

PRIVACY INFORMATION CONSENT STATEMENT

Information collected by mecwacare is collected for the purpose of processing your application, determining the fees and charges payable, assessing the level of care, and providing ongoing care appropriate to your needs.

Mecwacare will only use the personal information within mecwacare or disclose it outside mecwacare for the purposes for which it was collected and in accordance with the relevant legislation. For example: where there has been consent or where you would reasonably expect this to occur such as for regulatory bodies, authorised officers, contractual obligations and internal / external compliance auditing.

If you would like to know more about privacy at mecwacare, including your right to seek access to any of the information collected, then you may refer to the mecwacare website (www.mecwacare.com.au) or contact the Privacy Officer at mecwacare on 03 8573 4888.

Disclosure and Use of Personal and Health Information

Resident / Client Name

Date of Birth/...../.....

I, (Resident / Client / Representative) consent to the information collected by mecwacare, being disclosed to relevant external agencies / persons including but not limited to:

- Commonwealth and Victorian Government departments
• Centrelink
• Medical and Allied Health Professionals
• Hospitals
• Specialist Services
• Other(s), please specify

I understand that the information collected may be used for the purpose(s) of:

- Determining the level and type of care I will receive.
• Providing care and services in accordance with my assessed care needs and preferences.
• Determining the level of funding that I may be entitled to receive.
• Determining the fees and charges payable.
• Seeking specialist input into my care.
• For the management, funding or monitoring of a health service including internal and external compliance auditing.
• For another purpose that is 'directly related' to this primary purpose, and where the resident/client would 'reasonably expect' it to happen.

Signature Resident Client Representative (specify)

Power of Attorney [] Financial [] Medical [] Enduring Power of Guardianship [] Other

Name: (PRINT) Date:/...../.....

References:

Aged Care Act 1997 (Commonwealth)
Health Records Act 2001(Victoria)

Disability Act 2006 (Victoria)
Privacy Act 1988 (Commonwealth)