

Purpose: To ensure that Churchill Private Hospital Trust meets all legal requirements of the Health Act 1956 (section 22f), The Privacy Act 2020, the Health Information Privacy Code (2020) and the Health and Disability Commissioners Code of Consumers Rights.

Policy Statement: The collection, handling use and disclosure/transfer of personal patient information is limited to authorised persons for the purpose of administration, delivering healthcare, training, auditing/evaluation of care and organisation systems or medico-legal purposes. Where a breach of the Privacy Act 2020 occurs Churchill will inform the Privacy Commission if there is deemed to be a 'serious breach'.

Scope: This policy must be followed by all Churchill Private Hospital Trust Board members, employees and contracted staff, including any member of the multi-disciplinary team and student nurses.

Responsibilities: The General Manager is the appointed Privacy Officer and ensures organisational controls are in place to support this policy.

All staff will maintain best practise privacy behaviours, promote privacy at work, actively participate in privacy training, report all privacy breaches and near misses to managers, and identify privacy risks.

Collection of information: Personal information held by Churchill Private Hospital Trust will be managed carefully and respectfully.

- Churchill commits to collecting information for the purpose of administration, delivering healthcare, training, auditing/evaluation of care and organisation systems or medico-legal purposes.
- Churchill commits to making people aware of the collection of information, the organisation's purposes for doing so, and their rights to access and correct that information.
- Churchill collects personal and health information from a variety of sources including information provided by patients/service users, and information supplied by others including treatment providers, employers, staff, and other government agencies.
- This information may be collected via various channels (such as mail, telephone, face to face conversation, email) and in various formats (such as forms, letters, electronic file notes, taped conversations and accessing websites via the internet).
- Each patient will have one centralised record.
- Each clinical record must be identified with a unique identifier, in the Churchill Private Hospital Trust this is an NHI number.

Storage of patient information Clinical records must be stored and transported in such a manner to ensure the privacy and confidentiality of the patients' information is maintained.

Storage when not in use

- All clinical records will be stored in designated areas when not in current use.

- use:**
- In the hospital the designated area is the hospital filing area in behind reception.
 - Entry to the area is limited to authorized staff members.
 - Clinical records prior to 2010 are stored offsite with Crown Record Management in Nelson.
 - Clinical records from 2013 onward may be scanned to the Incisive patient management system. Churchill will keep electronic personal and health information secure by ensuring its date storage is protected from external sources, maintaining regular back up of date to secure storage and applying best practice for information security management.

- Storage/handling when in use:**
- Clinical records must be stored away from public access in the ward and other departments to prevent unauthorised access.
 - Clinical records are not be left unattended in a public area

- Transportation:**
- Clinical records must be transported in an appropriate package to prevent loss of loose papers and labels and to maintain privacy.
 - Clinical records sent out of the Hospital must be transported in an approved method.
 - Records must be tracked in and out of the hospital.

- Tracking:**
- The clinical record is tracked manually or using a computerised tracking system.
 - The person releasing the clinical record is responsible for the tracking of the record.
 - The person to whom the clinical record is tracked to is responsible for the security of the record and for its return to the Clinical Record storage area immediately after use.
 - If the record is handed on to another user then the Tracking system must be completed with the name of the person and service area

- Patient Transfer to other hospital:**
- Original Clinical Records must not be transferred. Instead a photocopy of the clinical record can be produced to accompany any patient being transferred to Wairau Hospital or any other hospital.

Requests from individuals (or their representatives) to access personal information:

Inpatients wishing to see their Clinical Records may do so in consultation with their nurse. Should there be any doubt as to whether a patient may view their own records, the request is to be escalated to the Privacy Officer.

Any patient may request to view their clinical record. If the request is made in writing it shall be forwarded to the Privacy Officer.

Access includes

- Information in clinical records, letters of referral, test results, doctor's notes, nursing notes, x-rays and billing information.
- There is no right to possess the original documentation, may have copies if requested.

Requests for Access:

- Establish identity of requester

- Obtain written request with ID
- If not the patient establish relationship / authority of requester
- Record request.
- If unable to establish reason to release contact the Privacy Officer (the General Manager holds this position).

Dealing with Access requests:

- Can provide access through inspection of the original documents
- Provide a copy of original documents
- Supply a written summary
- Provide information in alternative forms, verbal / video

Request for General Information about a patient:

Churchill may disclose basic information to enquirers about an inpatient including location, condition and progress unless the patient requests otherwise.

Other requests to access personal information:

Churchill will not use or disclose information for a purpose that is inconsistent with the original purpose of collection, unless legislatively able to do so or we have consent.

Disclosure of information may be given:

- To the individual concerned if it does not impact on another's privacy
- To the individuals (legal) representative
- To another person or agency providing health services / ongoing care to the individual
- Where authorized by law.

There are some reasons not to release information, before disclosing information that does not meet the above criteria, discuss with the Privacy Officer

Archiving and destruction of personal information:

- Churchill will maintain records for a period no less than 10 years since the patients last admission.
- Records older than 10 years may be destroyed by an approved document destruction method.
- All hospital patient files from 1 January 2013 will be scanned to electronic storage. Following a check of scanned documentation, all original documentation will be disposed of by an approved document destruction method.

References:

ACHS EQiP 6 Standards and Guidelines Standard 1.6, 2.3 Criteria 1.6.2, 2.3.1
 NZS8134.1.2:2008 Standards and Criteria 1.3.1, 2.9
 Privacy Act 2020 and associated Information Privacy Principles
 Health Information Privacy Code 2020 and associated Health Information Privacy Rules
 Nelson Marlborough Health Privacy Policy 2016
 The Health and Disability Commissioners Act 1994

Associated Documents:

Privacy and Social Media Policy
 Confidential Information Disposal