

## Consent to Collect Personal Information

(Adapted from the Privacy Act 1988)

Fremantle Women's Health Centre (FWHC) places high importance in protecting your privacy.

**Please read the remainder of this document to learn why we collect your personal information, how we store your information and when FWHC would need to share your information.**

Please talk to a staff member if you have any questions or need help filling in this form.

### Consent Declaration

- ☐ I give FWHC permission to collect and store my personal information.
- ☐ I have read and understood, or had explained to me, the contents of this Consent form.
- ☐ I have been given the opportunity to clarify any information in this Consent Form that I do not understand.
- ☐ I agree for my files to be confidentially audited both internally and externally as part of FWHCs quality assurance processes and funding requirements.
- ☐ I have been provided the *FWHC Clients' and Carers' Rights and Responsibilities*, (provided with this form) and have the opportunity to clarify any information that I do not understand.
- ☐ FWHC will inform me of relevant information about any proposed treatment or intervention and alternative options available. I consent to receive healthcare treatment and services from FWHC.

Client Name:	Client Signature:
Carer/Guardian Name (if applicable):	Signature:
Today's Date:	

The signing of this consent form is required to be renewed by all patients/clients each calendar year.

### 1. Why we need to collect your personal information

FWHC collects personal information such as your social and/or health history to:

- Enable our practitioners to have the information they need to provide you with safe and quality services that are relevant to your needs.
- Communicate with your emergency contacts, if necessary.
- Provide anonymous reports required by our funders.

## **2. Collection and storage**

- FWHC will only access your information from other sources with your consent.
- FWHC owns and manages its electronic client records system. We store these records securely in a protected electronic file management system.

## **3. Privacy and confidentiality**

FWHC will only disclose your information with your consent except when we are legally obliged to do so for example:

- Subpoena: in the case where a Court Order requests part or all of your record.
- Duty of Care: Where there is clear possibility of harm to yourself or harm to others, FWHC workers have a duty of care to ensure your safety and the safety of others.

## **4. Client and carer rights and responsibilities**

The *FWHC Clients' and Carers' Rights and Responsibilities* document outlines our commitment to work in partnership with you and your nominated carer/s to achieve your health and wellbeing outcomes. Please read the FWHC Rights and Responsibilities statement that has been provided to you with this form.

## **5. Access to your information**

As required by law, all clients/patients can request and have access to their records. To request this access, please do so in writing to [enquiries@fwhc.org.au](mailto:enquiries@fwhc.org.au). FWHC will only deny access to your records in certain circumstances as outlined in the Privacy Act 1988.

## **6. Client file audit**

FWHC confidentially audits client files regularly to ensure the quality of our record keeping. This is carried out by internal staff and external professional auditors appointed by FWHC.

## **7. Clinical supervision**

Counsellors consult with a clinical supervisor to provide the best possible services to clients. This is an identified professional standard required by the agency, professional bodies and our funders.

## **8. Acknowledging, valuing and learning from your lived experience**

FWHC may contact you to ask for your feedback by phone, survey, interview or focus group to help us design a better service. You can choose to take part or not when a request is made.