 <p>BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI</p> <p>HEALTH RECORDS PROTOCOL</p>	<p>HEALTH RECORD - ACCESS TO PERSONAL HEALTH INFORMATION</p>	<p>Policy 2.5.2 Protocol 3</p>
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STANDARD

Persons will have access to their own personal health information that is held by Bay of Plenty District Health Board (BOPDHB) within 20 working days of the request, when the request meets the criteria.

Third party requests (requests by other people or organisations) may also be actioned where the request meets legislative requirements and the requirements of this policy.

OBJECTIVE

To detail procedures for access to personal health information in a health record by staff, patients and others.

STANDARDS TO BE MET


1. Requesting Of Information – General Requirements

- 1.1 All requests regarding access to a health record are to be referred to the Health Records Department at Tauranga or Whakatane Hospital, including Maternity, Mental Health & Addiction Services (MH&AS), Allied Health etc
- 1.2 Requests for health record information that is not held in the Health Records Department at Tauranga or Whakatane Hospital will be referred to the relevant service for action where necessary. All requests for a Mental Health & Addiction Services (MH&AS) record must be referred to the MH&AS for approval for release.
- 1.3 All requests for patient information received by individual staff must be referred to Health Records for the release of the information.
- 1.4 Where appropriate, Health Records will seek the authorisation of the Family Violence Co-ordinators or the Privacy Co-ordinator / Privacy Officer for authorisation for release of sensitive information.
- 1.5 Persons making the request must be properly authorised to obtain information, either through patient authorisation or legislation.
- 1.6 Requests should be dealt with promptly (within less than 20 working days from original request), whenever possible meeting the time requirements of the person making the request.
- 1.7 Requests for large amounts of information can have the timing extended. The individual making the request must be kept informed of the reasons for, and the period of, the extension of time.

2. Declining To Release Information

- 2.1 Information can be withheld:
 - a) When disclosure would involve the unwarranted disclosure of the affairs of another individual or of a deceased individual.
 - b) Where a child is under 16 years and disclosure would be contrary to their interests.
 - c) Where disclosure would breach legal professional privilege.
 - d) Where information is not readily retrievable.
 - e) When disclosure of the information would be likely to prejudice the physical or mental health of the individual (this must be backed by factual information in consultation with the medical practitioner, Chief Medical Advisor and Privacy Officer).

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- f) When the request is deemed frivolous or the information requested is deemed to be trivial.
- g) When a partner abuse record is requested by anybody other than the client, or a staff member who is working directly with the client.
- 2.2 The decision to withhold information will be made by the Privacy Officer in consultation with the clinician.
- 2.3 BOPDHB must tell the patient why the information is not being released and advise they have the right of appeal to the Privacy Commissioner.

3. Personal Requests

All personal requests for access to a health record must comply with the following:

- 3.1 Complete Personal Information Request (8264) and provide proof of identification – either with photo ID for in-person requests or through the provision of sufficient information to provide proof of identity where the request is by post or email.
- 3.2 Requests from current inpatients to view health records require the Personal Information Request form to be completed.

OR


- 3.3 Supply a signed letter stating full name and date of birth, and through the provision of sufficient information provide proof of identification.

4. Third Party Requests

All requests by a third party for access to, or information from, a health record must comply with the following:

