

Request for Access to Health Information and Records PHC Remote Guideline

Target Audience	All Clinical Employees
Jurisdiction	Primary Health Care Remote CAHS; Primary Health Care Remote TEHS
Jurisdiction Exclusions	N/A
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Approval Authority	Chair Clinical Governance Committee PHC CAHS; Primary Health Care Strategic Management Committee TEHS
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Purpose

To provide Primary Health Care remote staff with guidelines for managing the disclosure of relevant information to other health care providers, persons or agencies requesting health information and records in remote health centres

Guideline

1. General Information

The Northern Territory of Australia owns the records and systems used by the Department of Health for storage and use of personally identifiable health information. The purpose of this document is to ensure all reasonable measures are taken to protect the privacy of client information, whilst managing the safety and wellbeing of clients and the disclosure of relevant information to other health care providers, persons or agencies requesting health information and records.

Privacy is a fundamental principle that underpins best practice in health care. The primary purpose of collecting personal health information is to provide individual clients with appropriate care and treatment for the condition for which the person attends the service provider.

All information from which a client may reasonably be identified must be collected, accessed and disclosed in accordance with the:

- Northern Territory Public Sector [Code of Conduct](#),
- [Information Act](#) (specifically Schedule 2 Information Privacy Principles), and
- [Department of Health \(DoH\) Privacy Policy](#) and any other relevant regulations and legislation, and
- other relevant legislation, for example [information sharing](#) or [mandatory reporting](#) requirements under the [Care and Protection of Children Act](#).

Primary Health Care (PHC) - Remote provides a framework for responding to requests for health information and records consistent with relevant legislation and Departmental policy requirements.

In responding to requests for health information and records, PHC staff should follow the guidelines provided in this document and information provided in the [Requests for Health Records Flowchart](#). Staff

should be aware that there may be a fee attached to the provision of health information and records. See the [NT Hospitals Fees and Charges Manual](#) (page 32).

Note: The [Information Act](#) establishes a Freedom of Information (FOI) scheme for formally accessing government information or your personal information held by public sector organisations. See the [Freedom of Information and Privacy](#) website for further details. Application for information under FOI may be made on [Freedom of Information - Application to access information](#).

2. Responsibilities

2.1 Primary Health Care Staff

(In this instance includes: volunteers and students working for or studying with the Department, all contractors providing services to and on behalf of the Department and Private Health Care or Welfare Agencies or Providers, researchers or others who have authorised access to information in the custody of the Department.)

- Are bound to abide by Departmental Information Privacy responsibilities under the [Information Act](#)
- Ensure requests for health information and records are managed per the guidelines provided in this document and the [Requests for Health Records Flowchart](#)

2.2 Primary Health Care Manager (PHCM)

- Ensure that staff are familiar with Departmental Information Privacy responsibilities and are provided access to appropriate training
- Ensure requests for health information and records are managed per the guidelines provided in this document and the [Requests for Health Records Flowchart](#)
- Provide hard copy health records held in remote health centres as requested by PHC Clinical Governance:
 - ~ Where partial hard copy health records are requested, photocopy the relevant section of the health record and fax / e-mail to the secure e-mail account:
RequestsPHCMedRecords.DoH@nt.gov.au
 - ~ Where a 'whole of life' health record is required, in consultation with PHC Clinical Governance, the health records may be sent to the regional management office to be photocopied by staff in PHC Clinical Governance / other regional PHC Management. The health record will be returned to the health centre / secondary storage facility on completion of photocopying.
- Liaise with the District Manager / PHC Clinical Governance to assist individuals requesting health information and records on the correct process for accessing health records.

