

## PRACTICE POLICY

### Management of Health Information & Privacy

---

#### 1. Purpose and scope

This policy outlines how the practice manages **personal health information** in accordance with legislative, professional, and accreditation requirements.

The policy applies to:

- All general practitioners
- Practice nurses
- Administrative staff
- Registrars and students
- Contractors and service providers

This policy covers information in all formats, including:

- Electronic medical records
  - Paper records
  - Correspondence
  - Pathology and radiology results
  - Medicare and billing data
  - My Health Record (where applicable)
-

## 2. Legislative and professional framework

This policy is consistent with:

- The **Privacy Act 1988 (Cth)** and the **Australian Privacy Principles (APPs)**
  - Relevant **Western Australian privacy and health records legislation**
  - RACGP guidance on managing health information in general practice
  - AGPAL accreditation standards
- 

## 3. Definitions

**Personal health information** includes any information relating to an individual's physical or mental health, medical history, diagnosis, treatment, or care that identifies or could reasonably identify the individual.

---

## 4. Ownership of medical records

- Medical records are the **legal property of the practice.**
  - Patients do **not** own the physical or electronic record.
  - Patients have a **legal right to access their personal health information**, subject to limited exceptions permitted by law.
- 

## 5. Privacy during consultations

- Consultations are conducted in a manner that ensures **visual and auditory privacy.**
  - Staff will not enter a consultation room without knocking or prior communication with the GP.
  - Registrars, students, or other staff will only be present during consultations with the **explicit consent of the patient.**
  - Patients may withdraw consent at any time.
-

## 6. Informing patients about privacy

- New patients are provided with information explaining:
    - How their health information is collected, used, and disclosed
    - Their rights to access and correct information
    - The practice's approach to privacy and confidentiality
  - Privacy information is available:
    - At reception
    - In waiting areas
    - On request
  - Patients are informed that their records may be accessed for care purposes by:
    - Other GPs in the practice
    - GP locums
    - Practice nurses
    - GP registrars under supervision
  - Consent for the collection and use of **particularly sensitive information** is documented in the clinical record.
- 

## 7. Collection and use of health information

Health information is collected:

- Directly from patients wherever possible
- For the primary purpose of providing safe, effective health care
- For related secondary purposes such as:
  - Follow-up and recall systems
  - Practice accreditation
  - Quality improvement and professional development
  - Legal and billing obligations

Only information necessary for these purposes is collected.

---

## 8. Patient access to health information

- Patients have the right to request access to their personal health information.
  - Access may include:
    - Viewing the record
    - Receiving a copy of the record
    - Receiving a health summary
  - Requests are considered by the treating GP, who will assess:
    - Legal requirements
    - Any risk of serious harm to the patient or another person
  - Access will be provided **within 30 days** of receiving a valid request.
  - Reasonable administrative fees may apply for copying or transferring records.
  - Where access is refused or limited, reasons will be documented and explained to the patient.
- 

## 9. Correction of health information

- Patients may request correction of inaccurate or incomplete information.
  - Administrative details (e.g. address, phone number) will be updated promptly.
  - Clinical entries will **not be deleted or altered**.
  - Where a correction is disputed, the GP will:
    - Annotate the record
    - Document the patient's request
    - Record whether the GP agrees or disagrees with the amendment
- 

## 10. Disclosure of health information

Personal health information is disclosed only:

- With patient consent
- Where required or authorised by law
- Where necessary to prevent a **serious and imminent threat** to life, health, or safety

Disclosures are limited to the **minimum information necessary**.

Examples include:

- Referrals to specialists or hospitals
- Communication with other treating health professionals
- Medicare, private health insurers, and government agencies
- Medical defence organisations or insurers
- Court orders or subpoenas

Patients are entitled to view referral letters and correspondence contained in their record.

---

### **11. Children and young people**

- A minor may consent to the use and disclosure of their health information where the GP assesses that the patient has sufficient maturity and understanding.
  - In such cases, parental access may be limited in accordance with law and clinical judgement.
  - Decisions are documented in the medical record.
- 

### **12. Research, quality improvement and education**

- The practice undertakes quality improvement, professional development, and research activities.
  - Patients are informed of these activities and may **opt out**.
  - Identifiable data is removed wherever possible.
  - Where identifiable data is required:
    - Consent is obtained
    - Confidentiality obligations apply
  - External researchers must have ethics approval and written confidentiality agreements.
-

### 13. Confidentiality agreements

- All staff, contractors, students, and temporary personnel are required to sign confidentiality agreements.
  - Breaches of confidentiality may result in disciplinary action, including termination of employment.
- 

### 14. Transfer of medical records

- Records are transferred only with **written patient consent**.
  - The practice may provide:
    - A health summary
    - A copy of records
    - Relevant extracts
  - Original records are retained by the practice.
  - Secure electronic transfer methods are used wherever possible.
- 

### 15. Security of health information

The practice implements physical, administrative, and technical safeguards, including:

- Password-protected clinical systems
- Role-based access controls
- Screen positioning to prevent unauthorised viewing
- Secure storage of paper records
- Encryption of electronic data where appropriate
- Secure messaging for clinical correspondence
- Daily data backups with secure off-site or encrypted cloud storage
- Regular testing of backup systems

Records are not removed from the practice unless required for patient care and are secured at all times.

---

## 16. X-rays and diagnostic imaging

- X-rays are usually provided to patients for safekeeping.
  - The practice retains reports and results within the clinical record.
  - Interpretation of imaging is the responsibility of the treating doctor.
  - Practice staff do not provide clinical interpretation.
  - Results are discussed during a consultation unless the doctor has documented otherwise.
- 

## 17. Retention of medical records

- Adult records are retained for a minimum of **7 years from the date of last contact**.
- Records for children are retained until the patient reaches **25 years of age**, or 7 years from last contact, whichever is longer.
- Records are not destroyed without authorisation from the treating or authorised GP.

If the practice closes or a GP leaves:

- Patients are informed of arrangements for transfer or storage of records.
  - Untransferred records are stored securely under nominated medical supervision.
- 

## 18. Complaints about privacy

- Privacy complaints are managed in accordance with the practice's complaints policy.
  - Patients may escalate concerns to the **Office of the Australian Information Commissioner (OAIC)** if unresolved.
- 

## 19. Staff training

- All staff receive privacy and confidentiality training during induction.
  - Ongoing training ensures awareness of legislative changes and best practice.
  - Compliance with this policy is monitored as part of quality improvement and accreditation activities.
-

**Approval date:** \_\_\_\_\_

**Review date:** \_\_\_\_\_

**Approved by:** \_\_\_\_\_

## **References**

**Royal Australian College of General Practitioners Standards for General Practices  
(5th edition)**

**Australian General Practice Accreditation Limited accreditation requirements**

**Privacy Act 1988 (Cth) and Australian Privacy Principles (APPs)**

**Relevant Western Australian legislation**