



Victorian Elderly Chinese Hostel

P&P 2.12 Privacy & Confidentiality

Reference No: P&P 2.12

Review Date: 1st November 2025

Date to be reviewed: 1st November 2028

Approved by: Hostel Management

Responsibility: All staff

Application/Scope: Any person who carries out work in any capacity for VECH

1. Introduction

Privacy and confidentiality are fundamental to maintaining trust and integrity within the organisation. Effective management of personal, clinical, and organisational information ensures compliance with legislative and regulatory obligations, supports safe and high-quality care, and protects the rights of residents, staff, and stakeholders.

This policy applies to all personal information collected through verbal, written, electronic, visual (including CCTV), and digital means, including information collected via websites, social media platforms, surveillance systems, and entry screening processes. By providing personal information to VECH, individuals consent to its collection, use, and disclosure in accordance with this policy and applicable privacy legislation.

This policy is developed in accordance with the Aged Care Act 2024, the Privacy Act 1988 (Cth) including the Australian Privacy Principles and Notifiable Data Breaches Scheme, the Health Records Act 2001 (Vic), and the Strengthened Aged Care Quality Standards.

It supports VECH's duty to provide safe, respectful, and accountable aged care services that uphold the dignity, privacy, autonomy, and rights of individuals.

2. Objectives

The purpose of this policy and procedure is to ensure that all personal, health, and organisational information is managed in a transparent, secure, and legally compliant manner. Specifically, it aims to:

- Ensure personal information, including health information of residents, clients, and staff, is collected, used, disclosed, and stored in accordance with the Privacy Act 1988, relevant legislation, and best practice standards.
- Protect the confidentiality, integrity, and security of all information within the organisation.
- Provide clear guidance to staff on the fair and responsible handling of information, including access, correction, and disclosure.

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- Ensure information is used and disclosed solely for relevant and authorised purposes.
- Support compliance with regulatory, accreditation, and Strengthened Aged Care Quality Standards, ensuring safe, high-quality, and accountable service delivery.
- Ensure individuals are informed of their right to remain anonymous or use a pseudonym where lawful and practicable, and understand the implications where identification is required to deliver funded aged care services.

3. Strengthened Aged Care Quality Standards & Outcomes

This policy supports compliance with:

- **Standard 1: The Individual**
 - **Outcome 1.2: Dignity, respect and privacy**
Ensures residents' personal and health information is managed confidentially and respectfully.
 - **Outcome 1.4: Transparency and agreements**
Supports residents' rights to access their personal information and understand how it is used.
- **Standard 2: The Organisation**
 - **Outcome 2.2a: Quality, safety and inclusion culture for aged care workers**
Ensures staff understand privacy obligations and organisational procedures for managing information.
 - **Outcome 2.3: Accountability, quality system and policies and procedures**
Demonstrates effective governance and compliance with legislative requirements regarding privacy.
 - **Outcome 2.7: Information management**
Ensures secure, accurate, and accessible management of resident, staff, and organisational information.
- **Standard 5: Clinical Care**
 - **Outcome 5.1: Clinical governance**
Supports systems for secure and confidential handling of clinical and personal information to maintain safety and quality.

4. Definitions

- **Personal Information:** Any information or opinion, whether true or not, and whether recorded in a material form or otherwise, relating to an individual

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whose identity is apparent, or can reasonably be determined, from the information or opinion.

- **Sensitive Information:** Personal information that reveals an individual's racial or ethnic origin, political opinions, membership of a political association, religious beliefs or affiliations, philosophical beliefs, membership of a professional or trade association, trade union membership, sexual orientation or practices, criminal record, biometric information or templates, health information, or genetic information.
- **Health Information:** Information or an opinion about:
 - The health or disability (at any time) of an individual;
 - An individual's expressed wishes regarding the future provision of health services;
 - A health service provided, or to be provided, to an individual that is also personal information;
 - Other personal information collected to provide, or in providing, a health service;
 - Personal information collected in connection with the donation, or intended donation, of the individual's body parts, organs, or body substances;
 - Genetic information about an individual in a form that is, or could be, predictive of the health of the individual or a genetic relative.
- **Unsolicited Information:** Personal information received from an individual that the organisation did not actively seek to collect.

