

Policy No: 11.1	PRIVACY POLICY
------------------------	-----------------------

Applies to: All staff and Management Committee
Specific responsibility: Principal Solicitor Coordinator

Version: 3
Date approved: Sept 2019
Next review date: 2021

Policy context: This policy relates to	
Standards or other external requirements	NACLC Accreditation CLSP Service Standards NACLC PII Scheme
Legislation or other requirements	Privacy Act 1988 (Cth) (which includes the Australian Privacy Principles) Associations Incorporation Act 2009 (NSW) Australian Charities and Not for Profits Commission Act 2012 (Cth) The Privacy and Personal Information Protection Act 1998 (PIIP Act) NSW. NNWCLS Constitution
Contractual obligations	Commonwealth Attorney General’s Department Legal Aid NSW CLSP funding agreement

PREAMBLE:

Objectives:

1. To ensure that the right of a client, and/or their advocate, and workers to have access to all personal information held by the service is upheld.
2. To ensure that all clients, potential clients, carers, Management Committee members, staff and volunteers are aware of the rights of all clients to access personal information, and the clients’ rights to have incorrect information corrected.
3. To ensure that no personal information is transmitted to a third party without the written consent of the client or worker concerned.
4. To ensure the physical confidentiality of client records via the establishment of a secure storage system.

Guidelines:

The Clients and Workers have the right to have all personal information, provided to the North & North West Community Legal Service in good faith, treated in a professional and sensitive manner.

The North & North West Community Legal Service shall deal with the collection, security, quality, use and disclosure of personal information in accordance with the *Privacy Act 1988* (Cth)

With the formulation of this policy statement, the North & North West Community Legal Service formally recognises the fundamental principles of rights and responsibilities pertaining to privacy and confidentiality of client and worker information and is committed to establishing these rights in practice.

These being:

The right of the client and worker to expect that all personal information, given to the Service:

- be treated confidentially and not disclosed to a third party without the express consent of the client or worker;
- be sensitively handled with attention to privacy and human dignity;
- be securely stored; and

The responsibility of the Service to respond appropriately to ensure that such mechanisms are in place that would guarantee privacy and confidentiality of client and worker information.

POLICY STATEMENT

Only relevant client and worker information that is vital to appropriate service outcomes is to be collected. Collected information will:

- be stored in a secure and confidential manner;
- not be used for purposes other than those for which it was collected;
- not be provided to a third party without the express consent of the client or worker, unless required by law;
- be disposed of, as appropriate, in a confidential manner.

PROCEDURES

- 1. Effective Structures:** That aim to ensure that a client's or worker's right to privacy and secure storage of personal information, is upheld. That client, carer and/or advocate, and worker are consulted before any personal information is transmitted to a third party.
- 2. Information:** Processes that include a Client Service Agreement that outlines rights within the service, including:
 - the right to privacy;
 - the clients right of access to their file and the right to remove or correct incorrect information held; and

- information regarding the safe storage of information
- the right to consent to what personal information is provided to a third party.

3. Training: For all management, staff and volunteers that includes the rights of clients to privacy, and the confidentiality of client records.

STANDARD PROCEDURE: The Service will ensure that:

- a. all workers are fully aware of the need to keep all client information confidential,
- b. a closed file is created, either under lock and key in a filing cabinet, or in a 'limited access' file on computer,
- c. a client's file or worker's file must be made available to the client or worker on request,
- d. a client or a worker has the right to have information held, that is incorrect, rectified/amended,
- e. only staff members have access to complete client files,
- f. the Principal Solicitor or Coordinator is responsible for ascertaining the amount of information necessary to enable a co-worker, or other parties to effectively carry out delivery of the service,
- g. clients, at initial interview, are informed about why particular information is gathered, what it is to be used for, how and where it will be secured and how to gain access to their own file,
- h. the service will gain written consent and agreement from the client on which information may be provided to other agencies
- i. in cases where abuse is suspected, or been identified, clients and/or carers will be supported/assisted to make their complaints via the appropriate channels,
- j. service workers develop their cross-cultural skills regarding areas of life that specific cultural groups regard as extremely private or sensitive so that the service is delivered in a manner that is culturally appropriate,
- k. that at an appropriate point in time, sensitive documents can be returned to the client or worker. If there is agreement by all parties, sensitive documents may be shredded or otherwise destroyed,

- l. each client is to be provided with a copy of the Service Privacy Policy at the time of being provided with a Client Service Agreement.

- m. copies of the Service Privacy Policy is to be displayed in the office, available upon request and included on our website.

DOCUMENTATION

Documents related to this policy	
Related policies	5. Advice Policies 6. Casework Policies 9. Accessibility Policies 10. Organisational Management Policies 11. Management of Information and Data Policies 12. Assessing Client Satisfaction and Managing Complaints Policies
Forms, record keeping or other organisational documents	

Reviewing and approving this policy		
Frequency	Person responsible	Approval
Every 2 years	Coordinator	Management Committee

Policy review and version tracking			
Review	Date Approved	Approved by	Next Review Due
1			
2	17/06/2014	Board	2016
3	09/09/2019	Management Committee	2021

INDEXING

Search topic/s:	
Function/s:	