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FM HR SERVICES, RECRUITMENT - CONFIDENTIALITY CONSENT FORM

All Employees and voluntary workers are to complete this form prior to commencing with the Health Service.

Surname	
Given Name (s)	
Employee Number	
Facility / Location	
Position Title	
Contact Number	

1. It is absolutely essential to treat any personal details of medical, social or family history of a patient or staff member as **STRICTLY CONFIDENTIAL**. As a member of the staff of the Health Service you may, in the course of your duties, become aware of such matters concerning patients and their care, employee related information or customer related information of a sensitive nature. Such information as may be gained is strictly confidential and is not to be discussed in the Hospital or elsewhere.

Authorised staff may discuss only matters relevant to their own function and responsibility with other authorised staff in the Health Service or with other entitled persons in the course of patient care or official business. Any information which may come into your possession by virtue of your position is not to be divulged to an unauthorised person and you are to be particularly careful that you do not, even innocently, raise matters relating to any patient's illness or personal details in general conversation.

2. Only staff who are directly involved with the clinical care of the patient, employee issues or customers are entitled to appropriate record access; and even then, they must confine themselves to the part of the record which is relevant to their involvement with the matter.

Staff must also ensure as far as possible, that confidential information, whether in the form of paper documents, computerised data or in any other form, cannot be viewed by unauthorised persons and that the information is stored in a secure and orderly manner which prevents unauthorised access. Staff must also ensure that disposal of any confidential information must be destroyed appropriately.

3. The Health Service takes a very serious view of an employee's failure to observe this instruction as it breaches the individual's privacy. This may constitute grounds for dismissal and places both the Health Service and the employee concerned at risk of legal action and its consequences.

As an employee or volunteer of the Health Service, I acknowledge having read this document, which I understand, and agree to observe.

SIGNATURE

DATE

Completed forms can be sent to Service Centre Parramatta, Recruitment Services at Locked Bag 5270, Parramatta NSW 2124. For further information, please contact the HSS Recruitment Team on 1800 010 618.