

## **USER POLICY, RESPONSIBILITY STATEMENT, & CODE OF ETHICS**

### *For Client Services Network of Lee County*

#### **USER POLICY**

Partner Agencies shall share information for provision of services to clients with their informed consent through a networked infrastructure that establishes electronic communication among the Partner Agencies.

Partner Agencies shall at all times have rights to the data pertaining to their clients that was created or entered by them in Client Services Network. Partner Agencies shall be bound by all restrictions imposed by clients pertaining to the use of personal data that they do not formally release.

It is a Client's decision about which information, if any, entered into Client Services Network shall be shared and with which Partner Agencies. The Client Services Network Client Consent/Release of Information shall be signed if the Client agrees to share information with Partner Agencies.

Minimum data entry on each consenting Client will be:

- Basic demographic information including name, date of birth, Social Security Number, gender, etc.
- Data necessary for the development of aggregate reports of services, including services requested, services provided, referrals and Client goals and outcomes should be entered to the greatest extent possible.

Client Services Network is a tool to assist agencies in focusing services and locating alternative resources to help homeless and other clients. Therefore, agency staff should use the Client information in Client Services Network to target services to the Client's needs.

#### **USER RESPONSIBILITY**

Your User ID and Password give you access to Client Services Network. Initial each item below to indicate your understanding and acceptance of the proper use of your User ID and password. Failure to uphold the confidentiality standards set forth below is grounds for immediate termination from Client Services Network.

\_\_\_\_\_ My User ID and Password are for my use only and must not be shared with anyone.

\_\_\_\_\_ I must take all reasonable steps to keep my Password physically secure.

\_\_\_\_\_ I understand that the only individuals who can view information in Client Services Network are authorized users and the Clients to whom the information pertains.

\_\_\_\_\_ I may only view, obtain, disclose, or use the database information that is necessary to perform my job of assisting clients with meeting their needs.

\_\_\_\_\_ If I am logged into Client Services Network and must leave the work area where the computer is located, **I must log-off** of Client Services Network and the Internet Browser before leaving the work area.

\_\_\_\_\_ A computer that has Client Services Network or the Internet Browser "open and running" shall never be left unattended.

\_\_\_\_\_ Failure to log off of Client Services Network and the Internet Browser appropriately may result in a breach of client confidentiality and system security.

\_\_\_\_\_ Hard copies of Client Services Network printouts must be kept in a secure file.

**PRINT**

NAME \_\_\_\_\_ AGENCY \_\_\_\_\_

\_\_\_\_\_ When hard copies of information generated using Client Services Network are no longer needed, they must be properly destroyed to maintain confidentiality.

\_\_\_\_\_ If I notice or suspect a security breach, I must immediately notify the Agency Administrator for Client Services Network or the System Administrator (HVS).

**USER CODE OF ETHICS**

- A. Client Services Network Users must treat Partner Agencies with respect, fairness, and good faith.
- B. Each Client Services Network User should maintain high standards of professional conduct in their capacity as a Client Services Network User.
- C. Each Client Services Network User has primary responsibility for his/her Client(s).
- D. Client Services Network Users have the responsibility to relate to the Clients of other Partner Agencies with full professional consideration.

I understand and agree to comply with all the statements listed above.

Client Services Network User Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Email Address (**Personal emails such as Gmail, Yahoo, AOL, etc. will not be accepted**)

Agency/System Administrator \_\_\_\_\_ Date \_\_\_\_\_

NOTE: The Agency Administrator must sign all User Policy forms for the agency's Client Services Network Users.  
Staff at the Human and Veteran Services will sign the User Policy forms for Agency Administrators.