

St Marys Aged Care

TITLE:	Information Privacy Policy	POLICY NO.	CLIN-Privacy-Policy
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VERSION:	2026/01
EFFECTIVE DATE:	November 2026
REVIEW DATE:	November 2027
DISTRIBUTION:	All Staff
POLICY CONTEXT:	Quality Standard Outcomes/Actions: 1.1, 1.2 2.2, 2.7 3.1, 3.2 5.1 7.1
RELATED POLICIES:	CLIN-Persn Centd Care-Policy: <i>Person Centred Care Policy</i> CLIN-Persn Centd Care-Cult Safe-Policy: <i>Culturally Safe, Trauma Aware and Healing Informed Care Policy</i> CLIN-Persn Centd Care-Decision Making-Policy: <i>Supported Decision-Making Policy</i> CLIN-Persn Centd Care-Rights-Policy: <i>Statement of Rights Policy</i>
RELATED PROCEDURES:	CLIN-Persn Centd Care-Communication-Procedure-03: <i>Communicating Effectively with Residents</i> CLIN-Privacy-Confidentiality-Procedure-01: <i>Confidentiality</i>
APPROVED BY:	Governing Body DOC

PURPOSE

Information must not be disclosed to family members, visitors or other individuals unless the resident has consented or disclosure is otherwise legally authorised.

Being a family member or emergency contact does not automatically provide authority to access a resident's confidential information.

PRINCIPLES

To ensure that all personal, health and sensitive information relating to residents, representatives, employees and other individuals is collected, used, stored, disclosed and disposed of appropriately, maintaining privacy, dignity, confidentiality and security.

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This policy supports compliance with the Aged Care Act 2024, the strengthened Aged Care Quality Standards, the Privacy Act 1988 (Cth), the Australian Privacy Principles and other relevant legislation.

2. Scope

This policy applies to:

- All employees, management and governing body members.
- Agency staff, contractors, volunteers and students.
- Health professionals and external service providers.
- All personal, health, financial and confidential information held by the organisation.
- Electronic, paper-based and verbal information.

3. Policy Statement

The organisation is committed to protecting the privacy, confidentiality and security of all information entrusted to its care.

All residents have the right to have their personal information treated respectfully, confidentially and in accordance with relevant legislation.

The organisation will:

1. Respect each resident's right to privacy, dignity and confidentiality.
2. Collect only information reasonably necessary for providing safe, appropriate and quality care or meeting lawful obligations.
3. Explain how personal information is collected, used, stored and disclosed.
4. Obtain consent where required by law.
5. Ensure information is accessed only by authorised persons for legitimate purposes.
6. Maintain secure information management systems.
7. Provide residents with access to their personal information in accordance with legislative requirements.
8. Respond promptly to privacy breaches and complaints.
9. Ensure staff receive appropriate privacy and confidentiality education.

4. Procedure

4.1 Collection of Personal Information

The organisation may collect information including:

- Resident identification and contact details.
- Medical history, diagnoses and clinical records.
- Medication and treatment information.
- Care plans, assessments and progress notes.
- Financial and accommodation information.
- Emergency contact and representative details.
- Personal preferences, cultural requirements and individual care needs.

Information will be collected directly from the resident wherever practicable or from an authorised representative or other lawful source when appropriate.

Residents will be informed about the purpose of collection, how their information may be used and disclosed, and how they can access or correct their information.

4.2 Use and Disclosure of Information

Personal information will only be used or disclosed:

- For the primary purpose for which it was collected.
- For related purposes permitted under privacy legislation.
- With the resident's valid consent where required.
- To relevant healthcare professionals involved in the resident's care, where legally permitted.
- To government agencies or regulatory bodies where authorised or required by law.
- Where necessary to address a serious threat to health or safety and permitted by law.

4.3 Confidentiality of Resident Information

All employees and other authorised personnel must:

- Maintain confidentiality during and after their employment or engagement.
- Access resident records only when required to perform authorised duties.
- Avoid discussing resident information in public or communal areas.
- Never disclose resident information through personal social media accounts.
- Avoid photographing or recording residents without appropriate authorisation and consent.
- Ensure documents containing confidential information are not left unattended.
- Use approved communication systems when sharing confidential information.

Any unauthorised access, use or disclosure of resident information must be reported immediately.

4.4 Storage and Security of Information

The organisation will implement appropriate safeguards, including:

- Password-protected electronic systems.
- Individual user accounts and access permissions.
- Secure storage of paper records.
- Appropriate cybersecurity and backup arrangements.
- Secure disposal of confidential documents.
- Regular review of access permissions.
- Protection of portable devices containing confidential information.

Staff must not share passwords or use another employee's system credentials.

4.5 Resident Access to Information

Residents have the right to request access to personal information held about them.

The organisation will:

- Provide a clear process for requesting information.
- Respond within a reasonable timeframe.
- Verify the identity and authority of the person requesting access.
- Provide access unless a lawful exception applies.
- Explain any refusal and available complaint options.
- Correct inaccurate, incomplete, outdated or misleading information where required.

