



## Multnomah County Coordinated Access Verbal Release Form

- Assessor, read the following script to the participant at the time of MSST assessment.
- Only use this form for Coordinated Access.
- Check the correct box under the “Participant’s Decision” header.

“To best assist you, we will enter the information you share as part of this process into a database. The database helps us manage our services. We protect your information using reasonable safeguards. If you let us, we will share your information to the Coordinated Access network of providers. Allowing your information to be viewed allows us to better serve you and may improve your access to housing.

Do you have any questions?

**Do you agree to share your information with the Coordinated Access network?”**

— — —  
(end of script)

Assessor, answer any questions the participant may have. For a full disclosure of a participant’s data rights, visit <https://johs.us/hmis-links-for-providers>. Then view the Privacy & Security Notice. The Privacy & Security Notice must be made available to participants upon request.

**Date:**

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**Participant’s Name:**

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**Participant’s Decision** (check only one box)

- Yes, share** participant’s information with the Coordinated Access (CA) network.
- No, do not share** participant’s information with the Coordinated Access (CA) network.

Assessor name (witness): \_\_\_\_\_

Enter two ROIs into HMIS: one for your login provider and one for the MSST provider.  
MSST data sharing occurs within HMIS for 7 years. Retain this form for 7 years.