

Australian Government

Department of Families, Housing, Community Services and Indigenous Affairs

Client Consent for Collection of Personal Information

Dear Parent, Carer or Guardian, you are required to read this document to ensure you understand your rights and responsibilities regarding the collection of personal information for the purposes of accessing early intervention services under the Better Start for Children with Disability initiative before signing the Client Consent on the next page.

Better Start for Children with Disability initiative

The Better Start for Children with Disability (Better Start) aims to assist eligible children with developmental disabilities to access funding for early intervention services.

As part of the Better Start Initiative FaHCSIA will provide funds to services providers to assist eligible children and their families or carers. Payments for the services provided to you and/or your child will be made to the service provider on your behalf when they submit a claim for payment (pending the balance of available funding for your child). Therefore, information about you and your child is collected from you by the service providers for the purposes of assisting and providing you with services under the Better Start program.

FaHCSIA funds providers to assist people with a disability. Some of the information collected will assist FaHCSIA to plan and deliver services for people with disabilities.

What information is collected?

The information listed below is collected from you by your service provider. By signing this form you are giving permission for your service provider to give this information to FaHCSIA.

- Your child's name;
- Your child's date of birth, sex, address, and if you are an Australian citizen or permanent resident;
- Your child's Centrelink Customer Reference Number (CRN); and
- Your contact information, address, phone number and email address.

You can ask your service provider to give you a written copy of the information that they have shared with FaHCSIA.

Protection of information

Your service provider is obliged to observe strict privacy rules called Information Privacy Principles which are contained in the *Privacy Act 1988*. This means that they must:

- Tell you <u>why</u> they need to collect your information (i.e. to assess your eligibility for funding);
- Tell you <u>what</u> they do with your information and <u>who</u> they will give it to (e.g. FaHCSIA and any other parties FaHCSIA chooses);
- Store the information securely;
- Only use the information for the purposes they obtained it; and
- Only pass your information on when the law allows, when you have consented and when you have been advised of the other parties to whom your information may be given.

The information that is forwarded to FaHCSIA is stored in a secure manner and only a limited number of FaHCSIA staff have access to your personal information. Your information may also be provided to a contracted service provider for the purposes of research and evaluating the Better Start Initiative.

Your CRN is protected information as defined by the *Social Security Act 1991*. Your CRN is protected by the *Social Security (Administration) Act 1999* and will only be provided to FaHCSIA with your consent.

FaHCSIA provide information about people who are accessing Australian Government funded services to other government departments and researchers. When this happens, only limited information is made available and FaHCSIA removes all details that could identify you, e.g. your name. This is so no one will be able to identify the information as belonging to you.



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Client Consent Form

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The information as listed above is collected from you by the service provider is for the purposes of determining your child's eligibility to receive funding under the Better Start for Children with Disability initiative and future research and evaluation of this Initiative. The service provider will provide the information collected from you to FaHCSIA and other Contracted Service Providers.

I (name of parent, carer, or guardian)							
Of (address)							
hereby give consent for the Contracted Service Provide	•			•	to FaHCSI	A and other	_
Parent, Carer or Guardiar	n signature				/	/	
Compliance with Info	rmation Pri	vacy Princ	ciple 2				
I (name of Authorised Officer)							
Of (outlet name)							
(Agreement Schedule ID)						
 have read and explained to the personal information delivery of funding und this service outlet is recorganisation as directed Outlet's signature (Authorised office) 	on they are asked er the Better St quired, to pass d by the Austra	ed to provide tart for Childr some or all c	is collected for en with Disabil of this informati	the purpose of ity initiative; an	of determinir od	ng access to	and