Residents may request assistance from an advocate or authorised representative.

4.6 Consent and Resident Choice

Residents will be supported to make informed decisions about their personal information.

Consent must be voluntary, informed, specific to the relevant purpose and provided by a person with the capacity and authority to make that decision.

Where a resident requires decision-making support, staff must follow applicable supported decision-making requirements and relevant laws.

Consent and any restrictions on information sharing must be documented appropriately.

4.7 Photography, Video and Social Media

Photographs, video recordings or other identifiable images of residents must only be taken, used or published with appropriate consent or other lawful authority.

Separate consent should be obtained for promotional, website or social media use.

Residents may withdraw consent for future use, subject to applicable legal limitations.

Staff must not use personal devices to capture or share resident images unless expressly authorised under organisational procedures.

4.8 Privacy Breaches

A privacy breach may include:

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- Loss of resident records.
- Sending information to the wrong recipient.
- Unauthorised access to clinical records.
- Disclosure of confidential information without lawful authority.
- Lost or stolen electronic devices containing personal information.
- Inappropriate sharing of resident photographs or information.

Where a breach occurs, the organisation will:

1. Immediately contain the breach and protect affected information.
2. Notify the Facility Manager or designated Privacy Officer.
3. Assess the nature, extent and potential consequences of the breach.
4. Take steps to minimise harm to affected individuals.
5. Assess whether notification is required under the Notifiable Data Breaches scheme or other applicable legislation.
6. Notify affected individuals and relevant authorities where legally required.
7. Document the incident and implement corrective actions.

4.9 Information Retention and Disposal

Personal and health information will be retained for the periods required under applicable Commonwealth and state or territory legislation.

Information that is no longer required and is not subject to a legal retention obligation will be securely destroyed or de-identified in accordance with the Australian Privacy Principles.

4.10 Staff Education

All employees will receive privacy and confidentiality education during orientation and at regular intervals.

Training will address:

- Resident privacy rights.
- Confidentiality obligations.
- Appropriate information sharing.
- Electronic information security.
- Recognising and reporting privacy breaches.
- Safe handling and disposal of confidential records.

4.11 Privacy Complaints

Residents, representatives and employees may raise privacy concerns through the organisation's complaints management process.

All complaints will be treated confidentially, investigated fairly and responded to promptly.

Individuals may also raise concerns with the Office of the Australian Information Commissioner (OAIC) or other relevant regulatory authorities.

Residents will not be disadvantaged for raising a privacy concern or complaint.

5. Roles and Responsibilities

Position	Responsibility
Governing Body	Ensure appropriate privacy governance, oversight and compliance.
Facility Manager	Implement the policy, oversee privacy incidents and ensure staff compliance.
Privacy Officer / Delegate	Manage privacy enquiries, access requests, complaints and breach assessments.
Registered Nurses	Protect clinical records and ensure lawful information sharing.
All Staff	Maintain confidentiality, protect records and report suspected breaches.

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Contractors and External Providers Comply with applicable confidentiality and information security requirements.

6. Monitoring and Review

Compliance with this policy will be monitored through:

- Internal audits of resident records and information systems.
- Privacy incident and complaints reporting.
- Staff education and competency reviews.
- Monitoring of access to electronic records.
- Review of identified privacy risks and corrective actions.

This policy will be reviewed at least every two years, or earlier following legislative changes, significant privacy incidents or changes to organisational practices.

7. Additional Privacy Requirements

To meet the Australian Privacy Principles, the organisation's publicly available privacy policy must also explain:

- Whether personal information is likely to be disclosed to overseas recipients, including through cloud-based systems, and relevant countries where practicable.
- How residents can contact the organisation's Privacy Officer and lodge a privacy complaint.
- How the organisation handles requests to access or correct personal information.
- How residents can obtain a copy of the privacy policy free of charge.

8. Relevant Legislation and Standards

- Privacy Act 1988 (Cth).
- Australian Privacy Principles.
- Aged Care Act 2024.
- Aged Care Rules 2025.
- Strengthened Aged Care Quality Standards, including Outcome 1.2 – Dignity, respect and privacy.
- Applicable Queensland privacy, health information and records legislation.

The Aged Care Quality and Safety Commission specifically requires providers to respect personal privacy and maintain systems that support residents' dignity and rights.

End of Document

RELATED DOCUMENTS/EVIDENCE-BASE

Australian Commission on Safety and Quality in Health Care (2024). *Person-centred care*.

<https://www.safetyandquality.gov.au/our-work/partnering-consumers/person-centred-care>

Australian Government. Aged Care Quality and Safety Commission (2024). *Strengthened Quality Standards*.

<https://www.agedcarequality.gov.au/providers/quality-standards/strengthened-quality-standards>

Australian Government. Federal Register of Legislation (2024). *Aged Care Act 2024. Part 3 - Aged care rights and principles. Division 1 – Aged care rights*.

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https://www.legislation.gov.au/C2024A00104/asmade/2024-12-02/text/original/epub/OEBPS/document_1/document_1.html#_Toc184211456