5. Policy

VECH is committed to:

- Manage personal and health information in a transparent, secure, and lawful manner.
- Collect only the information that is necessary for the delivery of care, administrative functions, and regulatory compliance.
- Ensure that access to personal and health information is restricted to authorised personnel only.
- Maintain accurate and up-to-date records, protecting against unauthorised access, loss, or misuse.
- Provide residents, clients, and staff with rights to access and correct their personal information in accordance with legislation.
- Train all staff in privacy obligations and procedures, fostering a culture of confidentiality, accountability, and ethical information management.

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- Respond promptly and appropriately to any breaches of privacy, including investigation, mitigation, and reporting in line with legal and organisational requirements.
- Allow individuals, where practicable, to interact with the organisation anonymously or using a pseudonym.
- Ensure personal information is stored within Australia where possible or otherwise protected by equivalent privacy safeguards.
- Ensure third-party contractors, service providers, and partners are contractually required to comply with privacy and confidentiality obligations.
- Maintain procedures for managing eligible data breaches, including assessment, containment, notification, and regulatory reporting where required.

6. Procedures

VECH is committed to respecting the privacy of all residents', clients', and staff personal information. We are bound by the Aged Care Act 2024, the Privacy Act 1988 (Cth) including the Australian Privacy Principles and Notifiable Data Breaches Scheme, the Health Records Act 2001 (Vic), and the Strengthened Aged Care Quality Standards, which establish the benchmark for handling personal information.

6.1 Collection, Use and Disclosure

We collect and use personal information during the course of the relationship with our organisation. All information must be accurate and up to date. Individuals must notify us of any changes.

Where individuals choose to remain anonymous or use a pseudonym, this will be respected unless identification is required to provide safe care, comply with legislation, or access government-funded services.

6.2 Purpose of Collection

Personal information will only be collected by fair and lawful means and only when necessary for our functions as an aged care provider, including:

- Compliance with state or commonwealth laws.
- Reporting to government agencies as required.
- Determining eligibility for entitlements under state or commonwealth law.
- Providing appropriate care and services.
- Enabling contact with nominated persons regarding a client's health.
- Liaising lawfully with representatives or family as needed.

Sensitive information, including health information, will only be collected where:

- Consent is provided, or

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- Collection is required/authorised by law, or
- A permitted general or health situation exists, or
- We are a non-profit and the information relates to our activities and members or regular contacts.

6.3 Method of Collection

Information may be collected from:

- The client/resident.
- Health professionals or facilities, including the Aged Care Assessment Team.
- Family members or legal representatives.
- Security cameras located in public and communal areas of the facility for safety, security, and incident investigation purposes. Surveillance footage is retained for a limited period unless required for investigation or legal purposes.

Personal information should generally be collected directly from the client/resident unless consent, legal requirements, or practicality justify collection from another source.

Unsolicited information received without lawful collection will be destroyed or de-identified promptly.

6.4 Types of Personal Information Collected

i. Residents

VECH may collect, hold, and use the following types of personal and health information about residents where reasonably necessary to provide aged care services, meet legal obligations, and ensure safety and quality of care:

a) Identification and contact details

- Full name, preferred name
- Date of birth, age, gender
- Address, telephone number, email
- Medicare, DVA, Centrelink or concession card details

b) Health and clinical information

- Medical history, diagnoses, allergies, and conditions
- Medication records and treatment plans
- Care plans, assessments, progress notes, and incident reports
- Pathology, diagnostic imaging, and hospital records
- Vaccination status (e.g. influenza, COVID-19)

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- Mental health, cognitive status, and disability information

c) Care and service information

- ACAT/assessment outcomes
- Lifestyle preferences, cultural and religious needs
- Behaviour support plans and risk assessments
- Advance care planning documents

d) Family, representative and support person information

- Emergency contacts
- Next of kin and nominated representatives
- Guardianship, Power of Attorney, guarantors, or substitute decision-maker details

e) Financial and administrative information

- Fees, subsidies, and funding eligibility
- Insurance, pension, or benefit information
- Limited banking details where authorised

f) Safety and security information

- Entry screening information where required by public health directions
- CCTV footage in clearly signposted areas for safety and security purposes

VECH will only collect information that is reasonably necessary for its functions as an aged care provider and will handle all information in accordance with this policy and applicable privacy legislation.