2.3 District Manager / Line Manager

As for PHCM, plus:

- Support health centre staff to undertake their responsibilities in providing relevant hard copy health records and information as requested by PHC Clinical Governance

2.4 Medical Practitioner

- Complete requests for medical reports in a timely manner
- Record completion of the medical report in the EHR using the service / clinical item
- Ensure when clients present with Medical Report forms to be completed at the health centre, these are imported into the EHR, e.g. Centrelink / housing applications

2.5 PHC Clinical Governance / Actioning Officer as delegated

- Monitor the secure e-mail / fax account for requests for medical information and records
- Consider requests for release of health records and information

- Arrange for the production of appropriately requested health information and records, including from hard copy health records held in secondary storage or health centres as appropriate
- Arrange for clinical review by a registered health practitioner of prepared information / reports
- Approve release of the prepared information / reports to the relevant person / agency
- Send prepared information / reports, approved by PHC Clinical Governance to the appropriate agency
- Record the request in the relevant service item / clinical item in the client's EHR
- Maintain an electronic file for all requests for health records
- Ensure a copy of all requested health records and information is maintained in a Corporate Folder (ie TRIM Folder)
- Ensure invoices, per the approved [Schedule of Fees](#), are sent to the relevant person / agency

3. Procedure

3.1 Requests for Health Information and Records Flowchart

PHC Clinical Governance is the designated central point of contact for approval and coordination of supplying requested health information and records. When requests are received by any staff in PHC - Remote, the request should be forwarded to PHC Clinical Governance in the first instance. This allows all requests to be logged and information generated according to consistent protocols under the direction of PHC Clinical Governance.

See [Requests for Health Records Flowchart](#) for an overview of the system for managing requests in PHC - Remote.

3.1.1 Health Information Requests with Warrant

The process to be used when the Police issue a Warrant to request health information from client health records is described in the Information Sheet - [Health Information Requests with Warrant](#) (intranet). This process will ensure that the PHC - Remote adheres to the relevant Legislation, that the Police are bound by, related to the provision of health information.

3.1.2 Requests for Health Information from Territory Families

A dual pathway process has been agreed to deal with urgent and straight forward requests from the Department of Territory Families, and secondly to track information exchanges for written and detailed requests. The intent is to facilitate provision of timely information which will contribute to the management of children at risk.

See Information Sheet - [Requests for Health Information from Territory Families](#) (intranet) which details the process to be used when a DCF request for health information is received under **section 32 of the [Care and Protection of Children Act](#)**.

3.1.3 Medical Reports

PHC often receives requests for Medical Practitioners to prepare reports regarding a client in their care from external agencies. When this request is received by the PHC Clinical Governance Action Officer, they will send a copy of the request to the relevant e-mail account (RMPAdminCARH.THS@nt.gov.au or RMPAdmin.TERHMedical@nt.gov.au) to be forwarded to the relevant Medical Practitioner by the Director or Medical Services / delegate. The Medical Practitioner is expected to complete the report in a timely manner and return it to the Actioning Officer for forwarding to the requesting agency.

The Medical Practitioner should complete the 'Completion of Medical Report' service / clinical item and import the report into the EHR.

Note: When individual clients present at a health centre with forms requesting a medical report regarding their health status, e.g. Centrelink or Housing applications, on completion of the report the Medical Practitioner should complete the service / clinical item and import the form as above.

3.2 Schedule of Fees for Requests for Health Information and Records

Depending on reason for the request for health information and records, provision of the information by PHC - Remote may be subject to a fee payable on receipt of the information. Details regarding the fee schedule may be found in the [NT Hospitals Fees and Charges Manual](#) (page 32).

3.3 Consent

3.3.1 General Principles

Consent of the client is one of the cornerstones of information privacy. There is a need for clients to be well informed about how their personal health information will be used. This must include an understanding of:

- why the information is collected
- who will have access to the information
- how the information will be used
- any proposed disclosure of the information to third parties
- if relevant, that the information will be stored on a computer.

Some intended uses of the information will be self-evident, such as where it is collected by a health care provider solely for the purpose of providing service to the client. Staff cannot assume that consent exists for all possible uses or disclosure of personal health information so consent must be sought for any use of client information which is not provided for by legislation.

If consent is not given, or if limitations apply, this should be noted on the client's health record and complied with when any application access is made (except as provided by law or in the [Code of Conduct](#)). This decision must be recorded in the EHR, (record as an **NB** in PCIS and an **Alert** in EACS).

As a rule no personally identifiable health information should be released without the consent of the client or their legal guardian, unless:

- some lawful authority exists to authorise its release (eg law or regulation), or
- a serious threat to the health or life of a third party exists. In such circumstances advice should be sought from Legal Services Branch.

