

Ikigo c' Uburaro Ho Hum

Kwiyugarana, kuja mumwihereho
& Guhabwa indaro mu gihe co gukira COVID-19

Ikigo c' Uburaro Ho Hum
1660 Williston Road,
South Burlington, VT 05403

Ibisabwa Umushitsi

Abashitsi ba Ho Hum biyugaranye, bari mumwihereho & nabahawe indaro igihe co gukira baba bakwije ibi bikurikira:

- ✓ Bafise ibimenyetso kandi bakikekwa kuba barwaye COVID-19 ariko badakeneye kuja mu bitaro; **canke**
- ✓ Abigeze kuba ahari COVID-19 bakaba basuzumwe n'umutangabufasha mu vy'amagara nk'abashobora kwandura COVID-19 ku rwego rwo hejuru; **canke**
- ✓ Kuba yaripimishije ibipimo bikerekana ko arwaye COVID-19 (vyaremejwe) akaba afise canke atagira ibimenyetso; **na**
- ✓ Abakeneye kwiyugarana bivanye n'uko bashobora kwanduza abandi mu gihe bariko barakira kandi batagira ahandi hantu bishirira mu kato; **na**
- ✓ Abadakeneye ubufasha butangirwa mu bitaro (bashobora kuba basohotse ibitaro canke bakarungikwa ubwo nyene bavanwe aho bari i muhira); **na**
- ✓ Abadasaba ubufasha mu mibereho ya buri munsu kandi bashobora kwivana mu nyubakwa igihe bikenewe.

Ku bantu biketswe canke bari ku rugero runini rwo gushobora kuba barwaye COVID-19, kurungikwa vyemerwa gusa bivuye:

- Mu gisata c'Ubufasha mu vy'Ubutunzi (ESD) ca DCF, **canke**
- Igisata Kijejwe Amagara ca Vermont, **canke**
- Umuganga canke ikigo c'Ubuwuzi.

Uko hakorwa Ukurungika umushitsi

1. Igisata co kurungika abarwayi kizobanza gisuzume ko umukiriya akwije ibisabwa kugira yakirwe mu kigo. Abashitsi bashaka kwiyugarana, kwihereho, no Guhabwa indaro kubwa COVID-19 bategerezwa kuba bakwije ibisabwa vyatondanuwe haruguru.
2. Igisata co kurungika abashitsi kizemaza ko bakwije ibikenewe kugira barungikwe biciye kuri terefone:
 - a. Uruhusha rw'umukiriya ko yemeye kurungikwa
 - b. Gusuzuma umukiriya mu gihe c'ikiganiro co kurungikwa (inama ikorwa kuri terefone canke kwicara mu cumba kimwe bicaye ku ntambwe yizewe) kugira afashwe kwishura ibibazo.
3. Kugutangura gusaba kurungikwa, nyabuna hamagara umukozi wa Ho Hum kuri: 802-233-8922. Uzosabwa kwuzuzwa hama urungike ibi bikurikira ku bajejwe ivyo kurungika abashitsi muri Ho Hum ukoresheje email: hohum@champlainhousingtrust.org:
 - a. Ifoto y'Indangamuntu canke, igihe umushitsi atayo afise, ifoto yiwe; **na**
 - b. Urwandiko rwo gufata icumba muri Ho Hum (Inyandiko y'Inyongera A); **na**
 - c. Icemezo c'Amasezerano yo Kwiyemeza gisinye n' Umushitsi (Inyandiko y'Inyongera B); **na**
 - d. Urwandiko rwa Champlain Housing Trust HIPAA (Inyandiko y'Inyongera C); **na**
 - e. Nimba umukiriya adasanzwe afise umutangabufasha mu gace ka Burlington kandi akaba yipfuza kumuronka ibigo vy'Ubuwuzi Rusange vya Burlington birabimufasha mu gihe aba muri Ho Hum,

nyabuna rungika n'urwandiko rw'lyandikwa ry'Umurwa mu Bigo c'Ubuwuzi Rusangi vya Burlington (Inyandiko y'Inyongera D); **na**

f. **Nimba** ibipimo vyerekanye ko umukiriya arwaye COVID-19, icemezo c'ibipimo.