ii. Employees

VECH may collect, hold, and use personal information about employees that is reasonably necessary for recruitment, employment, workforce management, compliance with legal obligations, and the provision of safe and quality aged care services. This includes, but is not limited to the information as follows:

a) Identification and contact information

- Personal and emergency contact details;

b) Employment-related information

- Engagement, training, discipline, or resignation;
- Termination of employment;
- Terms and conditions of employment;
- Hours of employment;

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c) Performance and conduct information

- Records relating to performance management, supervision, professional conduct, or workplace behaviour

d) Payroll and employment administration information

- Salary, wages, or other remuneration;
- Leave entitlements, including recreation, long service, sick, personal, maternity, or paternity leave;

e) Workforce compliance and professional affiliation information

- Information relating to professional registrations or memberships of professional or trade associations, where relevant to employment.
- Trade union membership information where lawfully collected or disclosed.

f) Financial and statutory administration information

- Information required for taxation, banking, and superannuation purposes in accordance with employment and regulatory requirements.

iii. Volunteers and Placement Students

VECH may collect, hold, and use personal information about volunteers and placement students where reasonably necessary to assess suitability, manage engagement or placement, ensure safety and compliance, and support the delivery of safe and quality aged care services. This may include:

a) Identification and contact information

- Name and contact details, including emergency contact information.

b) Engagement and placement information

- Information relating to recruitment, onboarding, placement arrangements, supervision, role allocation, and cessation of volunteering or placement.

c) Qualifications and screening information

- Education records, qualifications, training, or competencies relevant to the role.
- Screening and probity checks required under legislation or organisational policy (e.g. police checks, NDIS worker screening, vaccination or infection control requirements).

d) Performance and conduct information

- Information relating to supervision, performance feedback, conduct, or compliance with organisational policies and codes of conduct.

e) Health and safety information

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- Information relevant to fitness for role, workplace safety, incident management, or public health requirements, where lawfully collected.

f) Safety and security information

- Information collected through access controls, incident reporting systems, or security measures in public or communal areas of the facility.

iv. Contractors and Service Providers

VECH may collect, hold, and use personal information about contractors and service providers where reasonably necessary to manage engagement, meet legal and regulatory requirements, and support the safe delivery of services.

a) Identification and contact information

- Name and business contact details.

b) Contractual and service delivery information

- Information relating to engagement, contracts, scope of services, and termination of arrangements.

c) Qualifications, credentials and compliance information

- Professional qualifications, licences, registrations, insurances, and compliance checks relevant to the services provided.

d) Performance and conduct information

- Information relating to service performance, conduct, compliance with contractual obligations, and incident management.

e) Financial and administrative information

- Information required for invoicing, payment, insurance, and financial administration.

f) Safety and security information

- Information collected through access controls, incident reporting systems, or security measures in public or communal areas of the facility.

v. Other Personal Information

- In addition to the categories outlined above, the organisation may collect and hold other personal information where it is reasonably necessary for the operation of the service, compliance with legal or regulatory requirements, or the delivery of safe and quality aged care services.
- This may include information provided through general enquiries, feedback or complaints, surveys, incident reports, audits, quality improvement

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activities, public health requirements, or interactions with the organisation by phone, in writing, electronically, or in person.

- Any such information will be collected, used, and disclosed in accordance with this policy and applicable privacy legislation.

6.5 Use and Disclosure

We will not use or disclose personal information for purposes other than the primary purpose of collection, unless:

- The secondary purpose is related, and disclosure is reasonably expected
- Consent has been provided
- Billing, debt recovery, funding, and subsidy administration
- Incident reporting, quality improvement, accreditation, and audit activities
- Education and training of staff and contractors
- Engagement of insurers, legal advisers, medical defence organisations, and regulators following incidents or complaints
- Use is necessary for research, statistics, public health, or public safety under privacy guidelines
- Disclosure is necessary to prevent serious threats, investigate unlawful activity, enforce laws, or as otherwise required/authorized by law.

Cross-border Disclosure

Personal information will not be disclosed to overseas recipients unless the VECH has taken reasonable steps to ensure that the recipient handles the information in a manner consistent with Australian privacy laws and this policy (**Privacy Act 1988 (Cth), Australian Privacy Principle 8**).

