

SESLHD PROCEDURE COVER SHEET



Health
South Eastern Sydney
Local Health District

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KEY TERMS	Release of Information, ROI, Medico-Legal, Privacy, Confidentiality, Requests for Information, Consent, Medical Records, eMR, secure organisation, sensitive information
SUMMARY	Outlines the requirements and procedures regarding the release of patient health information by Medico-Legal staff in relation to secure organisations.

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY

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1. PROCEDURE STATEMENT

This procedure describes the legislative requirement of all staff within SESLHD under the *Health Records and Information Privacy Act (2002) (HRIPA)*, with particular focus on the release of information by staff in response to a request to provide information relating to a patient registered in a secure organisation.

2. BACKGROUND

From 2022, specific staff across the site-based Health Information Units have been granted access to the electronic Medical Records for those patients registered in a secure organisation. This is to ensure the accuracy and entirety of the record can be accessed and released under the *Health Records and Information Privacy Act (2002)*. This procedure outlines the process in which the Service Manager will sign off the release of required documents before any documents are distributed.

Definitions:

Authorised Representative: *The Health Records and Information Privacy Act 2002* sets out the list of people who can be an authorised representative. They are:

- Someone who has an enduring power of attorney for the individual
- A guardian as defined in the *Guardianship Act 1987*
- If the individual is a child under 18, a person who has parental responsibility for them. The Act defines this as “all the duties, powers, responsibility and authority which, by law, parents have in relation to their children”
- Any other person who is authorised by law to act for or represent the person (including an executor or administrator of a deceased estate)
- A “person responsible” under Section 33A of the *Guardianship Act*.

Client/patient: any person to whom a health care provider owes a duty of care in respect of provision of health care services.

Confidentiality: the restriction of access to information, and the control of the use and release of personal information, to protect patient privacy.

Electronic Medical Record (eMR): Includes all electronic health record systems such as eMR Cerner, eMaternity, eRIC, MOSAIQ, ARIA, or any other electronic medical record application/system.

Health Information: (a) personal information that is information or an opinion about:

- the physical or mental health or a disability (at any time) of an individual, or
 - an individual’s express wishes about the future provision of health services to him or her, or
 - a health service provided, or to be provided, to an individual, or
- (b) other personal information collected to provide, or in providing, a health service, or
- (c) other personal information about an individual collected in connection with the donation, or intended donation, of an individual’s body parts, organs or body substances, or
- (d) other personal information that is genetic information about an

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individual arising from a health service provided to the individual in a form that is or could be predictive of the health (at any time) of the individual or of any sibling, relative or descendant of the individual, or (e) healthcare identifiers, but does not include health information, or a class of health information or health information contained in a class of documents, that is prescribed as exempt health information for the purposes of the HRIP Act generally or for the purposes of specified provisions of the HRIP Act.

Health Record: A documented account, whether in hard copy or electronic form, of a client/patient's health, illness, and treatment during each visit or stay at a public health organisation. Note: holds the same meaning as "health care record", "medical record", "clinical record", "clinical notes", "patient record", "patient notes", "patient file", etc.

HIM: Health Information Manager

Secure Organisation: Secure organisations are facility level locations built within eMR. These locations are secure in the fact that they will not be automatically granted to all eMR users (as occurs within all LHD hospitals), locations will only be granted to the relevant users within the service unit. Information associated with these secure locations is not available to users without access to that organisation.

3. RESPONSIBILITIES

3.1 Employees will:

- Adhere to procedures within this policy and the references relating to release of health information
- Forward requests for health information to the Health Information Unit unless part of an area approved to release health information.

3.2 Line Managers will:

- Promptly respond to any notifications of issues or concerns with the access or release of information
- Ensure all staff have completed relevant training and are familiar with this procedure prior to being tasked with the release of health information.
- Ensure appropriate records are kept of all requests and responses and assist in the auditing process.

3.3 Release of Information / Medico-Legal Staff will:

- Forward all requests for information within the secure organisation to the Service Manager prior to the release
- Document the confirmation of release and any additional instructions received from the Service Manager
- Release documents only in accordance with the direction provided by the secure organisation service manager
- Escalate any queries or concerns to the Health Information Manager

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- Promptly respond to any notifications of issues or concerns with the access or release of information
- Keep a list of secure organisations and their service managers for reference.

3.4 District Managers/ Service Managers will:

- Promptly respond to any escalated notifications of issues or concerns with the access or release of information.

3.5 Health ICT will:

- Receive requests via SARA for access to secure organisations
- Ensure appropriate endorsement from site-based Health Information Managers and secure organisation Service Manager to assign access.

4. PROCEDURE

4.1 ROI/Medico-Legal staff must:

- Ensure the request is valid including consent, documentation and conduct monies received if applicable.
- Once request verified and the eMR patient search identifies a secure organisation encounter (refer to Appendix 1 for a complete list of secure organisation locations), send email request to the Organisation Service Manager, including a complete copy of associated documents for review.

4.2 Service Manager must:

- Prioritise request, review and either provide what should be released or guidance on what documents can be released. This may include electronic records (eMR, CHOC) or paper records which can be scanned and emailed directly to the ROI / Medico-Legal clerk.