- 4.1 Complete the Health Records Information Request for Another Person (8264A) and provide written authorisation from the patient or person legally entitled to access the information, along with proof of the requestor's identity (see 3.1 above).
- 4.2 Requests from other Health Agencies requesting information from a health record to be confirmed by email, fax or letter on the agency's official letterhead.
- 4.3 Requests for information from the health record of a minor requires the consent of the parent or guardian.
- 4.4 Requests from parents unable to prove guardianship should be dealt with in conjunction with the Privacy Officer and / or the Paediatric Service.
- 4.5 Police requests for information should be made on the NZ Police request form pursuant to Section 2(i) Rule 11, Health Information Privacy Code 2020
- 4.6 Requests from Social Service agencies should be dealt with in conjunction with the Privacy Officer, and / or in the case of a minor, the Paediatric Service.
- 4.7 Requests for information on patients without testamentary capacity can only be given to their representative or person named by their representative.
- 4.8 Requests for information from health records of a deceased person should be made by the Executor or Administrator of the deceased estate or state that permission has been given by the Executor or Administrator.
- 4.9 Insurance Company requests for information must supply patient authorisation.
- 4.10 ACC requests for information must be accompanied by the ACC form signed by the patient containing authorisation for release of information on that event.
- 4.11 Information may be used for audit, risk management or quality assurance purposes but must not identify individual patients.
- 4.12 Requests received from other DHBs for original hard copy records will be declined so to reduce the risk of health records being mislaid. When such requests are received, we will advise that we will be not releasing the original hard copy health record, but will supply a copy of either the full health record, or the relevant sections.

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5. Charging For Costs Associated With Supplying A Copy Of A Health RECORD

- 5.1 Patients or their representatives are entitled to receive a copy of their health record at no charge.
- 5.2 After the provision of a full copy of the health record, whether in hard copy or in electronic format, only new information that has not previously been copied will be provided.
- 5.3 Under the Privacy Act 2020 charges can only apply for access where it is time consuming or difficult to find the information and not for repeat requests.
- 5.4 All costs associated with supplying copies of patients' health records for a third party will be charged to the requestor. The requestor must be advised, prior to the copying taking place, that charges will apply.

6. Procedures

- 6.1 Confirm records held by BOPDHB for patient
 - a) Verify record is on file
 - b) Obtain record for viewing
- 6.2 Inspection of Health Record
 - a) Staff member at all times to remain with person viewing record. For a general health record this can be an administrative staff member who will offer no comments other than to explain where documents are located in the health record. For a mental health record this must be a clinical staff member
 - b) Medical practitioner / nurse assigned to the patient should, if practicable, ~~to be~~ be advised of any inpatient request to view their health record. The Personal Information Request (8264) must be completed by the patient and placed on the record. Photo ID is not required as the patient is already identified as an inpatient.
 - c) Person viewing health record to be advised that an appointment can be made to have a clinical staff member explain the documentation to them
 - d) No comment or opinion to be offered by administration staff aside from explaining where documents are located in the health record.
 - e) Person viewing health record to be advised that no part of the original documentation from the health record can be removed by them
 - f) Person viewing health record to be advised that they can request all or part of the health record to be photocopied.
- 6.3 Photocopying of Health Records (all or part of the health record documentation)
 - a) Confirm which part of the record is to be photocopied
 - b) Ensure photocopies are legible
 - c) All photocopied pages must be on pre-printed BOPDHB copy paper stating its authority to release information under the provisions of the Health Information Privacy Code 2020, except for documents being released to the Coroner / Police by the Duty Nurse Manager (DNM) outside of Health Records hours where a release stamp will be needed.
 - i. For Patients - confidential authorised patient copy
 - ii. For Others - this copy of an original document has been properly released from health authority care to a person entitled to have it under the provisions of the Health Information Privacy Code, The Privacy Act and / or The Official Information Act
- 6.4 Electronic Health Record
 - a) Where an electronic health record exists, a print-out of the requested part of the record will be done.

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6.5 Faxing of Patient Information

- a) confirm the fax number
- b) information must not be left unattended on any copier fax machine.

6.6 Emailing of Patient Information

- a) Where a patient requests that their copy health record be emailed to them, prior to the sending of the record the patient will sign a waiver acknowledging they have requested to receive the copy record via email, and accepting any risks attached to the transmitting of the information in this format.

ASSOCIATED DOCUMENTS

- Bay of Plenty District Health Board policy 2.5.2 Health Records Management
- Bay of Plenty District Health Board policy 2.5.1 Health Information Privacy
- [Bay of Plenty District Health Board Release of Personal Information Request form](#)

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