records, oversight, and management functions
 - d. **to create de-identified (anonymous) information** that can be used for research and statistical purposes without identifying clients
 - e. **when required by law** to the extent that use or disclosure complies with and is limited to the requirements of the law
 - f. **to avert a serious threat to health or safety** if:
 - (1) We believe that the use or disclosure is necessary to prevent or lessen a serious and imminent threat to the health or safety of an individual or the public, **and**
 - (2) The use or disclosure is made to a person reasonably able to prevent or lessen the threat, including the target of the threat
 - g. **to report an individual we reasonably believe to be a victim of abuse, neglect or domestic violence to a governmental authority** (including a social service or protective services agency) authorized by law to receive reports of abuse, neglect or domestic violence
 - (1) Under any of these circumstances:
 - (a) where the disclosure **is required** by law and the disclosure complies with and is limited to the requirements of the law

- (b) if the individual agrees to the disclosure, **or**
- (c) to the extent that the disclosure is **expressly authorized** by statute or regulation, **and**
 - (I) we believe the disclosure is necessary to prevent serious harm to the individual or other potential victims, **or**
 - (II) if the individual is unable to agree because of incapacity, a law enforcement or other public official authorized to receive the report represents that the PPI for which disclosure is sought **is not intended to be used against the individual** and that an immediate enforcement activity that depends upon the disclosure would be materially and adversely affected by waiting until the individual is able to agree to the disclosure.

And

- (2) when we make a permitted disclosure about a victim of abuse, neglect or domestic violence, we will promptly inform the individual who is the victim that a disclosure has been or will be made, except if:
 - (a) we, in the exercise of professional judgment, believe informing the individual would place the individual at risk of serious harm, **or**
 - (b) we would be informing a personal representative (such as a family member or friend), and we reasonably believe the personal representative is responsible for the abuse, neglect or other injury, and that informing the personal representative would not be in the best interests of the individual as we determine in the exercise of professional judgment.
- h. for **academic research purposes**
 - (1) conducted by an individual or institution that has a formal relationship with the Changing Homelessness Organization if the research is conducted either:
 - (a) by an individual employed by or affiliated with the organization for use in a research project conducted under a written research agreement approved in writing by a designated Changing Homelessness Organization program administrator (other than the individual conducting the research), **or**
 - (b) By an institution for use in a research project conducted under a written research agreement approved in writing by a designated Changing Homelessness Organization program administrator.

And

- (2) Any written research agreement:
 - (a) Must establish rules and limitations for the processing and security of PPI in the course of the research
 - (b) Must provide for the return or proper disposal of all PPI at the conclusion of the research
 - (c) Must restrict additional use or disclosure of PPI, except where required by law
 - (d) Must require that the recipient of data formally agree to comply with all terms and conditions of the agreement, **and**
 - (e) Is not a substitute for approval (if appropriate) of a research project by an Institutional Review Board, Privacy Board or other applicable human subjects protection institution.
- i. to a law enforcement official **for a law enforcement purpose** (if consistent with applicable law and standards of ethical conduct) under any of these circumstances:
 - (1) in response to a lawful court order, court-ordered warrant, subpoena or summons issued by a judicial officer, or a grand jury subpoena
 - (2) if the law enforcement official makes a **written request** for PPI that:
 - (a) is signed by a supervisory official of the law enforcement agency seeking the PPI
 - (b) states that the information is relevant and material to a legitimate law enforcement investigation
 - (c) identifies the PPI sought
 - (d) is specific and limited in scope to the extent reasonably practicable in light of the purpose for which the information is sought, **and**
 - (e) States that de-identified information could not be used to accomplish the purpose of the disclosure.
 - (3) if we believe in good faith that the PPI constitutes **evidence of criminal conduct** that occurred on our premises

- (4) in response to an oral request for the purpose of **identifying or locating a suspect, fugitive, material witness or missing person** and the PPI disclosed consists only of name, address, date of birth, place of birth, Social Security Number, and distinguishing physical characteristics, **or**
- (5) if:
 - (a) the official is an authorized federal official seeking PPI for the provision of **protective services to the President** or other persons authorized by 18 U.S.C. 3056, or to foreign heads of state or other persons authorized by 22 U.S.C. 2709(a)(3), or for the conduct of investigations authorized by 18 U.S.C. 871 and 879 (threats against the President and others), **and**
 - (b) The information requested is specific and limited in scope to the extent reasonably practicable in light of the purpose for which the information is sought.

And

- j. To comply with **government reporting obligations** for homeless management information systems and for oversight of compliance with homeless management information system requirements.
2. Before we make any use or disclosure of your personal information that is not described here, we will first seek consent.
 3. All other disclosures require written consent. **Waiving of your rights is not a condition of services.**
 4. Consent may be revoked but it may result in ineligibility to receive services or participate in programs provided by Ability Housing, Inc.

D. How to Inspect and Correct Personal Information

1. You may inspect and have a copy of the personal information that we maintain. We will offer an explanation of any information that you may not understand.
2. We will consider a request from you for correction of inaccurate or incomplete personal information that we maintain about you. If we agree that the information is inaccurate or incomplete, we may delete it or we may choose to mark it as inaccurate or incomplete and to supplement it with additional information.
3. Participants may request restrictions on certain uses of protected healthcare information in writing to Staff at Ability Housing, Inc., 3740 Beach Blvd., Suite 304, Jacksonville, FL. 32207. Not all requests will be honored. In the event that your request is not honored, we will offer an explanation as to why we cannot accommodate the request.
4. To inspect, get a copy of, or ask for correction of your information, ask any staff member for access.
5. We may deny your request for inspection or copying of personal information if:
 - a. the information was compiled in reasonable anticipation of litigation or comparable proceedings
 - b. the information is about another individual (other than a health care provider or homeless provider)
 - c. the information was obtained under a promise or confidentiality (other than a promise from a health care provider or homeless provider) and if the disclosure would reveal the source of the information, **or**
 - d. Disclosure of the information would be reasonably likely to endanger the life or physical safety of any individual.
6. If we deny a request for access or correction, we will explain the reason for the denial. We will also include, as part of the personal information that we maintain, documentation of the request and the reason for the denial
7. We may reject repeated or harassing requests for access or correction.

