**HUMAN RESEARCH ETHICS COMMITTEE**

**of NT Health and Menzies School of Health Research**

Please complete this form when the s95a privacy guidelines apply to your research

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| **Determining application of s95a guidelines** | | | | | | | |
| 1. **Does the research proposal involve the collection, use or disclosure of personal information without the consent of the participant?** | | | | | | | |
| **Yes** | Go to next question | | | | | | |
| **No** | You do not need to apply the S95A guidelines. | | | | | | |
| 1. **Will the personal information be health information\*\*?** | | | | | | | |
| **Yes** | | Go to next question | | | | | |
| **No** | | You do not need to apply the S95A guidelines. | | | | | |
| \*\*Health information is a subset of personal information. The ‘Guidelines approved under Section 95A of the *Privacy Act 1988’* defines health information as ‘…personal information: about an individual’s health or disability at any time; about an individual’s expressed wishes regarding future health services; about health services provided or to be provided to the individual; collected whilst providing a health services; or, collected in connection with the donation or intended donation of body parts and substances. Health information includes any information collected by a health service provider during the course of providing treatment and care to an individual.’ See [Guidelines approved under Section 95A of the Privacy Act 1988 page 8](https://www.nhmrc.gov.au/guidelines-publications/e43) | | | | | | | |
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| 1. **Will the proposed study involve any of the following activities?** | | | | | | | |
| **Yes** | | Tick all that apply, and complete the required sections as indicated | | | | | |
| 1. **The collection of health information for:** | | | | | | | |
| 1. **Research relevant to public health or public safety\*\*\*** | | | | | |  | **Complete**  [**Part B**](#Sect3_PartB_S95A_collect_use_disclose) **and**  [**Part C**](#Sect3_PartC_S95A_collect) |
| 1. **The compilation or analysis of statistics relevant to public health or public safety** | | | | | |  |
| 1. **The management, funding or monitoring of a health service** | | | | | |  |
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| 1. **The use or disclosure of health information for:**   See definition: [Guidelines approved under Section 95A of the Privacy Act 1988page 36](https://www.nhmrc.gov.au/guidelines-publications/e43) | | | | | | | |
| 1. **Research relevant to public health or public safety** | | | | | |  | **Complete**  [**Part B**](#Sect3_PartB_S95A_collect_use_disclose) **and** [**Part D**](#Sect3_PartD_S95A_use_disclose) |
| 1. **The compilation or analysis of statistics relevant to public health or public safety** | | | | | |  |
| **No** | | You do not need to apply the S95A guidelines. | | | | | |
| \*\*\*The ‘Guidelines approved under Section 95A of the *Privacy Act 1988’* states that ‘…public health includes activities such as education, economics, technology, legislation and management, which protect and enhance the health of all people and to prevent illness, injury and disability. Public safety can be thought of as the condition for all people of being safe and free from danger or risks. To be relevant to public health or public safety the outcome of the research or compilation of analysis of statistics activity should have an impact on or provide information about public health or public safety.’ | | | | | | | |
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| **Part B. Applying the S95A guidelines: Collection, use or disclosure of health information** | | | | | | | |
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| 1. **From which private sector organisation(s) will the health information be sought?** | | | | | | | |
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| 1. **a) What type(s) of health information will be sought from the private sector organisation(s)** i.*e. x-ray, MRI’s, blood type, d.o.b, test results***?** | | | | | | | |
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| 1. **b) How many items of each type of information will be sought** *i.e. expected participant numbers x health information type?* | | | | | | | |
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| 1. **Why is it necessary to collect, use or disclose identified or potentially identifiable information rather than de-identified information?** | | | | | | | |
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| 1. **Why is it impracticable to obtain consent from the individual(s) for the collection, use or disclosure of health information?** | | | | | | | |
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| 1. **Why is it impracticable to obtain consent from the individual(s) for the collection, use or disclosure of health information?** | | | | | | | |
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| 1. **Who is the target population for the proposed study?** | | | | | | | |
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| 1. **What is the proposed start and end date of the study period?** | | | | | | | |
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| 1. **What is the proposed method of publication of the results of the research?** | | | | | | | |
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| *I acknowledge that health information may not be published unless in de-identified form.* | | | | | | | |