4. **Nyabuna ntiwigere urungika umukiriya ku kigo utarahabwa icemezo co kwakirwa.** Hejuru yo kuronka amakuru/inyangiko zose zisabwa no kumenyako umuntu yakirwa mu kigo, umukozi wa HoHum azemeza iyakirwa, yemeze ko umukiriya na Ho Hum bose biteguriye kumwakira. Abashitsi bose bategerezwa gushika inyuma ya 10 a.m. n'imbere ya 9 p.m.
5. Abakozi b'ibigo vy'Ubuwuzi Rusangi vya Burlington bazotegekanya ubuvuzi bukorwa hifashishijwe ubuhinga ngurukanabumenyi kubantu batariko barategura kwiyitaho.
6. Abatangabufasha bw'ibanze hamwe n' abakozi b'ibigo vy'Ubuwuzi Rusangi vya Burlington bazitabira ibikorwa vyo kurekura abashitsi kugira batange uruhusha rwa nyuma.

Urutonde rw'Irungikwa ry'Abakiriya – Amakuru Akenewe

Mu gihe co kwohereza umushitsi, igisata co kwohereza kizosabwa gutanga amakuru akurikira (ukwo bibonetse) ajanye n'umushitsi kugira afashe umukozi kumutegurira ikibanza kibereye.

- Izina ry'umushitsi
- Itariki y'Amavuka
- Woba ufise Ayandi makuru kubijanye na Champlain Housing hamwe n'ibigo vy'Ubuwuzi Rusangi vya Burlington, canke ubu urashobora kwuzuzwa kimwe? (Mu mvugo no/canke mu nyandiko)
- Boba bariko barahabwa Ubuwuzi bwo Muvy'imyumviro?(iki si inzitizi, gusa ni ngirakamaro)
- Uko abayeho – nikuki batagira ikibanza co kwishira mu mwiherero? Bazosubira he igihe bakize?
- Itariki y'ibipimo – ikibanza c'isuzumiro ryerekanye ko arwaye
- Itariki ibimenyetso vyagaragariyeko, nimba izwi
- Ibimenyetso biboneka ubu
- Ubushobozi bwo kwifasha – akarorero kwijana kwa muganga, kwikorera isuku ry'ivyambarwa, gutwara imodoka, gufata imiti, gutunganya ingorane iyo ariyo yose
- Kugemura imiti- boba bafise iminsi itari musyuma ya 14 kuva bashitse? Nimba atayo, ninde yabasabiye inyandiko y'imiti?
- Hoba hari integuro na zimwe zizewe mukibanza dukeneye kubimenyeshwa?

Nyabuna ntiwigere urungika abashitsit utaronka icemezo ca Ho Hum co kubaha indaro.

Ho Hum Motel

COVID-19 Isolation, Quarantine & Recovery Accommodations

Ho Hum Motel 1660 Williston Road, South Burlington, VT 05403
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Guest Criteria

Isolation, Quarantine & Recovery guests of the Ho Hum meet the following criteria:

- ✓ Are symptomatic and suspected of having COVID-19 but do not require hospital care; **or**
- ✓ Have been exposed to COVID-19 and have been assessed as high-risk for being COVID-19+ by a medical provider; **or**
- ✓ Test positive for COVID-19 (confirmed case) with minimal or no symptoms; **and**
- ✓ Require self-isolation due to risk of infecting others during recovery and have no other suitable place to self-isolate; **and**
- ✓ Do not require hospital level of care (may be discharging from a hospital or referred directly from current housing); **and**
- ✓ Do not require assistance with daily living and can self-evacuate the building if needed.

For individuals suspected or at high risk for being COVID-19+, referrals are only accepted from:

- DCF Economic Services Division (ESD), **or**
- Vermont Department of Health, **or**
- A physician or health center.