E. Data Quality and Security

Data Quality

1. We collect only personal information that is relevant to the purposes for which we plan to use it. To the extent necessary for those purposes, we seek to maintain only personal information that is accurate, complete, and timely.
2. We agree to dispose of personal information not in current use seven years after the information was created or last changed. As an alternative to disposal, we reserve the right to remove identifiers from the information.
3. We may keep information for a longer period if required to do so by statute, regulation, contract, or other requirement.

Data Security

1. Ability Housing, Inc.'s Information Technology infrastructure is maintained by BrightLink and provides business communications and functionality. BrightLink and the Executive Assistant maintain original licenses and physical copies of media for all installed software and ensure that Ability Housing is meeting any necessary licensure requirements for these applications. Prior to assigning a computer to an employee, the Executive Assistant will coordinate with BrightLink to ensure that all necessary software has been installed. The installed software has been thoroughly tested by the IT staff to ensure that it will not disrupt other applications on the local workstation or the functionality of the larger network.
2. Due to proliferation of malicious software, any files introduced to the Ability Housing network from an outside source must be checked for viruses.
3. In order to maintain a more secure networking environment, employees must adhere to the following policies:
 - a. Passwords must be used for entry to our network.
 - b. Workstations must be locked whenever an employee is away from their desk.
4. The Ability Housing network backs up data nightly in the case of accidental loss or equipment failure.
5. Any employee needing technical assistance must submit a request to BrightLink and notify the Executive Assistant to ensure proper follow-up and support is provided in a timely manner.
6. Ability Housing staff and its subcontractors must protect confidentiality of all program participant information obtained in the course of professional service by ensuring all written and electronic information is stored in a secure location. All employees sign a confidentiality agreement.
7. In the event of an emergency, Ability Housing has an Emergency Management Plan that outlines and defines procedures to enable continuation of critical business processes for protection and security of protected health information while operating in emergency mode. Additionally, it contains policies outlining allowed access to facilities in support of data recovery.

F. Complaints, Grievances and Accountability

Client Complaint Policy and Procedure:

If a resident/client is dissatisfied with a service, decision, action or situation involving Ability Housing or if the client wishes to file a complaint against a perceived unfair treatment, the following procedures should be followed:

- a. The resident/client makes a complaint to the appropriate staff. For property management related complaints the resident would make the complaint to the Property Manager for the property for which the client resides. For support services related complaints the client would make the complaint to their assigned service staff.
- b. The personnel receiving the complaint will attempt to resolve the complaint with the resident/client.
- c. If personnel are unable to resolve the complaint the resident/client may file a formal written complaint to the appropriate department's Director. The resident/client will be provided a Complaint Form.
- d. Within 3 business days after receipt of the written complaint form, a review of the resident/client's complaint will be completed and the resident/client will be informed of the resolution to the complaint.
- e. If the resident/client remains unsatisfied with the resolution, he/she may file a formal grievance with Ability Housing's Asset Manager (for property management related complaints) or Program Manager (for support services related complaints).

complaints). A formal grievance can only be submitted AFTER the resident/client has been unable to have their complaint resolved by following the above procedure.

Client Grievance Policy and Procedure:

The grievance procedure is an important part of the program's quality assurance process. It allows the program participant an opportunity to provide feedback about the program services. All grievances must be heard by the proper personnel and investigated properly. All current and former program participants have the right to file a written grievance. Grievance Forms are available from any staff member. Program participants may deliver their grievance to any staff member with whom they feel comfortable or mail it to the Program Manager at ATTN Lou Dougherty Ability Housing, Inc. 3740 Beach Blvd., Suite 304, Jacksonville, FL 32207. Staff members who receive a grievance must deliver it to the Program Manager. The Program Manager is responsible for investigating the situation and responding to the program participant by either written or verbal communication within 3 business days. A written response may be completed using the Grievance Resolution Form. The Program Manager keeps a copy of all grievances in the Grievance Log. The log is reviewed semi-annually for trends and risk management issues.

Questions about the Ability Housing, Inc. privacy notice are to be directed to Cody Spencer who can be reached at 904-359-9650 ext. 110. Individuals may additionally complain to their health care provider or to the Secretary of the US Department of Health and Human Services if they believe their privacy rights have been violated.

Should further review be required your complaint will be escalated to the Changing Homelessness Incorporated Homelessness Management Information System Steering Committee to determine a voluntary resolution of the complaint. Resolution of the complaint will be provided in writing to the agency and the individual filing the complaint. Ability Housing and Changing Homelessness, Inc. as the Homeless Management Information System administrator are prohibited from retaliating against you for filing a complaint.

1. All members of Ability Housing, Inc. staff (including employees, volunteers, affiliates, contractors and associates) are required to comply with the privacy notice. Each staff member **must** receive and acknowledge receipt of a copy of this and any subsequent revised privacy notices.

G. Privacy Notice Change History

Version 1.0. June 1, 2012. Initial Policy

Version 2.0 February 22, 2016 Revised

Version 3.0 January 14, 2017 Revised

Version 4.0 January 10, 2018 Revised

Version 5.0 January 24, 2024 Revised