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| 1. **How long will the health information be retained?** | | | | | | | |
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| 1. **What security standards will be applied to protect the health information?** | | | | | | | |
| *Security standards will be in accordance with APP 11.* | | | | | | | |
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| 1. **Will the health information be made available to others?** | | | | | | | |
| **Yes** | | | | If yes, how will the privacy of the health information be protected? | | | |
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| **No** | | | |  | | | |
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| 1. **How will the health information be disposed of on completion of the research?** | | | | | | | |
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| 1. **Will the data be sent overseas for the purposes of the research project?** | | | | | | | |
| **Yes** | | | If yes, provide the names of the countries to which it is proposed the data will be sent and how the research project will comply with APP 8. | | | | |
| **No** | | |  | | | | |
| **Part C. Applying the S95A guidelines: Collection of health information** | | | | | | | |
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| 1. **To which APP(s) and sections of the Privacy Act does the proposal to collect health information for the purpose of research, statistical compilation or analysis, or management of a health service apply?**   **( refer to** [**https://www.oaic.gov.au/individuals/privacy-fact-sheets/general/privacy-fact-sheet-17-australian-privacy-principles**](https://www.oaic.gov.au/individuals/privacy-fact-sheets/general/privacy-fact-sheet-17-australian-privacy-principles) **for a list of the APPs)**  s 16B(2)(d)(iii) - [Privacy Act 1988 Page 83](https://www.legislation.gov.au/Details/C2017C00283) | | | | | | | |
| s 16B(2)(d)(iii)  APP 6 | | | | | Other – Please specify: | | |
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| 1. **Why does the proposed research, statistical compilation or analysis, or management of a health service substantially outweigh the public interest in adhering to APPs?** | | | | | | | |
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| 1. **Please list the aims or purpose(s) of the collection.** | | | | | | | |
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| 1. **Please list the data that will be collected for the purpose(s) of the proposed study.** | | | | | | | |
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| 1. **Please list:** | | | | | | | |
| 1. **The credentials and technical competence of the collector(s) of the data:** | | | | | | | |
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| 1. **The custodian(s) of the health information collected:** | | | | | | | |
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| 1. **All personnel within the collecting organisation(s) who will have access to the health information collected:** | | | | | | | |
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| 1. **Is there a disclosure agreement between the disclosing organisation and the collector(s) to govern limits on the use and disclosure of the collected health information?** | | | | | | | |
| **Yes** | | | | If yes, please list the terms of the disclosure agreement. | | | |
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| **Part D. Applying the S95A guidelines: Use or disclosure of health information** | |
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| 1. **To which APP(s) and sections of the Privacy Act does the proposal to use or disclose health information for the purpose of research, or statistical compilation or analysis apply?**   (refer to<http://www.oaic.gov.au/privacy/privacy-resources/privacy-fact-sheets/other/privacy-fact-sheet-17-australian-privacy-principles> for a list of the APPs)  s16B – (refer to [Privacy Act 1988 Page 83](https://www.legislation.gov.au/Details/C2017C00283)) | |
| APP 6.2(d)  s16B(2)  s16B(3) | Other – Please specify: |
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| 1. **Why does the proposed research or statistical compilation or analysis substantially outweigh the public interest in adhering to the APPs?** | |
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| 1. **Please list the aims or purpose(s) of the use or disclosure of health information.** | |
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| 1. **What are the specific uses or disclosures that will be applied to the health information during the study?** | |
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| 1. **Please list the data that will be used or disclosed for the purpose(s) of the proposed study.** | |
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| 1. **Please list:** | |
| 1. **The credentials and technical competence of those seeking to use or disclose the data:** | |
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| 1. **The custodian(s) of the health information used or disclosed:** | |
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| 1. **All personnel within the organisation(s) with access to the health information to be used or disclosed:** | |
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| 1. **Is there a disclosure agreement between the organisation that holds the health information and the user or discloser to govern limits on the use and disclosure of the health information?** | |
| **Yes** | If yes, please list the terms of the disclosure agreement. |
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| **No** |  |