How to Make a Referral

7. Referring agency will initially assess whether the individual meets the criteria for admission at the site. Guests of COVID-19 isolation, quarantine, and recovery housing meet the criteria listed above.
8. Referring agency will ensure that they have what they need to complete the referral via phone:
 - a. Permission from the client to make the referral
 - b. Access to the client during the referral conversation (conference call or sitting in the same room at a safe distance) to help answer questions.
9. To initiate a referral, please call Ho Hum Staff at: 802-233-8922. You will be asked to complete and send the following to the Ho Hum referrals email: hohum@champlainhousingtrust.org:
 - a. A scanned copy of photo ID or, if the guest has no photo ID, a photo of the guest; **and**
 - b. Ho Hum Reservation Form (Attachment A); **and**
 - c. Signed Guest Agreement Form (Attachment B); **and**
 - d. Champlain Housing Trust HIPAA form (Attachment C); **and**
 - e. If the individual does not have a primary care provider in the Burlington area and is willing to have the Community Health Centers of Burlington take on that role while they are staying at the Ho Hum, please also send the Community Health Centers of Burlington Patient Registration Form (Attachment D); **and**
 - f. **If** the individual has tested positive for COVID-19, a confirmation of testing.

10. **Please do not send guests to the site until you have received confirmation of reservation.** Upon receiving all required information/documentation and determining that the individual is accepted at the site, Ho Hum staff will confirm the reservation, ensure that the guest and Ho Hum staff are both prepared for arrival. All guests must arrive after 10 a.m. and before 9 p.m.
11. Clinical Staff with the Community Health Centers of Burlington will work to arrange telehealth care for individuals if they are not arranging their own care.
12. Guests' Primary Care Providers and Community Health Centers of Burlington staff will participate in the discharge process to provide final authorization that staff can discharge guests.

Referral Checklist – Information to Have Available

During the referral process, the referring agency will be asked to provide the following information (as available) from the potential guest to support staff in assessing appropriate placement.

- Guest Name
- Date of Birth
- Do you have an existing Release of Information with the Champlain Housing Trust and Community Health Centers of Burlington, or can you complete one now? (Verbal and/or written)
- Are they on Medication Assisted Therapy? (this is not a barrier, just important)
- Living situation – what is the reason why they do not have a place to self-isolate? Where will they return to when they recover?
- Date of test – place and verification of positive result
- Date of onset of symptoms, if known
- Current symptoms
- Ability to care for self – for example ambulating, doing personal laundry, driving, taking medications, managing any chronic conditions
- Supply of medications – will they have at least 14 days with them when they arrive? If not, who orders their prescription?
- Are there any safety plans in place that we need to be aware of?

Please do not send guests to the site until you have received confirmation of placement from the Ho Hum.

Inyandiko y'Inyongera A

Urwandiko rwo Gufata ikibanza muri Ho Hum

Rwuzuzwa n'ikigo hama rukarungikwa kuri: hohum@champlainhousingtrust.org;
mohler@champlainhousingtrust.org; na etaylor@champlainhousingtrust.org

Ikigo Carungitse Umuntu: _____

Izina ry'Umukuru w'Umuryango (HH): _____

Itariki y'amavuko ya HH: _____ Inomero ya terefone ya HH: _____

Igitigiri c'Abantu bakuze mu muryango: _____ Igitigiri c'Abana: _____

Imyaka y'Abana: _____

Ubufasha bw'Ibikoko? ___ Ego ___ Oya

Hinyuza Itariki Yinjiriye: _____ Hinyuza Itariki Yasohokeye: _____

Umukozi yatanze Uruhusha rwo Kuhaguma:

Mbega umuryango woba afise uwumuha ubufasha mugukemura ibibazo giturumbuka? ___ Ego ___ Oya

Nimba ari ego, Ivyakozwe mu Gukemura Ikibazo bimenyeshwa na : _____

Terefone y'Uwakemuye Ikibazo: _____

Email y'Uwakemuye Ikibazo: _____

Woba warahamagaye ngo umenye ko icumba gihari? Nimba utabikoze, nyabuna hamagara Ho Hum kuri 802-233-8922.

