

## Privacy and Confidentiality Policy

### Consent

1. TGC provides a privacy document following guidelines outlined by the Australian Psychological Society. <https://psychology.org.au/getmedia/d873e0db-7490-46de-bb57-c31bb1553025/aps-code-of-ethics.pdf>
2. Changes to the Commonwealth Privacy Act are monitored by TGC as they occur or yearly. Changes to privacy documents, policies and protocols will be acted on as soon as practicable.
3. When clients organise their first appointment they will be provided with TGC's privacy document. <https://static1.squarespace.com/static/599e1560d55b41d78484c59a/t/5d438a99a3ad4300013fda52/1564707488489/Privacy+Policy.pdf>
4. Clients are instructed to ask questions about privacy and confidentiality at TGC and any such questions can be directed to the principal psychologists.
5. Clients must complete a consent for service form to access service at TGC. This is sent to clients for completion via an encrypted service before the intake appointment.
6. Consent to speak with a third party for the purpose of supporting a client's therapy, is to be sought separately to the above. Clients are to complete a consent form indicating who the clinician will be speaking with. Clinicians should discuss the purpose of sharing information along with any consequences and the nature of information to be shared.

### Confidentiality

1. Clinicians are to adhere to the Commonwealth Privacy Act (see link).
2. Clinicians are to adhere to ethical guidelines around privacy and confidentiality as directed by their professional association.
3. Clinicians are to provide information about privacy and confidentiality to all new clients in their first appointment and ensure that clients have a copy of think.grow.connect's privacy document.

### Clearly Explain Limits To Confidentiality Including:

- It is subpoenaed by a court,
- When failure to disclose the information would place you or another person at serious risk to life, health or safety,
- Clients provide approval through an initial consent for service to enable clinicians to:
  - Provide a written report to another professional or agency e.g. GP, school, Planner or Local Coordinator.
  - Discuss the material with another person and under what circumstances.
  - When consulting with the think.grow.connect clinical team for the purposes of clinical supervision.

### File Management

1. All client information is to be treated as Confidential.
2. Information related to client demographics is recorded on secure practice software. This information can be accessed by support staff and health professionals.
3. Client files include a record of all client information and client notes.



4. Client files are only accessed by the health professional responsible for that client or by the principal psychologist as required.
5. Informed consent must be sought to access or share information from these files.
6. Requests for information from client files can only be acted on after receiving written consent from the client or guardian or under Freedom of Information laws.
7. Client information cannot be shared with third party billers unless a client or guardian has signed consent.

## **File Notes**

1. Think.grow.connect to respond to the new referral and collect relevant information for the purpose of contact and appointment scheduling.
2. Think.grow.connect uses practice software, Coreplus. Coreplus meets legal requirements regarding, for example, safekeeping and secure storage, such as by storing it for the required number of years in a manner that avoids inappropriate access to the file. Clinicians working with the client are granted access to a clients file, no other clinician apart from the principal psychologist can access these files.
3. The principal psychologist will not access clinical notes unless discussed with the relevant clinician and/or client, and for clear clinical or ethical purpose.
4. All client information is kept on this practice software. Any written notes are scanned and uploaded before being appropriately destroyed.
5. Support staff have access to client service records which summarises demographics and relevant appointment and invoicing information. Support staff can document any information provided to them by a client within the admin notes section of the client file.

## **Ownership of Files**

1. For employed clinicians think.grow.connect, as the employer, is the owner of the file.

## **Requests To Access Files**

1. External requests for access to the client file can come from a variety of sources and with varying obligations and requirements.
2. For requests that carry a legal compulsion, such as under a subpoena, the psychologist, and/or the owner of the file if this is someone other than the psychologist, need to respond in a manner compliant with the law. All such requests need to be discussed with the principal psychologist before enacting the subpoena.
3. Other requests may also carry a legal obligation to release the file, for example, under information sharing legislation relating to child protection or family violence. Any such requests must be discussed with the principal psychologist and legal advice will be sought if the request is unclear.
4. Legal advice will be sought if the request or clinicians' responsibilities are unclear.
5. Clinicians will inform clients of any requests made and discuss legal obligations and implications for the client.

## **Privacy and Technology**

1. think.grow.connect uses encrypted practice software.
2. Emails sent in regard to a client need to be addressed to an individual that the client has provided written consent, allowing communication about their care.
3. Emails should not include the clients full name, the client can be identified by their first name and last initial or initials. Reports are not to be sent via general email accounts unless clearly requested by a client and only to a client.



4. Emails sent to professionals with the consent of clients and their guardian, should not include the clients complete name. Clients can be identified by their first name and last initial or initials.

## Breaches to Privacy

1. The following is an outline of requirements by the APS:

A new Bill1 introduces a requirement for government agencies and private sector organisations, covered by the *Privacy Act 1988* (Cth) (Privacy Act) to provide notice to the Office of the Australian Information Commissioner (OAIC), and to affected individuals, of an eligible data breach that is *likely to result in serious harm*.

- Continue to take reasonable steps to make sure client's personal information is held securely – including being equipped with a *plan to assess and respond to any data breach* that might occur. This could include mapping out how clients' records are kept, where they are located and who has access to them. This should include an emergency response plan to deal with data breaches and a plan around who and how, to communicate a data breach.
- Make sure IT systems and software are being continually monitored, are up to date and have adequate protection in place.
- Check that you have appropriate indemnity insurance cover in case of a data breach incident.

Examples of a data breach are when a device containing personal information of clients is lost or stolen, an entity's database containing personal information is hacked or an entity mistakenly provides personal information to the wrong person.

Breaches to client privacy are reported to the practice manager who then reports to the principal psychologist to implement a plan of action.

Breaches that are considered potentially harmful to the client will be:

- a communication plan and course of action will be discussed
  - a discussion with the APS professional practice division, will be undertaken to ensure the communication plan and course of action is appropriate.
  - the communication plan and course of action will be implemented
2. TGC will inform the Office of the Australian Information Commissioner (OAIC), and to affected individuals, of an eligible data breach that is *likely to result in serious harm* as outlined by the APS.
  3. A record of all of the action will be kept by all involved. This will be kept in an individual client's file, if appropriate or a separate file, appropriately identified, if this is more appropriate.

## Third Party Payees

1. When services have been sought and/or paid for by a third party the above guidelines remain relevant.
2. Information about the services provided to the client and their personal details will only be released with informed consent as described above.



## Information Sharing

### Child Protection:

1. Reporting of protective concerns of young people under the age of 18 is mandatory. (Mandatory Reporting: <http://www.cpmanual.vic.gov.au/advice-and-protocols/advice/intake/mandatory-reporting>).
2. Guidelines around information disclosure for ongoing child protection cases where a health professional is involved is outlined in the link below.

### Children With Separated Parents:

1. At times there are legal aspects relating to work with children with separated parents. Any court orders need to be viewed and followed by staff.
2. Guidelines outlined by the APS need to be considered when working with children with separated families. (Legal aspects of working with children of separated parents (APS).

### Information Sharing With Referrers Or Other Parties Relevant To The Clients Therapy:

1. Information shared with any other party needs to be clinically indicated and for the purpose of the client's therapy.
2. Clinicians must seek written permission to share information with any other parties using the think.grow.connect consent form - <https://thinkgrowconnect.snapforms.com.au/form/consent-to-transfer-information-externally->
3. Clinicians should discuss the purpose of sharing information along with any consequences and the nature of information to be shared.
4. Any reports are to be provided to the client or care giver to distribute to relevant professionals. If requested due to time constraints, consent can be obtained to directly transfer to a professional.