3.3.2 Minors and those Subject to a Guardianship or Custody Order

Where a client is under 18 years or otherwise subject to guardianship or custodianship, any consent for access to information would normally be given by the client's parent, legal guardian or legal custodian as the case may be.

In some cases it is considered that minors can legally make decisions with respect to medical treatment. This concept is known as the Gillick Principle. This principle also applies to the release of health information. In this instance Legal Services Branch should be consulted.

3.3.3 Deceased Clients

The only personal information about a deceased client it is permissible to disclose without the consent of the next of kin or executor is the fact that they have died and the date of their death. If there is any concern about the sensitivity of this information, for example if the next of kin have not yet been notified, the enquiry should be referred to the senior health care provider. See [Deaths in Community PHC Remote Guideline](#).

In the case of a deceased client health record, written consent for release of information is to be sought from the next of kin as shown in the records or by the executor or administrator of the estate.

It should be noted that under the [Coroners Act](#) 'senior next of kin', in relation to a deceased Aboriginal person is 'a person who, according to the customs and tradition of the community or group to which the person belongs, is an appropriate person'. If 'senior next of kin' for a deceased Aboriginal person may be

reliably determined, that person may give consent for disclosure of information about the deceased person.

The Coroner or persons assisting the Coroner may access any material relevant to the enquiry by virtue of Section 19 Notice of the Coroner's Act. A copy of the notice authorising such release must be placed on the relevant medical record. See [Deaths in Community PHC Remote Guideline](#).

3.3.4 Access by Client

A health care provider must always supervise access by the client or an authorised third party to client health records.

The Department generally supports the right of a client to see and obtain copies of information held about them in their health records subject to limited [exceptions](#) as described below.

Clients should be informed, as a matter of routine, about their rights to access their own records. This may be done in any way appropriate to the health facility, for example notice in waiting rooms, leaflets.

Responding to Applications by Client for Access

Individuals have a right to seek access to their personal information and make corrections. Access and correction is mostly handled under the provisions of the [Information Act](#).

If an individual requests access to personal information about themselves it must be provided to the individual except to the extent that:

- providing access would unreasonably interfere with the privacy of another individual
- providing access would pose a serious threat to the life or health of the individual or another individual
- providing access would prejudice measures for the protection of the health or safety of the public
- the request for access is frivolous or vexatious
- the information relates to existing or anticipated legal proceeding between the Department and the individual, and the information would not be accessible by the process of discovery or subpoena in those proceedings
- providing access would reveal the intentions of the Department in relation to negotiations with the individual in such a way that would prejudice the negotiations

In cases of doubt staff should contact [Freedom of Information and Privacy](#) within the [Legal Services Branch](#) for assistance.

3.4 Other Requests for Information

3.4.1 Department of Education (DoE) Families as First Teachers (FaFT)

FaFT is an early learning and family support program for Remote Aboriginal families. It is provided by the DoE in schools in remote towns or as a mobile service. Children attending the FaFT Program may have a developmental screen using the *Ages and Stages Questionnaire – Talking About Raising Aboriginal Kids (ASQ-TRAK)* developmental assessment screening tool.

The [Families as First Teachers \(FaFT\) PHC Remote Referral Flowchart](#) and [Families as First Teachers \(FaFT\) PHC Remote Referral Pathway](#) provide guidance to PHC staff when responding to a FaFT referral of ASQ-TRAK screening information

3.5 Other Requests for Information

3.5.1 Research

The Department requires that proposals for research projects for which access to personal information is required must meet the requirements stipulated in Commonwealth and NT Legislation, National Health

and Medical Research Council (NHMRC) guidelines and codes, and PHC - Remote priorities, both operational and ethical approval is required. For details see [Research Proposals](#).

Where a researcher approaches a health centre for access to health information and records, staff must refer the researcher to the PHC Quality & Safety Manager.

Where access is granted, health records are not to be removed from the health care facility.

3.5.2 Information Sought By an Adoptee

All applications and requests by, or on behalf of, an adoptee for access to birth-related information must be referred to Department of Territory Families - [Adoptions Unit](#).

3.5.3 Media Requests

Request for information made by the media should be referred to the Media Liaison Officer.

3.5.4 Political Requests

Requests involving personally identifiable health information from a Member of the Legislative Assembly are to be referred to the Ministerial Liaison Officer.