Vyuzuzwa na Champlain Housing Trust hama bisubizwe abakozi batanga uruhusha rwo kuhaguma.

Ku bashitsi bari haruguru:

Hinyuza Itariki Yinjiriye: _____

Hinyuza Itariki Yasohokeye: _____

Imvo yo guhinyuza isohoka:

___ Irangira ry'uruhusha rwo kuhaguma

___ Kurenga ku mategeko agenga abashitsi

___ Ibindi: _____

Ho Hum Reservation Form

To be completed by agency and emailed to: hohum@champlainhousingtrust.org; mohler@champlainhousingtrust.org; and etaylor@champlainhousingtrust.org

Referring Agency: _____

Head of Household Name (HH): _____

HH Date of Birth: _____

HH Phone Number: _____

Number of Adults in household: _____ Number of Children: _____

Ages of Children: _____

Service Animal? Yes No

Check In Date: _____

Check Out Date: _____

Staff person Authorizing Stay:

Does the household have an existing case manager providing services and support? Yes No

If so, Case Management Services to be provided by: _____

Case Manager's Phone: _____

Case Manager's Email: _____

Have you called to confirm room availability? If not, please call Ho Hum at 802-233-8922.

To be completed by Champlain Housing Trust and returned to staff person authorizing stay.

For guests above:

Check In Date: _____

Check Out Date: _____

Reason for check out:

End of authorized stay

Violation of guest rules

Other: _____

Amasezerano y' Umushitsi muri Ho Hum: Uburenganzira bwawe hamwe n'ivyo utegerezwa gukora

Mu guhamagara kuri terefone yagenewe abashitsi, akura kuri 0 canke 861-7329. Nimba ata witavye 862-6244. Ku vy'ihutirwa, terefona 9-1-1

Ibisabwa

Kugira ube umushitsi wa Ho Hum utegerezwa:

- Kuba wikekwa ko urwaye COVID-19, kuba uri ku rugero runini rwo gushobora kwandura, canke ibipimo bikaba vyarerekanye ko urwaye COVID-19
- Kuba ushoboye gutunganya ibikorwa vyawe vyo mu buzima bwa buri musi
- Kuba udafise ahandi hantu wokoresha mu kwishira mu mwiherero/canke wiyugarana (kugira ngo hagufashe mu kwivuzza neza no kwirinda kwandukiza abandi)
- Kuba ushoboye gukurikiza ibisabwa bikurikira
- **Hitamwo kuba ngaha** (kwiugarana muri iki kibanza ni ku bushake bwawe) kandi ukemera amabwirizwa nimba uhisemwo kuhaguma.

Uburenganzira bwawe: Ivyo dushobora kugukorera

Turanejerejwe nuko uri hano kandi urashobora kwizera gufashwa natwe ibikurikira:

- Abakozi bo kugufasha muri iki kibanza kandi baboneka no kuri terefone kugira bagufashe kuronka ivya nkenerwa hamwe n'ivyo abandi bakeneye urahabasanga
Icumba c'uburyamo hamwe n'ubwoyero bisukuye mu gihe ushitse, hamwe n'ivyankenerwa kugira hagume hasukuye
- Isuku ry'ivyambarwa, uko bikenewe (hamagara Ubwakiriro utange uvuge igihe ubikenereye)
- Kuronswa ngene bagushikanira imfungurwa mu cumba cawe buri musi.
- Umutekano muri ico kibanza kugira ngo ube ahantu ata nkomanzi kuri wewe hamwe n'abandi
- Uburenganzira bwo kuronka abaganga hamwe no gupimwa
- Ibikoresho vyo kwikingira harimwo agapfukamunwa, ibikoresho bikingira intoke hamwe n'ibikoresho vy'isuku.

