PRIVACY AND CONFIDENTIALITY

Policy Approved:	Sign:	Date: 27/6/25

POLICY:

Greystanes Disability Services ("Greystanes") is committed to ensuring every individual associated with Greystanes have their rights to privacy and confidentiality respected and adhered to. This policy is to be read in conjunction with the Cyber Policy and IT Policy.

Greystanes operates in compliance with all relevant privacy and confidentiality legislation and will apply best practice in the collection and maintenance of private information gathered as part of providing services to people and as an employer.

A secure, accurate and well-managed system is crucial in safeguarding the collection and retaining of private information.

Greystanes recognise that information will, at times, need to be shared and this will be done only on the basis of fulfilling our professional duty of care and/or legal requirement.

Greystanes acknowledges that every person, guardian, family or staff member has a right to access personal information held about themselves.

SCOPE:

This policy relates to everyone Greystanes supports, families, guardians, Board member, employees, contractors, volunteers and all other stakeholders.

PROCEDURES:

1. INFORMATION/FILES

1.1 Any information Greystanes collects, by lawful and fair means, on the people we support, their families and other stakeholders will occur only in order for Greystanes to operate efficiently. The information gathered will be confidential and consent will be documented.

1.2 Where a person is deemed not capable of giving their own informed consent, a substitute decision maker is required to give substitute consent.

1.3 Greystanes will work with all stakeholders to ensure that the information held is current, accurate and complete.

1.4 Information collected by Greystanes will only be used for the sole purpose the information was collected in the first instance or in order to perform their role or duties. In the event information is required for the purpose such as research or statistics this will only occur after consent is received prior to any such use.

1.5 Information is held in paper and/or digital files. Digital files are password protected, and paper files are securely protected to prevent misuse loss or unauthorised access.

1.6 Greystanes' computer network has inbuilt Firewall, virus protection and password security to protect the confidentiality of digital information.

1.7 Any person may access their own files upon request to the relevant Manager.

1.8 A person's advocate can only have access to information as it relates to the advocate's role with that person.

1.9 Greystanes can only transfer information to a person/agency in a different country if that transfer is consented to, is of benefit to the person, and Greystanes has a reassurance the other country has privacy principles similar to Australia.

1.10 If a person, guardian, and/or person responsible believes information held by Greystanes is incorrect, Greystanes will review and correct if necessary.

1.11 For all correspondence, hard copy, digital and reporting in CareMaster, when referring to a staff member or a person we support, staff will use the initials of that person to protect their privacy.

1.12 Everyone is responsible for upholding and implementing the principles of privacy as outlined by the Australian Privacy Principles. This includes Greystanes contractors and consultants for HR and Accounting etc.

1.13 AI and Workplace Privacy: Staff must ensure that AI tools used in the workplace comply with privacy laws and respect all stakeholders, employee and participants rights. AI should not be used to imitate or monitor others in a way that breaches privacy regulations.

2. PEOPLE WE SUPPORT

2.1 Information is kept at each location secured in the Daily Files in each house and in digital format in CareMaster.

2.2 The Daily Files are overseen by the Home and Living Manager, Team Leaders and other Managers who are responsible for the maintenance of accurate and current information.

2.3 Information concerning a person Greystanes supports will only be shared where the information is relevant to the employee for the performance of their role and/or duties or;

- In the course of third-party quality, advocacy or financial audits of Greystanes
- With the consent of the person concerned or the Person Responsible
- To prevent a serious threat to a person's health or life
- As required by law
- Where reasonably necessary for the enforcement of criminal or revenue law

2.4 A person's guardian or person responsible can have access to any information regarding that person except where access is unlawful, frivolous, or vexatious, or where access may pose a potential or actual threat to life, health, safety and well-being.

2.5 Where records are required for appointments or meetings, all Greystanes employees are expected to exercise due diligence when transporting such records.

2.6 Greystanes' Business Operations is required to keep and maintain financial information of the people we support. These financial files are securely kept and are only accessed by employees where the information is relevant to their role and duties. The Business Operations Manager is responsible for the management of financial files.

2.7 Personal belongings which are kept in community homes are listed by Greystanes staff and every endeavour is made to keep them safe and secure.

2.8 Each person has a private bedroom which is regarded as a personal area for solitude and privacy when needed.

3. PHOTOS

3.1 Greystanes seeks consent from people and/or their families to take and use photos of the person for publicity reasons.

3.2 People and their families are given a range of choices of how or how not to use photos, including the right to not have photos or name used at any time for any purpose.

3.3 Staff may take photos of people we support on Greystanes cameras and download to Greystanes computers. The photos will then be deleted from the cameras.

3.4 Staff should always protect the privacy of the people we support and are prohibited from taking photos of them on their own cameras or on smart phones or tablets.

3.5 There may be exceptions when staff may use their judgment regarding using their own phone/tablet or camera to take photos for health, WH&S and/or legal reasons. After forwarding the photo(s) to their manager, staff are responsible for immediately deleting the photo(s) from all of their devices, including any downloads on computers, digital devices, and external servers, (Cloud etc)

3.6 All photos used for publicity purposes are checked by the manager who ensures that appropriate publicity consent has been gathered before the photo is published.

3.7 Everyone is responsible for upholding and implementing the principles of privacy as outlined by the Australian Privacy Principles.

