



## PRESBYTERIAN AGED CARE POLICY

<b>Policy Title: Privacy Policy</b>	
<b>Policy Level: Governance</b>	
<b>Policy Group: Organisation, Structure and Management</b>	
<b>Policy Reference No: GP2005/03</b>	<b>Revision Reference No: 1.2</b>
<b>Commencement Date: March 2009</b>	<b>Review Date: March 2011</b>

### **PART ONE: POLICY STATEMENT:**

#### **1.1 Policy Declaration:**

Presbyterian Aged Care is committed to respect the rights of every resident/client to privacy, dignity and confidentiality in all clinical, lifestyle and administrative dealings, contracts and media interface.

PAC will ensure that all information deemed to be of a private and confidential nature pertaining to residents/clients will be managed in accordance with all legislative requirements.

#### **1.2 Policy Objective:**

- Provide an environment that will enable residents/clients to maintain relationships with privacy and dignity.
- Develop practices to enable residents/clients to undertake personal activities with privacy.
- Promote respectful relationships between all staff, residents/clients and their representatives.
- Ensure compliance with all relevant legislation, regulations and guidelines for the protection and maintenance of the privacy of individuals.
- Ensure compliance with all relevant legislation, regulations and guidelines pursuant to the national privacy principles and health privacy principles for the collection of personal or health information.

#### **1.3 Related Legislation:**

Privacy Amendment (Private Sector) Act 2000

Health Records and Information Privacy Act 2002.(NSW)

Accreditation Grant Principles 1997

Accreditation Standards: Expected Outcomes: 1.2, 2.2, 3.2 & 4.2 Regulatory Compliance, 1.8 Information Management, 3.9 Privacy and Dignity

**Related Policies & Procedures:**

PAC Admissions Policy

PAC Critical Incident Policy

PAC Police Records Checks Policy

**1.4 Policy Provisions:****Definitions:**

**PAC** refers to Presbyterian Aged Care

**NPP** refers to National Privacy Principle

**HRRIP** refers to Health Records and Information Privacy Act

**Health information** means:

- (a) information or an opinion about:
  - (i) the health or a disability (at any time) of an individual; or
  - (ii) an individual's expressed wishes about the future provision of health services to him or her; or
  - (iii) a health service provided, or to be provided, to an individual; that is also personal information; or
- (b) other personal information collected to provide, or in providing, a health service;  
or
- (c) other personal information about an individual collected in connection with the donation, or intended donation, by the individual of his or her body parts, organs or body substances.

**Health service** means:

- (a) an activity performed in relation to an individual that is intended or claimed (expressly or otherwise) by the individual or the person performing it:
  - (i) to assess, record, maintain or improve the individual's health; or
  - (ii) to diagnose the individual's illness or disability; or
  - (iii) to treat the individual's illness or disability or suspected illness or disability;or
- (b) the dispensing on prescription of a drug or medicinal preparation by a pharmacist.

**Access** refers to a health service provider giving an individual information about themselves. Access may include inspecting personal information or having a copy of it.

**Collection** refers to a health service provider collects personal information if it gathers, acquires or obtains personal information from any source and by any means. Collection includes when a health service provider keeps personal information it has not asked for or it has come across by accident.

**Disclosure** refers to, in general terms, a health service provider discloses personal information when it releases information to others outside the organisation. Disclosure does not include giving an individual information about themselves (this is 'access', see above).

**Use of personal information** refers to the handling of personal information within an organisation, including 'the inclusion of information in a publication'.

**Primary Purpose** refers to the main or dominant reason a health service provider collects information from an individual. Having a carefully determined primary purpose is part of privacy-sensitive, holistic health care.

**Directly related secondary purposes** refers to the concept of holistic health care that recognises that a health service provider can treat an individual for a number of different complaints or ailments at a single time. In these circumstances, the primary purpose is linked to each of these conditions or ailments. This principle also allows personal information to be used or disclosed without further consent if this occurs for reasons directly related to the primary purpose and these are within the reasonable expectations.

**Identifier** refers to a number assigned by an organisation to an individual to identify uniquely the individual for the purposes of the organisation's operations.

## **PART TWO: RESPONSIBILITIES:**

### **Chief Executive Officer:**

- Has overall responsibility to ensure organisational compliance with the PAC Privacy Policy and related legislative and regulatory requirements.

### **Executive Manager and Community Programs Manager:**

- Have responsibility for the direction and oversight of the PAC Privacy Policy and for ensuring compliance with the PAC Privacy Policy is maintained in residential care and community / self care programs respectively.

### **Chief Finance Officer:**

- Has responsibility for ensuring compliance with the PAC Privacy Policy is maintained in PAC's financial systems.

### **Facility / Program Managers:**

- Have responsibility for ensuring that compliance with the PAC Privacy Policy is maintained in all PAC programs, and personnel adhere to the PAC Privacy Policy.

### **Staff and Volunteers:**

- All staff and volunteers are responsible for their own individual actions in complying with the PAC Privacy policy and maintaining confidentiality of resident / client personal and health information.

### **Suppliers of External Services/Contractors:**

- All service agreements between PAC and external service providers shall include reference to the PAC Privacy Policy and all actions and activities undertaken by external service providers/contracts must be compliant with the PAC Privacy Policy standards.

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## **PART THREE: PROCEDURES:**

### **3.1: Health Information:**

These procedures relate to privacy considerations pertaining to the management of health related information processes and systems. These procedures and policies have been developed in accordance with the Privacy Amendment (Private Sector) Act 2000 and Health Records and Information Privacy Act 2002 (NSW).