Ivyo utegerezwa gukora: Ivyo tukwitezeko

Ku neza y'amagara yawe n'umutekano wawe hamwe no ku neza y'amagara y'abandi hamwe n'umutekano wabo, turagusavye kwubahiriza ibisabwa bikurikira. Nimba udakurikije ibisabwa, ushobora gusabwa kuhava:

Amagara hamwe n'ubuzima bwiza

- Utegerezwa kwitwararika wewe nyene amagara yawe. Urasabwa kwitondera uko wiyunva umerewe kandi ukabimenyesha abaganga ko utanguye kunva urwaye hanyuma tuzogufasha kuronswa ubuvuzi ukeneye.
- Urasabwa kubahiriza amabwirizwa y'isuku.
- Urasabwa gusukura icumba cawe, uhasukure wewe nyene, ukoresheje ibikoresho vyica imigera vyagenewe isuku buri musi.
- Urasabwe kwama wambaye agapfukamunwa hamwe n'ibikoresho birinda intoke mu gihe uri mu bandi.
- Urasabwe kwitwararika ubuzima bwawe, uruhuke kugira ngo ukire neza, kandi ugume utekanye.
- Urasabwe kubaha abandi, harimwo n'abandi bashitsi, abakozi, hamwe n'abakorera bushake.

Kuba muri Ho Hum

- Mu gihe uba muri Ho Hum, utegerezwa kuguma mu kigo umwanya wose. Abashitsi ntibemerewe uretse igihe wabanje kubisaba ku bwakiriro, ku bigemurwa bisigwa hanze y'ibiro.
- Urashobora kuja hanze gufata akayaga muri ico kibanza mu gipangu ariko ukaguma usiga intambuko zitadandatu zingana ni metero zibiri hagati yawe nabandi bari hanze. Urasabwe kwambara agapfukamunwa iyo uri hanze, kugira ngo ukingire abandi. Urasabwa kuguma mu gipangu, kandi ivyo biragenzurwa n'abakozi. Nimba ufise abana muri kumwe, bategerezwa gucungwa umwanya wose mu gihe bari hanze.
- Ibinyobwa biboreza ntivyemewe kunyobwa hanze y'ivyumba.
- Kunywera itabi mu vyumba ntivyemewe. Ushobora kwirukanwa kandi ugacibwa amande y'amadorari 100 basanze umwotsi mu cumba cawe. Ushobora kunywera itabi hanze imiryango yugaye kandi ku metero zitatu uvuye ku nyubakwa.
- Mu vyumba haba hari terefone.
- Icumba kimwe kiba gifise akuma gakanyisha hamwe n'agashusha ivyo kurya. Ivyumba vyujuje ibisabwa biba bifise icuma gikanyisha n'igiteka. Abashitsi ntibemerewe gukoresha ibikoresho vyabo vyo guteka, harimwo ivyuma bishusha hamwe n'ibiteka bikoresha umuyagankuba, mu cumba ico arico cose mu gipangu kandi ntibemerewe gukoresha igikoresho ico arico cose co guteka gisohora urubeya muri ico gipangu, harimwo ku mbuga no hanze.
- Nta bitungwa vyemewe. Ibikoko bifasha abafise ubumuga biremerewe .
- Abahohoteye abantu bishingiye ku gitsina, ntibemerewe kunvo z'ingorane bashobora guteza abandi bashitsi kandi bazoca basabwa kuhava basanze banditse mu gitabo.
- Nimba ufashe ingingo yo guhagarika kuguma muri Ho Hum, turashobora kumvikana ingene twokunguruzwa ahantu hatari kure cane muri Reta mugihe ikiringo cokwikumira no kwiyugarana vyubaha impanuro zironswa mu kubungabunga amagara. **Igihe umaze gusohoka muri Ho Hum ushobora kudasubira kugaruka.**

Inyifato

- Nimba wasabwe kureka ibintu bimwe na bimwe canke wahawe amabwirizwa n'izindi nzengo, urasabwa kubukurikiza ngaha.
- Ni bagufata uriko uracuruzwa ibiyayuramutwe muri iki kibanza, tuzobimenyesha inyamiramabi, hanyuma dusabe igipapuro kikubuzwa kuzogaruka muri runo rupangu.
- Ibirwanisho, ubugizi bwa nabi n'inyifato yo gushamirana, harimwo gukubagura biciye mu majambo ajanye n'igitsina ntivyemewe.
- Utegerezwa kwama wambaye impuzu n'ibirato canke ikambambiri umwanya wose.
- Niwarenga kuri aya mabwirizwa y'abashitsi, uzokwirukanwa.

