

IPV Implementation Toolkit

Privacy Protections

Questions MCPs can ask to ascertain if referral platform designers are doing all they can to protect survivors.

1) How is survivor and/or sensitive health information protected in the tool?

- If a subscriber shares that they have experienced DV or are trying to find help for DV, how does that get put in their Find Help record? What personal information is collected and how is it documented?
- What is the universe of people who can access subscriber profiles in Find Help? In other words, who can access the information? Under what circumstances can a profile be viewed? Is there a list of authorized staff who can view the information?
- What information is shared when making a referral? Is a subscriber's whole profile shared or is only the information needed for the referral shared?
- Are there tools in place to automatically put any mention of DV behind a "firewall" where no one can see it?
- If DV is disclosed, what information is written down?

2) How can survivors maintain control over what information is shared?

- Do survivors have the ability to control what information goes into their Find Help profile or gets shared during the referral process?
- What is the process for asking a survivor for their consent to share information—and can survivors change their mind and rescind that consent?

3) How do you train your team to protect sensitive information?

- How is your call center staff trained on what to do if there is a disclosure of DV?
- What information does the call center share with survivor about how their information is shared?

4) What are the obligations of the CBOs to report back?

- Is the tool a closed-loop referral that helps more actively manage the referrals of the patients and gets/collects information back from the receiving organization? If so, what information is collected and who gets notified of the receipt of services.
- DV Services providers may have concerns about their ability to share information about if they have seen a specific client. Can they provide de-identified information back to Find Help? Or use alternate language to indicate that they have seen the patient that does not confirm or deny services were delivered?
- What information will the CBO be required to report back to the SSRO? Will the CBO be required to provide information about the services delivered to a survivor? Who is able to see/access the information that the CBO includes?