

No./Title:	5.02 Privacy & Confidentiality Policy
Section:	Section 5: Client and Community
Document Type:	Policy
Responsibility:	Chief Executive Officer
Approval Date:	25/11/2016
Due for Review:	Within 3 years of approval date
Context:	This document forms part of the WHGNE Policy & Procedure Manual located at: whgne.sharepoint.com > Team Files > 1. Organisational > Policies & Procedures > Section 05 – Client & Community
Appendices:	NIL
Purpose:	To ensure that all health and personal information collected, managed or stored by WHGNE, regardless of how or where it is obtained, is handled sensitively, securely and in accordance with privacy principles.

1. POLICY STATEMENT

WHGNE has an obligation to protect the privacy and confidentiality of all clients, staff, volunteers, research participants and stakeholders. WHGNE will comply with (where applicable) the following legislation:

1. Commonwealth law: Privacy Act 1988 (Cth) which from 12 March 2014, sets out the new Australian Privacy Principles
2. State law: Privacy Data and Protection Act 2014 (Vic) (PDPA) which sets out the Information Privacy Principles (Victorian IPPs); and Health Records Act 2001 (Vic) which sets out the Health Privacy Principles (Victorian HPPs), (Collectively referred to as Privacy Laws)

All information collected, managed or stored by WHGNE will be handled sensitively, securely and in accordance with relevant privacy principles.

2. POLICY DETAILS

2.1 DEFINITIONS

Privacy	Privacy can be defined as a right or expectation to: not be interfered with, be free from surveillance and eavesdropping, bodily privacy, along with a moral right to be left alone. In the context of information privacy, the definition of privacy incorporates this, along with the characteristics of confidentiality and having personal information withheld from public knowledge or observation.
Confidentiality	Confidentiality relates to a worker's obligation not to disclose client information. Confidentiality belongs to the client, meaning that it can only be breached with permission of the client. In some circumstances confidentiality can be broken by waiver or in situations in which it is justified.
Informed Consent	Clients can waive privacy and confidentiality by providing consent. Where allied services share information about a client, this should be done with the consent of the client.
Personal information	"personal information means information or an opinion about an identified individual, or an individual who is reasonably identifiable: (a) whether the information or opinion is true or not; and (b) whether the information or opinion is recorded in a material form or not"

[Sourced from: <http://www.nfplaw.org.au/node/81/download/38f2f6a1cfff7ea95f2fa6b1a40ea848>]

2.2 WHGNE PRACTICES & PROCEDURES

The collection, access and storage of personal and health information obtained by WHGNE, will be managed in accordance with the following practices and procedures:

2.2.1 COLLECTION

We will identify the primary purpose for information and collect only the information needed for that purpose:

- When we collect information from an individual we will tell them why we are collecting it, how it will be handled and the consequences for them if the information is not provided. We try to set this information out in any form/document in which we ask for health information to be provided.
- We will always try to collect information in a fair, lawful and non intrusive way. Wherever possible, we will collect information directly from an individual rather than from third parties. We will do our best to tell an individual if we collect information about them from a third party.
- Generally, we collect and use an individual's information for the purpose of providing services and for purposes directly related to providing such services. We may disclose an individual's information to other health care providers for the purpose of providing further services. We may also use an individual's information for other purposes which are permitted under the privacy laws. Examples of when we are allowed to use or disclose information include: to a court in compliance with a summons or court order or where there is a serious and imminent threat to an individual's life, health, safety or welfare or a serious threat to public health, safety or welfare. Aside from where the law specifically allows us to use or disclose health information, we do not use or disclose such information for purposes which are unrelated to the purposes for which we collected the information, without an individual's consent.

2.2.2 ACCESS

We will not share the information for a different purpose without the person's consent.

Any individual or organisation (such as an outside service contractor), seeking access to health information held by Women's Health Goulburn North East is required to sign a confidentiality agreement. When entering an agreement, the recipient agrees that the information will only be used and disclosed according to the terms and conditions outlined in the agreement. However, if an individual authorises us in writing to release the health information to another individual or organisation, then a confidentiality agreement is not required.

We will not use or disclose information of a personal nature, except to the extent that this is required, authorised or permitted under law. All our staff are required to be trained and understand their obligations under the laws relating to maintaining an individual's privacy.

We will provide the person with access to their information on request so that if an individual:

- wants to have access to health information we hold about them;
- believes information we hold about them is inaccurate and would like to request that it be amended;
- wants to know more about the type of information we hold, for what purposes and how we deal with that information; or
- has concerns that we may have infringed their privacy rights, they are able to contact WHGNE.

We will not allow access to an individual's health information where doing so would unreasonably disclose information relating to others or where the information would otherwise be exempt from disclosure by law.

Access to our record keeping and computer systems is controlled and monitored. Only staff with a direct professional involvement in a matter will have access to files. Our staff and authorised external users only have access to systems that their duties require. Our physical or paper records are securely stored and can be accessed only by authorised personnel.

2.2.3 STORAGE

We will keep the information secure and dispose of it only when redundant, in accordance with statutory requirements.

All appropriate measures will be taken to ensure that the information we hold about an individual is accurate, complete, and up to date. We are required under the *Public Records Act* to hold some records for extended periods. We will not keep information longer than we need to. From time to time, we will conduct audits of our records and databases, to ensure that the information we hold is accurate and up to date.

We may from time-to-time transfer health information about an individual to organisations outside Victoria for the purpose of the provision of care or treatment to them. We will only do this where an individual consents, where we believe that the recipient organisation is subject to binding privacy obligations that are substantially similar to the ones under which we operate, or where it is in an individual's interests for us to do so (and it is impracticable to obtain their consent, and if we were able to ask, they would be likely to give consent).

Electronic and hard-copy information will be stored in accordance with WHGNE's Information Security Policy.

2.2.4 INFRINGEMENTS

We will ensure that any suspected infringements of privacy are thoroughly investigated. Disciplinary action will be taken in cases where investigations or suspected infringements of privacy are proven.

3. RESPONSIBILITY

Chief Executive Officer

The Chief Executive Officer is responsible for:

- Implementing, adhering to, and reviewing this policy, and any associated policies and procedures.
- Investigating any complaints or suspected breaches of privacy/confidentiality
- Conducting an audit of database records.

WHGNE Staff

All WHGNE staff are responsible for:

- Working in accordance with this policy, and the associated IT and Information Security policies.
- Maintaining client confidentiality and protecting client privacy.
- Maintaining up to date and accurate client records.

4. RELATED DOCUMENTS

- [5.02A Privacy Policy Brochure.pdf](#)

- [5.03 External Complaints Policy.pdf](#)
- [8.01 Information Security Policy.pdf](#)
- [8.02 IT Security Policy.pdf](#)
- [7.01 Research Policy.pdf](#)
- [Confidentiality Agreement.pdf](#)
- [4.11B Confidentiality Agreement - Student Placement.pdf](#)
- Policy Acknowledgment Form

5. VERSION CONTROL

Version Number	Content Updated	Person Responsible	Date Updated
3.1	Minor formatting and content changes (new logo, changed EO to CEO, added links in Related Documents)	Knowledge Translation and Compliance Officer	18/08/2022
3.0		CEO	25/11/2016
2.0		CEO	25/11/2013
1.0	Original policy	CEO	17/12/2010