Cross-border disclosure may occur where:

- the recipient is subject to privacy laws or binding schemes that provide protections substantially similar to those under Australian law (**APP 8.2(a), Privacy Act 1988 (Cth)**);
- the disclosure is required or authorised by Australian law, a court, or regulatory authority (**APP 8.2(b), Privacy Act 1988 (Cth)**); or
- the individual has provided informed consent to the overseas disclosure after being advised of any potential privacy risks (**APP 8.2(b), Privacy Act 1988 (Cth)**).

Where practicable, VECH seeks to store and process personal information within Australia.

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Disclosure of Health Information

Health information may be used or disclosed without consent where permitted by law and necessary to provide appropriate care or services, protect the health or safety of the individual or others, or for compassionate reasons (**Privacy Act 1988 (Cth)**, **APP 6**; **Health Records Act 2001 (Vic)**).

Where an individual is unable to give consent, health information may be disclosed to a person responsible for the individual, provided that:

- the disclosure is reasonably necessary for the provision of care, treatment, or support, or for quality and safety review purposes (**APP 6**, **Privacy Act 1988 (Cth)**);
- the disclosure is not contrary to any known wishes previously expressed by the individual (**Health Records Act 2001 (Vic)**); and
- the information disclosed is limited to what is reasonably necessary for the relevant purpose (**APP 6**, **Privacy Act 1988 (Cth)**).

6.6 Management of Personal Information

VECH manages personal information in a secure, confidential, and lawful manner, and applies appropriate safeguards to protect information from unauthorized access, use, disclosure, loss, or misuse. Access to personal information is restricted to authorised personnel on a need-to-know basis.

i. Residents and Their Representatives

This includes residents and their nominated or legally appointed representatives, such as next of kin, guardians, attorneys, decision-makers, or guarantors.

- Information, including health and limited financial data, is stored securely in databases and locked filing cabinets.
- Electronic records are protected by role-based access controls and secure passwords
- Information is used and disclosed only for purposes related to care, service delivery, funding, legal obligations, or quality and safety activities.
- Access is limited to staff involved in care delivery, administration, governance, or compliance functions.
- Consent is obtained before disclosing information, unless disclosure is permitted or required by law.
- Records are retained for a minimum of **seven (7) years post-departure** in accordance with legislative requirements, regulatory expectations, and VECH organisational policies, unless a longer retention period is required by law.
- Secure destruction or de-identification of records occurs only with authorisation from management and in line with approved records management and retention schedules.

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- VECH engages an approved external document destruction provider to destroy outdated records onsite, ensuring records do not leave the premises prior to destruction.
- Authorised VECH staff supervise and monitor the destruction process to ensure information is irretrievably destroyed and cannot be reconstructed, retrieved, or accessed.

ii. Employees

- Employee personal information is stored securely and accessed only by authorised management or human resources personnel.
- Information is used solely for employment, workforce management, legal compliance, and workplace safety purposes.
- Disclosure to external parties, including government agencies, occurs only where required or authorised by law.
- Employee records are managed in accordance with applicable privacy and workplace legislation.

iii. Volunteers and Placement Students

- Personal information relating to volunteers and placement students is managed securely and used only for engagement, supervision, compliance, and safety purposes.
- Access is restricted to authorised staff responsible for volunteer coordination, education, or supervision.
- Information is retained only for as long as necessary and disposed of securely when no longer required.

iv. Contractors and Service Providers

- Personal information collected from contractors and service providers is used only to manage contractual arrangements, service delivery, compliance, and payment processes.
- Contracts and service agreements require compliance with privacy and confidentiality obligations.
- Access to personal information is limited to personnel responsible for contract management, finance, or governance functions.

6.7 Access to Personal Information

- Personal information is kept secure and only accessible to authorised staff.
- Access may be granted to clients, residents, or their authorised representatives unless the request is frivolous or vexatious, poses a risk to health or safety, unreasonably affects the privacy of others, or is otherwise unlawful.

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- Requests for access may be made verbally or in writing and are acknowledged and responded to within a reasonable timeframe.
- VECH may require reasonable verification of identity and authority before granting access.
- Where access is granted, information may be provided in a suitable format, including electronic or hard copy, where practicable.
- Access may be declined or limited with reasons provided in accordance with privacy legislation.
- Charges for access, if applicable, will be reasonable and not be excessive.

6.8 Direct Marketing and Media

- Personal information will not be used for direct marketing unless consent has been obtained or a clear opt-out mechanism is available.
- Sensitive information will only be used for direct marketing with explicit consent.
- Personal information, images, or stories of residents, staff, or others will not be published on the organisation's website, social media platforms (including WeChat), newsletters, or promotional materials without appropriate consent.
- Where consent is provided for publication, the organisation will ensure information shared is limited to what has been agreed and used for the stated purpose only.
- Consent for publication may be withdrawn at any time, and reasonable steps will be taken to remove or cease further use of the information.
- Staff must not make statements to the media or publish content involving personal information on behalf of the organisation; all media or public enquiries are referred to the Hostel Manager or authorised delegate.

6.9 Cybersecurity, System Access Control & Electronic Information Controls

VECH recognizes that cyber security is a critical component of information governance, resident safety, and organisational resilience. VECH implements proportionate technical, administrative, and physical safeguards to protect electronic information systems and digital records from unauthorised access, misuse, loss, corruption, or cyber threats.

i. System Access Control

VECH ensures that access to electronic systems and digital records is:

- Role-based and limited to what is reasonably necessary for an individual's duties
- Granted only to authorised personnel
- Reviewed regularly to ensure ongoing appropriateness

Specific controls include:

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- Unique user IDs for each staff member
- Secure password requirements (complexity, expiry, and non-sharing)
- Removal or modification of access promptly when:
 - Employment or engagement ends
 - A staff member changes roles
 - A staff member is suspended or under investigation (where appropriate)

Access to highly sensitive information (e.g. clinical records, financial data, incident reports) is further restricted and monitored.

ii. Protection of Electronic Records

VECH applies safeguards to maintain the confidentiality, integrity, and availability of electronic information, including:

- Secure servers or cloud-based systems that meet Australian privacy and security standards
- Regular data backups to protect against data loss, system failure, or cyber incidents
- Controlled permissions for viewing, editing, or exporting records
- Encryption or equivalent protections where available and appropriate

Electronic records must not be altered, deleted, or destroyed except in accordance with approved record management procedures.

iii. Use of Devices and Portable Media

To reduce cyber risk:

- VECH information must only be accessed, stored, or transmitted using approved organisational systems
- Use of personal devices (e.g. private laptops, phones, USB drives) to store or transfer VECH information is prohibited unless expressly authorised
- Portable storage devices, where approved, must be encrypted and securely stored
- Information must not be downloaded, photographed, or copied unless required for authorised work purposes
- Staff must ensure screens are not visible to unauthorised persons and must log out of systems when unattended.

iv. Email, Messaging & Electronic Communication

When communicating electronically:

- Personal and health information must only be shared via secure and approved communication channels
- Information must be limited to what is reasonably necessary
- Recipient details must be checked carefully before sending

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- Bulk emails containing personal information must use appropriate privacy controls (e.g. BCC)

Social media, messaging apps, or personal email accounts must not be used to share resident or staff information unless formally approved and governed by policy.

v. Monitoring, Audits & Incident Response

VECH engages an external IT company to monitor system access and usage to identify:

- Unauthorised access attempts
- Unusual activity patterns
- Potential cyber or data security incidents

Oversight of the external IT provider is retained by VECH management, including reviewing of reports, incident notifications, and corrective actions.

Where a cyber incident or suspected data breach occurs:

- Immediate steps are taken to contain and mitigate the risk
- The incident is reported through VECH's incident management system
- Investigation and corrective actions are undertaken
- Notification to affected individuals and regulators occurs where required under the Notifiable Data Breaches (NDB) Scheme

Cyber security incidents, access issues, and data breaches are rereviewed as part of VECH's quality improvement, risk management, and governance process to support continuous improvement.