#### **3.1.1. Information collection:**

PAC will only collect information for a lawful purpose, that is, information that is directly related to the organisation's activities and necessary for that purpose.

PAC will ensure that the health information is relevant, not excessive, accurate and up to date. Information collection will not unreasonably intrude into the personal affairs of the individual. We will take reasonable steps to ensure that the personal information we hold is accurate and current.

PAC will collect health information directly from the person concerned, unless it is unreasonable or impractical to do so.

PAC will inform the person why they are collecting the health information about them, what we will do with the health information, and who else might see it. We will also inform the person how they can see and correct their health information, and any consequences if they decide not to provide their information to us.

We will be open about how we manage personal information. If asked, we will provide information on our approach to privacy.

#### **3.1.2 Storage:**

PAC will ensure that health information is stored securely, not kept any longer than necessary, and disposed of appropriately. All information collected will be protected from unauthorized access, use or disclosure.

We will implement measures to protect personal information from misuse, loss, unauthorised access, changes or disclosure.

We will usually destroy or permanently de-identify personal information when we no longer need it.

### **3.1.3 Access and Accuracy:**

PAC will explain to the person what health information about them is being stored, why it is being used and any rights they have to access it.

PAC will allow authorised individuals to access their health information without unreasonable delay or expense.

PAC will allow authorised individuals to update, correct or amend their health information where necessary.

PAC will ensure that the health information is relevant and accurate before using it.

Usually, when asked, we will give an individual access to their personal information, unless there is a reason why we cannot do so.

We may deny a request for access if we reasonably believe:

- It would pose a serious or imminent threat to the life or health of any person.
- The privacy of others would be unreasonably affected.
- The request is frivolous or vexatious.
- The information relates to existing legal proceedings with the person who is the subject of the information and would not be accessible through discovery.
- Providing access would prejudice negotiations with the person who is the subject of the information by revealing our intentions regarding those negotiations.
- Providing access would be unlawful or denying access is required or authorised by law.
- Providing access would be likely to prejudice an investigation of unlawful activity or law enforcement, public revenue protection, prevention and remedying of seriously improper conduct, or preparation or conduct of court or tribunal proceedings, either by or on behalf of an enforcement body.
- An enforcement body performing a lawful security function requests denial of access to protect national security.
- Where evaluative information generated by us in making a commercially sensitive decision would be revealed by providing access. In this situation we may provide an explanation for the commercially sensitive decision instead.

If we refuse access, we will usually explain why in accordance with National Privacy Principle 6 – Accessing and Correcting Personal Information.

### **3.1.4 Use:**

PAC will only use health information for the purpose for which it was collected, or a directly related purpose that the person would expect.

### **3.1.5 Disclosure:**

PAC will only disclose health information for the purpose for which it was collected, or a directly related purpose that the person would expect.

Situations where we may use or disclose information without an individual's consent include:

- where we reasonably believe that use or disclosure is necessary to reduce or prevent a threat to a person's life, health or safety or a serious threat to public health or safety
- where we are investigating or reporting on suspected unlawful activity
- where the use or disclosure is required by law.
- where we reasonably believe that the use is necessary for law enforcement, public revenue protection, prevention and remedying of serious improper conduct, or conduct of court or tribunal proceedings, either by or on behalf of an enforcement body.

If we use or disclose information without consent we will make a written note of such disclosure.

### **3.1.6. Identifiers and Anonymity:**

PAC will only identify individuals by using unique identifiers if this is reasonably required to carry out our functions effectively. We will generally not adopt Commonwealth Government identifiers (such as Medicare Card numbers) for use as our own identifiers, unless such use is mandated by government policy.

PAC will give individuals, if reasonably possible, the option of dealing with us, or receiving services, anonymously, where this is lawful and practicable.

### **3.1.7. Transfer and Linkages:**

PAC will only transfer health information outside New South Wales in accordance with Health Privacy Principle 14.

PAC will ensure that individuals have given their consent to participate in any system that links health records across more than one organisation. We will only include health information about them, or disclose their identifier for the purpose of the health records linkage system, if they have expressly consented to this.

### **3.1.8 Sensitive Information:**

Generally, we will only collect sensitive information with an individual's consent, except where:

- The collection is required by law or to establish, exercise or defend a legal or equitable claim, or;
- It is necessary to prevent or lessen a serious or imminent threat to the life or health of the person who is the subject of the information.
- Research, as is determined from time to time, by PAC, that will be conducted into the pursuit of better outcomes for residents/clients.

### **3.2: General:**

All staff members employed by Presbyterian Aged Care are required to sign the PAC Staff Privacy Agreement and are to receive education on privacy and dignity issues.

All residents/clients are offered the PAC Resident or Client Privacy Agreement document

### **3.3: Residents'/Client's Privacy:**

Staff are to seek permission from residents/clients before entering their room, home or private areas.

Privacy must be given to each resident/client when undertaking personal activities, e.g. bathing, toileting, dressing and personal/intimate relationships.

Residents/clients are to be allowed privacy when speaking with visitors and during phone conversations.

Residents'/clients' mail is not to be opened or read by staff unless the resident/client requests or requires assistance.

Residents' /clients' personal property is their own and staff and other residents/clients are not free to use it unless invited to do so.

### **3.4: Related Documents:**

Staff Privacy Agreements  
Resident / Client Privacy Agreements.

### **REVISION HISTORY:**

<b>Last edits</b>	<b>March 2009</b>	<b>Previous Edits</b>	
<b>Responsible</b>	<b>Executive Management Team</b>	<b>Approved By:</b>	<b>Chief Executive Officer</b>
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