



Our Privacy Policy

New England Speech Pathology respects your right to privacy. Our practice endeavours to protect you and your child through strict confidentiality. As such, we have this privacy policy in place to demonstrate our firm commitment to privacy.

New England Speech Pathology is committed to ensuring:

- personal information is managed in an open and transparent way;
- compliance with the Australian Privacy Principles and any relevant codes; and
- management of enquiries and/or complaints regarding compliance with the Australian Privacy Principles.

New England Speech Pathology needs to collect information about you for the primary purpose of providing a quality service to you. In order to thoroughly assess, diagnose and provide therapy, we need to collect some personal information from you. If you do not provide this information; we may be unable to treat you.

1. New England Speech Pathology will only collect your health information for the purpose of providing Speech Pathology services.
2. New England Speech Pathology will collect information that is relevant, accurate, current and not excessive.
3. New England Speech Pathology will only collect information from you, provided by you, or provided to us by other agencies with your consent.

Our practice respects your rights and privacy. We endeavour to keep information regarding you or your child with the *utmost confidentiality*. We realise that it is important that you understand the purpose for which we collect details about your health, as well as how this information is used at our practice and to whom this information might be disclosed.

At New England Speech Pathology we collect information for the purpose of providing assessment and treatment for you or your child. Personal information, such as your name, address, Medicare and health insurance details, will be used for the purpose of addressing accounts to you, as well as processing payments and writing to you about our services, and any issues affecting you or your child's treatment.

We may disclose your or your child's information to other health care or educational professionals, or require it from them if it is necessary in the context of your or your child's assessment and treatment. To ensure the process of quality treatment provision, information about your assessment results and progress may be given to relevant other service providers, who are involved in your management. These may include your doctor, teachers, specialists, insurers, solicitors, employers or others, but only where it is considered to be of benefit to your progress. In that event, disclosure of your personal details will be minimised wherever possible.

On rare occasions we may also use parts of your health information for research purposes, in study groups, case discussions or seminars, as this may provide benefit to other patients. Should that happen, your personal identity will not be disclosed without your consent to do so. If you would prefer that your health information is not used for these purposes, please notify New England Speech Pathology.

Your medical history, treatment records and other material relevant to your treatment will be kept in secure storage, either in physical or electronic form. Storage will initially occur in the clinic offices, then archived securely elsewhere in order to protect your information from unauthorised access, improper use, alteration and unlawful or accidental destruction. You may inspect or request copies of our records regarding your or your child's treatment at any time, or seek an explanation from your speech pathologist. A small fee may apply in relation to the types of access you seek. If you request an explanation of our records or a written summary, fees will apply to these services.

Records related to a child must be held until that child reaches the age of 18 plus 7 years. Records related to an adult must be held for 7 years after the last contact with New England Speech Pathology.

Disclosure will not be made to any person who is not involved in either your or your child's treatment or the administration of this practice, without your prior consent. If you have any queries or concerns about our handling of your health information, please do not hesitate to raise these concerns with our practice.

Complaints

If you believe that we have handled your health information in breach of the Health Privacy Principles or the special private sector provisions of the Health Records and Information Privacy Act (NSW), you can make a complaint to the NSW Privacy Commissioner.

CONSENT

I, _____, have read the above information and understand the reasons for collecting the information and the ways in which the information may be used.

I understand that it is my choice as to what information I provide and that withholding or falsifying information might act against the best interests of my assessment and therapy progress.

I am aware that I can access my personal and treatment information on request and if necessary, correct information that I believe to be inaccurate.

I understand that if, in exceptional circumstances, access is denied for legitimate purposes, that the reasons for this and possible remedies will be made available to me.

I understand that New England Speech Pathology must obtain additional consent if the information collected is to be used in any ways other than that outlined above.

Signed.....Date.....