Ibikoresho vy'umuntu

- Urasabwa kujana ibikoresho waje uzanye.

Mu gusinya ibi bikurikira ndemeza ko nabanje gusoma aya masezerano ngathura uburenganzira bwanje (ivyo niteze gukorerwa na Ho Hum) n' inshingano zanje (ivyo nsabwa, n'ivyo ntegerezwa gukurikiza) nk'uko vyatondanuwe haruguru.

Igikumu c'umushitsi _____ Itariki: _____

Izina ry'Umushitsi _____ Itariki: _____

Umukono w'Umukozi _____ Itariki: _____

Ho Hum Guest Agreement: Your Rights and Responsibilities

To reach the front desk, dial 0 or 861-7329. If no one answers, dial 862-6244. For Emergencies, dial 9-1-1

Criteria

In order to be a guest at the Ho Hum you must:

- Be suspected of being positive for COVID-19, be at high-risk, or have tested positive for COVID-19
- Be able to manage your own activities of daily living
- Have no other suitable place to self-quarantine/isolate (to support healthy recovery and prevent infecting others)
- Be able to follow Responsibilities as listed below
- **Choose to be here** (isolating at this site is voluntary) and agree to the rules if you choose to stay.

Your Rights: What you can Expect from Us

We are glad that you are here and you can expect the following from us:

- Supportive staff on site and available by telephone to help ensure your needs and the needs of others are met
Clean bedroom and bathroom when you arrive, and supplies to keep it clean
- Laundry services, as needed (call the Front Desk to make an appointment)
- Food delivered to your room daily.
- Security onsite to ensure that it is a safe environment for you and others
- Access to a healthcare provider and to testing
- Personal protective equipment including a face mask, gloves and room cleaning supplies.

Your Responsibilities: What we Expect from You

For your health and safety and the health and safety of others, we ask you to accept the following responsibilities. If you do not act according to these responsibilities, you may be asked to leave:

Health and Wellbeing

- You are responsible for your own health. Please pay attention to how you are feeling and let your medical provider know if you start to feel ill and we will help you get the medical care you need.
- Please maintain personal hygiene.
- Please keep your room clean, and clean up after yourself, using disinfecting supplies to clean surfaces every day.
- Please always wear a face mask and gloves when you are around others.
- Please take care of yourself, rest to support your recovery, and remain safe.
- Please be respectful of others, including other guests, staff, and volunteers.

Staying at the Ho Hum

- While you are staying at the Ho Hum, you must remain onsite at all times. Visitors are not permitted except as pre-arranged with the front desk, for deliveries to be dropped off outside of the office.
- You may go outside for fresh air onsite on the premises so long as you maintain a distance of at least six feet from others who may be outside. Please wear a mask when outside, to protect the health of others. You are required to stay on the premises, and that is monitored by staff. If you have children with you, they must be supervised at all times while outside.
- Alcoholic beverages may not be consumed outside of rooms.
- Smoking is not permitted in the rooms. You will be asked to leave and may be subject to a \$100 charge if there is smoking in your rooms. You may smoke outside with room doors closed and ten feet away from the building.
- In-room local phone service is available.
- Single rooms include a mini-fridge and microwave. Efficiency rooms include a refrigerator and stove. Guests may not use their own cooking devices, including hot plates and electric fry pans, within any room of the premises and may not use any open flame cooking device on the premises, including grounds and decks.
- No pets are allowed. Service animals assisting persons with disabilities are permitted.
- Registered sex offenders are not permitted to stay due to the vulnerability of other guests and will be asked to leave if found to be on the registry.
- If you decide to end your stay at the Ho Hum, we can arrange transportation to a reasonable destination within the State as long as your period of self-isolation and quarantine meets health care recommendations. **Once you leave the Ho Hum you may not be able to return.**

