DEPARTMENT OF HEALTH

Rheumatic Heart Disease Control Program web based register access policy statement

The Northern Territory Government collects and safeguards client/patient data in accordance with the *NT Information Act*. All personal information collected in the provision of a health service is considered to be 'health information' or 'sensitive information' under the *NT Information Act*.

Who can have access to the register?

- Rheumatic Heart Disease Control Program (RHD) Register Coordinators, Aboriginal Health Practitioners and registered nurses,
- Health professionals involved in the direct care of clients with a history of Acute Rheumatic Fever (ARF) or with RHD,
- Health professionals and health administration staff involved in the coordination of care for people with a history of ARF or with RHD.

What is the process to gain access to the register?

- Contact the register coordinator in your region,
- Read this policy statement thoroughly,
- If you agree with the terms set out in this document complete the attached application form and send to the register coordinator in your region, who will assess the applications,
- You will be advised of the outcome of the application,
- If successful, the register coordinator will provide you with a username and password,
- Passwords will be reset periodically and you will be advised when this happens.

In order to protect the privacy of information on the internet based register, staff from NT Government and Non-Government organisation are required to adhere to the following principles:

- Do not disclose your password and username to anyone,
- Only utilise the information stored on the register in the interest of direct care or coordination of care of clients.
- Advise the register coordinator if you see any data that is incorrect,
- Advise the register coordinator if you will be leaving your position or moving to another site,
- Do not disclose or utilise the information on the register for the purposes of research without prior approval from the NT RHD Advisory Committee or Chairperson of the Committee.

Rheumatic Heart Disease Register Access Application Fax Completed Form to: Top End: 08 8922 8277 Central Australia: 08 8951 6920			
DATE:	GIVEN NAME:	SURNAME:	TELEPHONE:
WORK LOCATION:		EMAIL:	
CARE PROVIDER ROLE		List the Clinics which you require access to:	
☐ Administrative			
Aboriginal Health Practitioner			
☐ Nurse			
☐ Pu	blic Health Nurse		
☐ Do	octor		
☐ Physician		I have read and understand the Rheumatic Heart Disease Control Program web based register access policy statement.	
☐ Paediatrician			
☐ Cardiologist		I am aware of my obligations not to divulge information to any unauthorised persons in compliance with the RHD Register Policies. YES / NO	
☐ Dentist			
☐ Other (specify)			
My employment contract ceases:			
	Date		
	I have permanent on-going employment at this site.		
APPLICANTS SIGNATURE:			
YOUR MANAGERS AUTHORISATION (Mandatory Field)			
As the Supervisor/Manager for this applicant, I authorise this applicant to have access to the RHD Register, including the requested clinic locations.			
NAME: (printed)		SIGNATURE:	DATE:
POSITION		TITLE:	PHONE:

TE RHD Register Coordinator

Phone: 08 8922 8454 Fax 08 8922 8277

Email: RHDDarwin@nt.gov.au

CA RHD Register Coordinator

Phone: 08 8951 6903 Fax: 08 8951 6920

Email: RHDAliceSprings@nt.gov.au

For more information or to arrange training please contact the register in your region