3.5.5 Enquires About Clients in a Health Care Facility

General Enquiries

Except in the case of clients with mental health problems or where the client has requested otherwise, it is accepted practice in Australia for information regarding the location and general condition of the client to be given by the inquiry / switchboard section to relatives or visitors. Information regarding diagnosis, treatment or prognosis **must not** be given without specific consent. In principle, if the client so directs, no information may be released, including the fact that the person is a client.

Release of Information by Telephone to Next of Kin / Significant Others

In the case of telephone enquires from next of kin / significant others, the client must give consent for the release of information about diagnosis, treatment or prognosis. The client may nominate whom they wish to have access to information, which is more comprehensive than that available to general inquirers. Such consent will usually be deemed to have been given for the person nominated as next of kin.

3.5.6 Information Relating to those with Mental Health Problems

Clients with mental health problems are entitled to additional privacy rights to any other client of the Department. Consult with Legal Services Branch for advice and assistance.

3.5.7 Clinical Photography / Video Recording

Clinical photography / video recording is a valuable adjunct to the clinical management of clients. It may be used for a variety of reasons, from recording or assessing progressive conditions to recording forensic evidence to providing valuable teaching aids for rarely seen conditions. As with most methods of communication, there are potential privacy issues. In this instance, there are also cultural issues for Aboriginal people in relation to sensitivities about images of deceased persons.

Photographs or video recording of a client must only take place:

- if the client, or parent or guardian in the case of a minor, gives consent; and
- if, in the opinion of the treating health care provider, the client's condition will not be jeopardised;
or
- there is a legal requirement to record forensic evidence (eg child abuse).

In the case of a child who is the subject of a child protection investigation a person who is authorised under the [Care and Protection of Children Act](#) may consent to the photographing of the child.

Document Quality Assurance

	Method	Responsibility
Implementation	Document will be accessible via the Policy Guidelines Centre and Remote Health Atlas	Health Policy Guidelines Program
Review	Document is to be reviewed within three years, or as changes in practice occur	Atlas Development Officer, Primary Health Care CAHS
Evaluation	Evaluation will be ongoing and informal, based on feedback.	Atlas Development Officer, Primary Health Care CAHS

Key Associated Documents

Forms	<p>Freedom of Information – Applications (including Application to access to information and Applications to correct information)</p> <p>Sharing of Health Information to the Families as First Teachers (FaFT) Program Consent Form</p>
Key Legislation, By-Laws, Standards, Delegations, Aligned & Supporting Documents	<p>Deaths in Community PHC Remote Guideline</p> <p>Information Sharing Relating to the Safety & Wellbeing of a Child or Young Person PHC Remote Guideline</p> <p>Mandatory Reporting Children PHC Remote CAHS Guideline</p> <p>Mandatory Reporting - Overview PHC Remote Guideline</p> <p>Research Proposals PHC Remote Guideline</p> <p>Requests for Health Records PHC Remote Flowchart</p> <p>Information Sheets:</p> <p>Health Information Requests with Warrant (intranet)</p> <p>Requests for Health Information from Territory Families (intranet)</p> <p>Families as First Teachers (FaFT) PHC Remote Referral Flowchart</p> <p>Families as First Teachers (FaFT) PHC Remote Referral Pathway</p> <p>Department of Education Families as First Teachers</p> <p>Child Abuse and Neglect and Domestic and Family Violence Mandatory Reporting TEHS Procedure</p> <p>Legal Service Branch (intranet)</p> <p>DoH Freedom of Information and Privacy</p> <p>DoH Privacy Policy</p> <p>Information Services – Corporate Information Services (intranet)</p> <p>Territory Families</p> <p>Sharing Information to Protect Children</p> <p>DoH Adoption</p> <p>NT Hospitals Fees and Charges Manual</p> <p>NT Public Sector Code of Conduct, Employment Instruction No 12</p> <p>Northern Territory Legislation:</p> <p>Care and Protection of Children Act</p> <p>Coroners Act</p> <p>Criminal Code Act</p>

	Information Act (see Schedule 2 Information Privacy Principles) Mental Health and Related Services Act
References	As above

Evidence Table

Reference	Method	Evidence level (I-V)	Summary of recommendation from this reference
N/A	N/A	N/A	N/A