PRIVACY POLICY AND CLIENT CONSENT

The Annergy Centre is committed to protecting the privacy of the personal information of its patients. We value the trust of our patients and recognize that to maintain this trust we have to be open and accountable in how we treat the information that you choose to share with us.

Definition of Personal Information

Personal information is any information that can be used to distinguish, identify or contact you as an individual. This information can include your opinions or beliefs, as well as facts about or related to you, including information about your health. Exceptions: business contact information and certain publicly available information such as your name, address and telephone numbers as published by telephone directories, are not considered personal information.

Collection, Use and Disclosure of Personal Information

The Annergy Centre collects, uses and discloses personal information about you only for purposes that a reasonable person would consider appropriate in order to deliver health care, and to coordinate health delivery, to you.

The Annergy Centre's Privacy Practices

Personal information gathered by The Annergy Centre is kept in confidence. Our staff are authorized to access personal information based only on their need to deal with the information for the reason(s) for which it was obtained. Safeguards are in place to ensure that the information is not disclosed or shared more widely that is necessary to accomplish the purpose for which it was collected. The Annergy Centre also takes measures to ensure the integrity of this information is maintained and to prevent its being lost or destroyed.

If you have any questions, concerns or complaints about The Annergy Centre's collection, use or disclosure of your personal information, then please speak with Anne Braund.

Client Consent

I have read and understand the description about The Annergy Centre's privacy practices, and I consent to the use and disclosure by the Centre of my personal information as may be necessary to accomplish the purposes for which it was collected from me.

Name (please print)

Signature

Date

Witness Name (please print) Witness Signature

Date