Behavior

- If you are required to follow certain restrictions or conditions from other programs, you are expected to follow them here.
- If you are found to be selling drugs on the property, we will notify the police, and obtain a no-trespass order.
- Weapons, violence and threatening behavior, including verbal sexual harassment, are not allowed.
- You must be clothed and have shoes or slippers on at all times.
- If you violate these guest rules, you may be asked to leave.

Personal Items

- Please take with you any items that you bring.

By signing below I agree that I have read this agreement and understand my rights (what I can expect from the Ho Hum) and my responsibilities (what is expected of me, and that I must follow) that are listed above.

Guest Signature_____

Date_____

Guest Name_____

Date_____

Staff Signature_____

Date_____



UBURENGANZIRA BWA HIPAA BWO GUKORESHA NO GUHISHURA AMAKURU AJANYE N'AMAGARA

Amazina mu Ndome Nininini: _____

I. Uburenganzira Ntegerezwa kurekura

Ndekuriye uburenganzira Champlain Housing Trust, Inc. bwo gukoresha no guhishura amakuru akurikira yerekeye amagara yanje:

- Amakuru yose yerekeye amagara yanje

- Amakuru yerekeye amagara yanje afitaniye isano n'ukwivuza canke uburwayi bukurikira:

COVID-19 _____

- Amakuru yerekeye amakuru yanje y'ivyabaye mu kiringo kuva _____ (igenekerezo) gushika _____ (igenekerezo)

- Ibindi: _____

Ako gace ko haruguru gashobora kwugururira aya makuru ku buvuzi ku mutangabufasha mu buvuzi uwo ariwe wese, uwutanga ubufasha bw'imibanire mu mihana mu kiringo nzoba nkiri muri Ho Hum.

Intumbero y'ubu burenganzira ni (shira akamenyetso aho hose bijanye):

- Gutanga ubufasha mu buvuzi, mu mibanire na/canke ubundi bijanye mu gihe nzoba nkiri muri Ho Hum na/canke mu kworoshya ubushobozi bwanje bwo guhabwa iyi ndaro .

- Ibindi: _____

Ubu burenganzira buzohera:

- Ku wa (igenekerezo) _____

- Ibintu bikurikira nivyoshika: _____

II. Uburenganzira Mfise

Ndatahura ko mfise uburenganzira bwo gukurako ubu burenganzira narekuye, mu nyandiko, umwanya uwo ari wo wose, kiretse aho ikoresheya canke ihishurwa ry'amakuru ryahejeje gukorwa bafatiye ku ruhusha nari nahejeje gutanga ubwa mbere. Sinoshobora gukurako ubu burenganzira narekuye nimba intumbero yabwo yari ukuronka asiransi. Kugira nkureko ubu burenganzira, ntegerezwa kubikora mu nyandiko kandi nkayirungikira umuntu abereye twagiraniye amasezerano y'uguhishura amakuru.

Ntegera ko ikoresheya n'ihishurwa ry'amakuru ryahejeje gukorwa bafatiye ku ruhusha nari nahejeje gutanga ubwa mbere bidashobora gukurwako.

Ndatahura ko amakuru yakoreshejwe canke yahishuwe bafatiye ku ruhusha nabarekuriye ashobora gusubira guhishurirwa abandi kandi ko aba atakirindiwe umutekano n'Amategeko Ngenderwako ya HIPAA Yerekeranye n'Ibanga Rigirirwa Amakuru y'Umuntu Ubwiwe.

Ndatahura ko seruvise zironswa umwe mu bagiraniye amasezerano zidashobora kuba imvo yo gushira umukono kuri ubu burenganzira ndekuye kandi ndemerewe kwanka gushira umukono kuri ubu burenganzira.