4.3 ROI/Medico-Legal staff must:

- Document the details of the release within the ROI/medico-legal register including any directions provided by the secure organisation manager
- Finalise request as per standard processes.

5. DOCUMENTATION

SARA ticket

Medico-Legal ROI register

Completion of:

- My Health Learning/HETI Privacy – It's Yours to Keep (Course Code: 326771159)
- My Health Learning/HETI Privacy Module 2 (Course Code: COM938)
- Powerchart training

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6. AUDIT

Yearly audits are to be conducted by the Health Information Unit to ensure that Medico-Legal Officers are receiving valid requests and are processing these in accordance with this procedure. The audit results to be presented at the SESLHD Health Records and Medico-Legal Committee and District Revenue Committee. Ad-hoc audits specially around the release of secure organisations information should also be conducted within each service / Hospital.

7. REFERENCES

7.1. Legislation:

[NSW Health Records and Information Privacy Act 2002](#)

7.2. NSW Health Policies:

[NSW Health Privacy Manual for Health Information \(2015\)](#)

8. VERSION AND APPROVAL HISTORY

Date	Version No.	Version and approval notes
29 August 2023	1.0	New document drafted by the SESLHD Health Records and Medico-Legal Committee. Approved at the August 2023 Clinical and Quality Council.

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APPENDIX 1

Facility	Service	Location
POWH	SESLHD Sexual Health/BBV North	Area HIV CH POW
		Albion St SNSW Telehealth CH POW
		Ankali CH POW (ALB ANKALI CH POW)
		Hepatitis CH POW (ALB ID3 CH POW)
		HIV CH POW (ALB ID1 CH POW)
		Nutrition CH POW (ALB NUTRITION CH POW)
		Pharmacy 2 CH POW (ALB PHARMACY 2 CH POW)
		Pharmacy CH POW (ALB PHARMACY CH POW)
		Psychology CH POW (ALB PSYCHOLOGY CH POW)
		Sexual Health CH POW (ALB ID4 CH POW)
		Smokers Clinic CH POW (ALB SMOKERS CH POW)
		Social Workers CH POW (ALB SOCIAL WORK CH POW)
		T150 CH POW (ALB T150 CH POW)
		Albion Centre Lexington Place Outreach Clinic (TAC LEX OUTREACH)
		ADAHPS Brokerage CH POW
		ADAHPS Case Management CH POW
		ADAHPS HIV AOD Integrated Care CH POW
		ADAHPS Neuropsychology CH POW
		ADAHPS Persons in Custody CH POW
		ADAHPS Supported Accom CH POW
		KC Clinic 180 (KC CLINIC 180 CH POW)
		KC ST Outreach Clinic (KC ST OUTRCH CH POW)
		KC South (KC SOUTH CH POW)
		KC Gen ABCDE (KC GEN ABCDE CH POW)
		KC Gen FGHIJ (KC GEN FGHIJ CH POW)
		KC Gen KLMNO (KC GEN KLMNO CH POW)
		KC Gen PQRST (KC GEN PQRST CH POW)
		KC Gen UVWXYZ (KC GEN UVWXYZ CH POW)
		KC Msic Clinic (KC MSIC CH POW)
		KC NUAA Clinic (KC NUAA CH POW)
		KC Oasis Clinic (KC OASIS CH POW)
		KC Twenty 10 Clinic (KC TWENTY10 CH POW)
		KRC Wayside Clinic (KC WAYSIDE CH POW)
		KS ABCDE CH POW
KS FGHIJ CH POW		
KS KLMNO CH POW		
KS PQRST CH POW		
KS UVWXYZ CH POW		

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		ID Ambulatory Care Service CH POW (ID AMBCARE CH POW)
		SESLHD Prevention Hub CH POW (SESLHD PVTN HUB CH POW)
	Prince of Wales Hereditary Cancer Centre	Intake HCC
		General HCC
		High Risk HCC
		Triage HCC
		Awaiting Referral HCC
SGH	SESLHD Sexual Health/BBV South	Short Street Centre ABCDE CH SGH (SSC ABCDE CH SGH)
		Short Street Centre FGHIJ CH SGH (SSC FGHIJ CH SGH)
		Short Street Centre KLMNO CH SGH (SSC KLMNO CH SGH)
		Short Street Centre PQRST CH SGH (SSC PQRST CH SGH)
		Short Street Centre UVWXYZ CH SGH (SSC UVWXYZ CH SGH)
		Short Street Centre HIV CH SGH (SSC HV SGH SGH)
		Short Street Centre STI CH SGH (SSC ST CH SGH)
		Waratah Clinic CH SGH (WARATAH CH SGH)
	SESLHD Violence, Abuse & Neglect Services	Southern Network Sydney Sexual Assault Service
		SESLHD Adult Survivor Service
		SESLHD JCPRP SGH
		SESLHD Safewayz Service
	St George Domestic Violence Service	South East Sydney Child Protection Counselling Service
	St George Hereditary Cancer Centre	Intake SGH HCC
		General SGH HCC
		High Risk SGH HCC
		Triage SGH HCC
		Awaiting Referral SGH HCC
TSH	Sutherland Domestic Violence Service	Sutherland Domestic Violence CH TSH
		Paediatric Child and Family Counselling Service Secure CH TSH