4. STAFF

4.1 Personal information of employees is confidential and will only be used for employment purposes. Personal information may be used be used for purposes other than for which it was collected:

- In the course of third-party quality, advocacy or financial audits of Greystanes
- With the consent of the person concerned
- To prevent a serious threat to a person's health or life
- As required by law
- Where reasonably necessary for the enforcement of criminal or revenue law

4.2 All employee hardcopy files are kept in a secure room. Digital information is maintained in a secure system and is password protected.

4.3 Greystanes' is required to keep specific financial information of employees. This information is kept secure digitally and within a locked cabinet and is only accessed by employees where the information is relevant to their role and duties.

4.4 At commencement of employment, employees receive training in Greystanes' Code of Conduct and the principles of privacy and confidentiality with regard to people we support and fellow employees.

5. FILE AUDITS

5.1 The Executive Assistant is responsible for ensuring that client files are audited annually and that the information is accurate, current and complies with the requirements of legislation, standards and relevant agencies.

5.2 The NSW Ombudsman representatives (Community Visitors) can visit at any time to conduct audits of individual's files relating to the operation of the service.

5.3 The NSW Children's Guardian can conduct audits on files only relating to children and young people whose parental responsibility lies with the Minister of Families and Communities.

5.4 HR will conduct regular internal audits of employee files to ensure the information that is held is current and accurate.

5.5 To ensure sound governance, Greystanes is subject to external audits of its quality management system and financial procedures and record keeping as well as internal and external audits of various procedures and record keeping.

6. PRIVACY AND CONFIDENTIALITY: MEETINGS, TELEPHONE CONVERSATIONS AND MAIL

6.1 Everyone associated with Greystanes has the responsibility to ensure any discussions concerning any person, irrespective of the forum they take place in, are conducted with the principles of privacy and confidentiality in mind. This includes the discussion of information among staff at different locations.

6.2 All employees are responsible for ensuring all meetings where information may be discussed, with or without family/guardians attending, must be conducted in a private setting.

6.3 All staff have a professional responsibility to ensure there is no breach of confidentiality at any time unless a person's immediate well-being and safety is at risk.

6.4 When confidential information is requested over the phone and the person is unknown to the staff member, the staff member is required to pass the enquiry to their manager.

6.5 Staff in community homes are required to answer the phone stating the house name only, and their name, e.g. "Sinclair House, Peter speaking". It is then the responsibility of the caller to identify themselves. Where a caller will not identify themselves, staff will end the call and report this to the Team Leader.

6.6 Mail addressed to a person should be opened by that person, where this is not possible, mail should be opened by the relevant manager.

6.7 All due care is taken to ensure the addressee details are current and correct in the transfer of information by post.

7. COMPLAINTS ABOUT THE USE, OR ALLEGED MISUSE, OF INFORMATION

7.1 All stakeholders have the right to make a complaint if it is believed an alleged misuse of private and/or confidential information has occurred. Greystanes will assist the complainant and advise on the procedure, in accordance with Greystanes' Complaints and Compliments Policy.

7.2 Following a complaint, and where it is determined that a breach of confidentiality is proven with a staff member, that employee will be subject to disciplinary procedures.

DEFINITIONS:

Advocate: Is one who speaks on behalf of another who is unable to do so independently in relation to a lack of knowledge, skill, ability or standing.

Confidentiality: the assurance that any information (written, spoken or digital) is protected from access and use by unauthorised persons. Confidentiality relates to how information will be **held** and **used** by the organisation that collected it.

Due Diligence: the **care** that a reasonable person exercises under the circumstances to avoid harm to other persons or their property

Family: Family refers to legal guardian, person responsible, relatives, person with parental responsibility and significant others. Due to the complex support needs of people receiving a service from Greystanes, we acknowledge that families will often provide substitute consent on behalf of the person.

File: Any set of documents about a person accumulated during the provision of a service; files include current working file, health file and archived files.

Privacy: freedom from intrusion and public attention; an invasion of another person's privacy is unlawful. A breach of privacy occurs when there has been:

- Intrusion upon a person's privacy or private dealings,

- Public disclosure of embarrassing facts or personal information about a person,
- Publicity which places a person in a false light in the public eye,
- Appropriation of a person's name or likeness, including AI imitation

Privacy relates specifically to what information should be collected and stored and the legitimacy of collecting and storing this information.

Record: recorded information in any form including data in computer systems generated during the provision of service to a person.

LEGISLATIVE FRAMEWORK:

Disability Inclusion Act 2014
Australian Privacy Principles 2014
Attendant Care Industry Standard: 2013
National Standards for Disability Services
NSW Disability Service Standards
NSW Anti-Discrimination Act (1977)
NSW Disability Services Act (1993)
NSW Guardianship ACT (1987)
NSW Health Records and Information Privacy Act (2002)
NSW Ombudsman Act 1974
UN Convention on the Rights of Persons with Disabilities
Work Health & Safety Act 2011
Commonwealth Privacy Act 1988
NSW Children and Young Persons (Care and Protection) Act 1998
NSW Privacy and Personal Information Protection Act 1998,
Govt Information (Public Access) Act2009 (NSW)
NSW State Records Act 1998,
NSW Guardianship Act 1987,

REFERENCES AND LINKS:

OFFICE OF THE AUSTRALIAN INFORMATION COMMISSIONER,
Postal Address: GPO Box 5288 Sydney NSW 2001
Website: www.oaic.gov.au
General enquiries: 1300 363 992
Operating hours: Monday to Thursday, 10 am to 4 pm (AEST/AEDT)
Email: enquiries@oaic.gov.au

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