

# Confidentiality and consent

## Confidentiality

If an IAR-DST is to be undertaken with a consumer, prior to commencing, intake and Hub staff are required to advise the consumer of the circumstances under which their information would be shared with others.

**Suggested Script:** *'Before we start, I want you to know that anything you share with me today is confidential. I won't be sharing any of your information, or any of the detail you provide me, with anyone, without first getting your permission except if during our conversation you disclosed that you were at risk of harm, or at risk of hurting someone else, I would need to arrange a referral for urgent support for you, which would involve sharing your information. Wherever possible, I would have a conversation with you before doing this. Does that all sound okay?'*

## Overall consent

The webform seeks four separate levels of consent that will need to be discussed with the consumer. There is an '!' icon which will reveal the full text when clicked.

The first consent field is mandatory and must be selected for the person to receive service, and for the IAR document to be shared with the Mental Health service or Hubs for care provision.

Consumers have the option to consent, or not to the second, third or fourth consent questions which relate to the sharing of their data, and personal information with their broader care team.

## Consent to record Demographics

Prior to recording a person's demographics, intake and hub staff are required to obtain the caller's consent to create a file. This is both for contacts and client records.

**Suggested Script:** *'We will start by taking some basic information like your name and address so that we can create a record of our conversation. Is that okay?'*

If a caller does not want to be identified, please record the caller as Anonymous and save the data as a contact.

## Suggest consent wording

### **Consent 1 (to receive service and for sharing of service delivery information)**

**Suggested Script:** *'To give you the best care today, I need to take/I have taken notes of your information and our discussions. This information is kept safe and private and is used to determine what help you need. It is only shared with the Medicare Mental Health team, your local Primary Health Network (who manages the service) and, if you are referred onto a service, it will be shared with the service provider and other health professionals involved in your care.'*

**Option if they say No:** *'If you prefer that we do not take these notes and to share the information, we will be unable to progress the call today. (If you need urgent care, we recommend you contact Lifeline on 13 11 14 or Beyond Blue on 1300 22 4363).'*

### **Consent 2 (to share de-identified data with DoHAC and state/territory agencies)**

**Suggested Script:** *'As the funder of the Medicare Mental Health service, the Commonwealth Department of Health and Aged Care, state and territory health departments and evaluators need to know what kind of people are using the service and why. To support this, we need to tell them about the type of people that have contacted the service and share some de-identified personal information like date of birth, gender, postcode and health outcomes. We do not share your name, address or other personally identifiable details that can be linked back to you. Is it ok to share these de-identified details?'*

**Option if they say No:** *'If you prefer that your de-identified details are not shared, you understand that we will still count and include data about your use of services in summary reports that do not require personal information.'*

### **Consent 3 (survey)**

**Suggested Script:** *'After we have finished this conversation, we would like to send you a short optional survey about your experience. Your feedback will be used to improve the service. Are you OK for us to use your email or phone number to send you a link to this survey and to receive invitations to provide additional feedback in the future?'*

### **Consent 4 (to contact members of the consumer's care team)**

**Suggested Script:** *'To give you the best coordinated care, we try to work together with your other care providers such as your doctor or psychologist. We might need to contact an existing care provider to discuss your future care planning. Is this OK?'*

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