

KLINT PRIVACY POLICY AND CONSENT FORM

Klint's principal concern is and will always be the health of our clients. Klint recognises the importance of privacy and confidentiality to our clients. Your privacy is protected in accordance with the Australian Privacy Principles under the Privacy Act 1988.

Use, collection, storage and disclosure of your health information

Klint therapists collect personal health information so that we may properly assess, diagnose and treat you. Personal information collected will generally include your name, address, phone number, medical history and social circumstances. Klint collects this information either directly from you, your insurance agency or other health providers involved in your care.

All members of the Klint team will have access to your personal information. Disclosure to other health professionals, including treating doctors and allied health practitioners outside this practice may occur for the purpose of providing treatment and communication. Your personal information will also be used for administrative and billing purposes, either directly or through compensable and funding bodies.

Klint endeavours to protect any identifying health information and ensures it is not disclosed to any person irresponsibly or unnecessarily. Information may be stored both electronically and in hard copy. All electronic files are stored password-protected and only accessible by the Klint team, with regular data backups performed. Klint stores health information for a minimum of 7 years from the date of last entry.

For the purposes of demonstrating improvements and providing visual exercise programs throughout your rehabilitation, Klint therapists may take photographs and video recordings during consultations. These files will be stored electronically, password-protected and only accessible by the Klint team. You may withdraw your consent for photographs and video recordings at any time.

On request, you may have access to your treatment record held by Klint, except in circumstances where access may be denied under the Privacy Act or other laws. Klint is committed to ensuring your information is accurate and up-to-date. If you believe that the personal information is incorrect, please advise your therapist during the next consultation.

While we make every effort to protect your privacy, we may need to disclose personal information when required by law under the Privacy Act.

Consent Form

By signing this form, I acknowledge that I have read, understood and consent to the uses of my personal information as documented above. I understand that Klint will obtain additional consent if my personal information is used in any other way. I may withdraw my consent at any time, however, in doing so, Klint may no longer be able to provide the services required for my rehabilitation.

Signature:

Printed name:

Relationship (if signed by a guardian):

Date: