

This form explains how and why we collect and use information about our clients and seeks your consent to certain collections and uses of information about you. We are bound by the National Privacy Principles set out in the Privacy Amendment Act 2000, which highlights the need for the responsible collection and management of client information. Under this Act, ‘personal information’ is information from which your identity is apparent or can be reasonably ascertained and ‘sensitive information’ is information about your health. We are committed to protecting any personal or sensitive information we collect and must comply with certain legal requirements.

Collection of Information

The main purpose for collecting and using this information is to provide you with the best possible health care now and in the future. Almost all of the information we will gather about you relates directly to your health status. We will use the information you disclose to provide you with a comprehensive health, physical and/or nutrition assessment, and develop an appropriate individualised action plan for you. You do not have to provide any of this information, but if we are not aware of your full situation it may result in you receiving a less comprehensive standard of care.

Use and Disclosure of Information

We do not routinely disclose information to other persons or organisations, but may if necessary to prevent a serious threat to your health and safety, or when required to do so by federal, state or local law.

In order to optimise your healthcare and progress, it is beneficial for each member of your healthcare or performance team to work together towards the same goals and be aware of details of other services or treatments that you are receiving. With your consent, we may communicate information (regarding your health status, interventions, treatment, care plan, and progress) from your records with your other health care professionals. We will only do so if we deem this necessary for optimising your health and outcomes. Please list below the details of your health professionals who you grant us permission to correspond with.

	Name	Contact Details
Doctor	_____	_____
Specialist	_____	_____
Physiotherapist	_____	_____
Podiatrist	_____	_____
Massage Therapist	_____	_____
Psychologist	_____	_____
Coach	_____	_____
Other	_____	_____

Other uses and disclosures of personal information are set out below. If you **do not** want us to use your information in one of these ways please tick the box next to that item.

Uses of personal and sensitive information	NO
Communicating with the health professionals listed above	
Training and educating professional staff and students	
For research projects we may undertake	
Contacting you to keep you motivated and on track	
Informing you about our social activities	
Keeping you updated on new or changed services	
Forwarding follow-up materials from your sessions, newsletters and satisfaction surveys	

If at any time you wish to change our permitted use of your personal and sensitive information please inform us in writing.

Storage of Information

We use all reasonable endeavours to secure all personal or sensitive information and to keep this information accurate and up-to-date. Our personal/sensitive information is stored behind industry standard firewalls. Our computer data is protected by user names and passwords and hard copies are kept within a locked storage cabinet. These measures are to protect your personal information against misuse, loss, and unauthorised access, modification or disclosure.

Obtaining Access to Your Records

You have a right to know what information is being held about you. Our business will grant you access to information we hold about you, on request. This does not mean that you own the business’ records or that you can remove them. If you wish to know what information our business holds, one of our staff will be able to take you through the record and explain any technical terms or abbreviations. If information is inaccurate, you can request that it be amended. Generally, the original information must be retained for legal purposes but corrections can be added. We may deny your request to inspect your records in certain very limited circumstances. When personal information is no longer required, reasonable steps are taken to destroy or permanently de-identify the information.

Future Alterations

If and when we amend or update this policy we will post any changes on our website. We encourage you to periodically review this policy so that you remain informed as to how we are protecting your personal and sensitive information. We welcome your questions and comments regarding this policy.

I, _____ have read and fully understand the above information. I hereby give permission for Complete Performance Solutions to obtain personal information from me for the above purposes, and understand that I may revoke this consent at any time. My consent is given on the understanding that any information will be treated as confidential and only shared when it is important to my health and well-being.

(Signature)

(Date)