Umukono w'umurwayi: _____ Itariki: _____

Umukono w'Umuserukizi Uvyemerewe: _____

Itariki: _____

III. Uruhusha rw'Inyongera ruraba Ibisabwa Binaka

Izi mpapuro zo kwa muganga zirimo amakuru yerekeye **Gukorerwa amabi ku mubiri canke mu vy'igitsina, akaborerwe, ibiyayura umutwe, indwara zandukira ziciye mu bihimba vy'irondeka, gukorora inda, canke ubuvuzi bw' indwara zo mu mutwe**. Uruhusha rutandukanye rutegerezwa kuronswa mbere yuko aya makuru ashobora gushikizwa.

- Ntanze uruhusha kugira aya makuru yavuzwe hejuru ashikirizwe.

- Ndanse gutanga uruhusha kugira aya makuru yavuzwe hejuru ashikirizwe.

Umukono w'Umurwayi canke w'Umuserukizi Uvyemerewe: _____

Itariki: _____ Isaha: _____

IV. Uruhusha rw'Inyongera rwerekeye umugera wa Sida HIV/AIDS

Izi mpapuro zo kwa muganga zishobora kuba zirimo amakuru araba **Gupima umugera wa Sida HIV no/canke gusuzuma canke kuvura Sida**. Uruhusha rutandukanye rutegerezwa kuronswa kugira aya makuru ashobore gushikizwa.

- Ntanze uruhusha kugira aya makuru yavuzwe hejuru ashikirizwe.

- Ndanse gutanga uruhusha kugira aya makuru yavuzwe hejuru ashikirizwe.

Umukono w'Umurwayi canke w'Umuserukizi Uvyemerewe: _____

Itariki: _____ Isaha: _____



**HIPAA AUTHORIZATION FOR USE OR DISCLOSURE
OF HEALTH INFORMATION**

Print Name: _____

I. My Authorization

I authorize Champlain Housing Trust, Inc. to use or disclose the following health information:

- All of my health information

- My health information relating to the following treatment or condition:

COVID-19 _____

- My health information covering the period from _____ (date) to _____ (date)

- Other: _____

The above party may disclose this health information to any healthcare, social service or housing provider providing services to me during my stay at the Ho Hum.

The purpose of this authorization is (check all that apply):

- To provide healthcare, social services and/or related services during my stay at the Ho Hum and/or to facilitate my ability to obtain other housing.

- Other: _____

This authorization ends:

- On (date) _____

- When the following event occurs: _____

II. My Rights

I understand that I have the right to revoke this authorization, in writing, at any time, except where uses or disclosures have already been made based upon my original permission. I may not be able to revoke this authorization if its purpose was to obtain insurance. In order to revoke this authorization, I must do so in writing and send it to the appropriate disclosing party.

I understand that uses and disclosures already made based upon my original permission cannot be taken back.

I understand that it is possible that information used or disclosed with my permission may be re-disclosed by the recipient and is no longer protected by the HIPAA Privacy Standards.

I understand that services provided by any party may not be made subject to signing this authorization and that I may have the right to refuse to sign this authorization.

Signature of Patient: _____ **Date:** _____

Signature of Authorized Representative: _____

Date: _____

III. Additional Consent for Certain Conditions

This medical record may contain information about **physical or sexual abuse, alcoholism, drug abuse, sexually transmitted diseases, abortion, or mental health treatment**. Separate consent must be given before this information can be released.

- I consent to have the above information released.

- I do not consent to have the above information released.

Signature of Patient or Authorized Representative: _____

Date: _____ **Time:** _____

IV. Additional Consent for HIV/AIDS

This medical record may contain information concerning **HIV testing and/or AIDS diagnosis or treatment**. Separate consent must be given to have this information released.

- I consent to have the above information released.

- I do not consent to have the above information released.

Signature of Patient or Authorized Representative: _____

Date: _____ **Time:** _____