

# PRIVACY POLICY

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## **WHAT INFORMATION WE COLLECT**

Identifying details including DOB, address, telephone numbers, emergency contacts, marital status, employer details, Medicare number, health insurance details, ethnicity, allergies and other sensitivities, past and current medical history, social history, medical procedures, diagnostic tests, results, referrals, reports from other health service providers, x-rays, progress notes, financial details related to billing, medications, Immunisations, WorkCover examinations, dates, amounts, related to this data. Where possible, information is collected directly from the patient.

## **PURPOSE OF COLLECTION**

To gain sufficient information to provide for optimal management of each patient's health, care and wellbeing and to ensure Service is viable to continue treating patients.

## **WHO HAS ACCESS?**

Data accessed only via authorised GPs and staff who have individual, graded password access. All staff have signed privacy agreements

Patient has right to access own personal health information under privacy legislation with noted exceptions.

Under certain legislation we must disclose patient information e.g. Infectious Diseases Act - Health (Infectious Diseases) Regulations, Adoption Act. Records must be disclosed under court orders, subpoenas, search warrants and Coroner's Court cases.

## **HOW IS DATA USED?**

For maintaining current information about patients, updating demographics; accounts - payment, invoicing, follow-up; recall and reminder system, actioning report results, adding to medical record for comprehensive data - results, operation reports, emergency department visits, after hours and home consultations, telephone notes.

Patients referred to another health service provider will be aware that their information in referral letter is provided to that service provider for the normal course of ongoing patient care and management.

Accounts details only provided to gain payment from insurance/Medicare/legal/WorkCover/TAC offices. No additional unnecessary data given.

## **HOW IS THE DATA STORED?**

Electronically - patient registration form, accounts form, Medicare, Health Insurance claim form, Referral letter, medical record forms as per RACGP medical records. Medication scripts written manually and via computer (Best Practice software), Immunisation forms - ACIR, Pap Smear Registry forms, S8 Drugs - internal booklet used to record usage, sterilisation register (paper), doctor's letters/referrals on computer.

### **DO WE INFORM PATIENTS OF THE INTENDED USE OF THEIR INFORMATION?**

When required by law; when we refer patients to other providers; to obtain payments and when we seek patient feedback. Our MDS does not participate in research activities.

### **WHEN DO WE OBTAIN A PATIENT'S CONSENT?**

Consent is implied in the normal conduct of our business when our doctors have to refer or request. Specific consent is obtained for procedures and other matters that fall outside the norm of a medical consultation.

### **IS THE DATA WE COLLECT ACCURATE, UP TO DATE AND COMPLETE?**

We confirm details each time with patient to ensure accuracy and currency of patient information.

### **SECURITY OF PERSONAL INFORMATION**

We take all reasonable steps to protect personal information we hold from misuse, interference and loss, and from unauthorised access, modification or disclosure. In certain circumstances, we destroy or de-identify personal information.

### **ANONYMITY AND PSEUDONYMITY**

The nature of our business does not permit anonymity or pseudonymity.