6.10 Complaint and Grievance Procedure

Internal Complaints Mechanisms

VECH views feedback and complaints as opportunities for quality improvement. The following mechanisms are available for staff and residents:

- **Direct Discussion:** Concerns may be discussed directly with the Facility Manager, Clinical Manager, or supervisor. Issues will be investigated promptly, and outcomes will be communicated in a timely manner.
- **Suggestion Boxes:** Individuals may submit written suggestions, concerns, or questions anonymously or with their name included. All submissions are reviewed, actioned, and recorded.
- **Online feedback form:** Feedback form is available on VECH website for any individual who wishes to provide their valuable feedback anonymously or with their name included.
- **Contacting the VECH Board:** Where matters remain unresolved or are complex, individuals may escalate concerns directly to the VECH governing body. Board members will review the matter independently and provide a written response.

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- **Mediation:** Where appropriate, a mediator may be engaged by mutual agreement between management and the complainant to assist in resolving the issue.

External Resolution Pathways

If concerns cannot be resolved internally, the following agencies may be contacted:

- Aged Care Quality and Safety Commission (ACQSC) – 1800 951 822
- Older Persons Advocacy Network (OPAN) – 1800 700 600
- Aged Care Rights Victoria (local service provider) – 1800 133 312

VECH fully supports the involvement of external agencies and advocates in resolving complaints.

With the resident's permission, VECH staff may contact an advocacy service on the resident's behalf to explain concerns and request follow-up.

Complaint Handling

- Complaints are investigated per internal procedures
- Complainants may participate in conferences to resolve the matter, with support persons if required.
- Responses will include investigation outcomes, proposed actions, and escalation options.
- Complaints may be made anonymously where permitted by law.
- Complaints will be handled confidentially and without retribution.
- Personal information collected during a complaint or grievance will be used only for the purpose of investigating and resolving the matter.
- Records of complaints and outcomes are maintained securely and reviewed as part of quality improvement and governance processes.
- Where a complaint or concern involves suspected serious misconduct, unlawful activity, corruption, or a contravention of legislation, it may be managed under VECH's Whistleblower Policy.
- The Whistleblower Policy provides additional protections, including confidentiality and protection from detriment, for eligible persons making protected disclosures. Complaints that meet the criteria for a whistleblower disclosure will be handled in accordance with that policy.

7. Responsibilities

7.1 Governing Body / Board of VECH

- Ensure VECH maintains compliance with the Privacy Act 1988, Australian Privacy Principles, Victorian Health Privacy Principles, and relevant legislation.
- Provides oversight of VECH's privacy governance framework.

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- Ensures appropriate systems, resources, and controls are in place to support compliance with privacy and information management obligations.
- Promote a culture of privacy, confidentiality, and accountability throughout the organisation.

7.2 General Manager (Privacy Officer)

- Oversee the implementation and monitoring of privacy practices across the organisation.
- Ensure staff are trained and competent in managing personal, health, and organisational information in accordance with the policy.
- Authorises access to personal information where required and oversees responses to privacy complaints, data breaches, or serious incidents.
- Respond to breaches, complaints, and privacy incidents
- Acts as the primary point of escalation for privacy-related matters, including disclosures to regulators where required.
- Ensures this policy is implemented, communicated, and reviewed regularly.

7.3 Clinical Manager and Quality & Risk Manager

- Supports the General Manager by monitoring compliance with privacy, information governance, and data protection requirements.
- Coordinates investigation and management of privacy incidents, complaints, and data breaches in line with incident management and quality systems.
- Ensure personal, health, and sensitive information of residents/clients is collected, stored, used, disclosed, and destroyed in accordance with the policy.
- Facilitate access requests and ensure confidentiality is maintained during clinical handovers and care activities.
- Monitor staff compliance with privacy procedures in daily operations.
- Supports continuous improvement activities relating to information management and privacy controls.

7.4 All Staff, Volunteers, Students, and Contractors

- Collect, handle, store, use, and disclose personal and health information in accordance with this policy.
- Ensure information accuracy, confidentiality, and security at all times.
- Protect login credentials and not share passwords
- Use VECH systems responsibly and for authorised purposes only
- Not attempt to bypass, disable, or interfere with security controls, monitoring systems, or access restrictions.

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- Immediately report any suspected breaches of privacy or incidents involving personal information to the Privacy Officer or relevant manager.
- Attend privacy training and maintain awareness of privacy obligations as part of professional duties.

Breach of this policy may result in disciplinary action, up to and including termination of employment or contract, and may also involve mandatory reporting to external regulator required by law.