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POPIA POLICY AND COMPLIANCE FRAMEWORK

POPIA Policy statement and compliance framework in respect of protection of Personal Information and the Retention of Documents for Dr A Jacovides & Partners (hereinafter referred to as Midrand Medical Centre, Registration number 1994/08413/21.

Version number: v1.0

Last Updated: 29 June 2021

Protection of Personal Information Act, 4 Of 2013 POPI Policy

1. <u>INTRODUCTION</u>

Midrand Medical Centre is a company functioning as a Medical Facility, that is obligated to comply with the Protection of Personal Information Act 4 of 2013 (POPIA). POPIA requires this business to inform its patients as to the way their personal information is used, disclosed, and destroyed.

Midrand Medical Centre is committed to protecting its patients' privacy and ensuring that their personal information is used appropriately, transparently, securely and in accordance with applicable laws. The Policy sets out the way the business deals with patients' personal information and also stipulates the purpose for which such information will be used.

2. PERSONAL INFORMATION COLLECTED

Section 9 of POPIA states that "Personal Information may only be processed if, given the purpose for which it is processed, it is adequate, relevant and not excessive."

Midrand Medical Centre collects and processes patients' personal information pertaining to each patient's medical needs. For purposes of this Policy, patients include potential and existing patients. The type of information will depend on the need for which it is collected and will be processed for that purpose only.

Whenever possible, the patient will be informed as to the information required and the information which is deemed optional. Examples of personal information we collect include, but are not limited to: • The client's Identity number, full name, surname, marital status, postal and physical address, postal code, email address, Medical aid details of main members, and number and names of dependants.

Midrand Medical Centre does not collect or processes the patient's personal information for marketing purposes.

Midrand Medical Centre strives to have written agreements in place with all product suppliers, insurers, and third-party service providers to ensure a mutual understanding with regard to the protection of the patient's personal information.

Midrand Medical Centre's suppliers will be subject to the same regulations as applicable to Midrand Medical Centre.

3. THE USAGE OF PERSONAL INFORMATION

The Client's Personal Information will only be used for the purpose for which it was collected and as agreed, and with the patient's written consent.

This may include:

- · Providing medical care.
- · For billing purposes and submissions to Medical Aids.
- · Collating, assessing, and processing claims.
- Confirming, verifying, and updating clients' details.
- For purposes of claims history.
- For audit and record keeping purposes.
- Providing services to patients, to render the services requested and to maintain and constantly improve the relationship.
- We undertake to comply with legal and regulatory requirements or when it is otherwise allowed by law.

According to section 10 of POPIA, personal information may only be processed if certain conditions, listed below, are met along with supporting information for Midrand Medical Centre's processing of Personal Information:

- a. The patient has consented to the processing: consent to be obtained from patients.
- b. The necessity of processing in order to conduct an accurate analysis of the patient's medical needs.
- Processing complies with an obligation imposed by law or a contractual obligation.
- d. Processing protects a legitimate interest of the patient- it is in the patient's best interest to have full and proper medical needs analysis performed in order to provide the patient with applicable and beneficial. Medical Service.

4. <u>DISCLOSURE OF PERSONAL INFORMATION</u>

Midrand Medical Centre may:

a) not disclose a patient's personal information to any product or third-party service provider/s where no agreements are in place to ensure that there is

compliance with confidentiality and privacy conditions. Midrand Medical Centre may disclose a patient's information where it has a Professional duty to refer a patient to a Specialist or Hospital facility.

- b) also share a patient's personal information with and obtain information about patients from third parties for the reasons already discussed above.
- c) also disclose a patient's information where it has a duty or a right to disclose in terms of applicable legislation, the law, or where it may be deemed necessary to protect the rights of Midrand Medical Centre.

5. <u>SAFEGUARDING CLIENT INFORMATION</u>

It is a requirement of the POPIA to adequately protect personal information. Midrand Medical Centre will continuously review its security controls and processes to ensure that personal information of our patients is always secure. In terms of section 13 of this document, such review will take place at least annually.

6. CLIENT INFORMATION SAFEGUARDING AND SECURITY

The Midrand Medical Centre's Information Officer appointed in terms of section 55. (2) of POPIA is Dr A Jacovides, whose details are available below and who is responsible for the compliance with the conditions of the lawful processing of personal information and other provisions of POPIA.

Email address: info@midrandmedicalcentre.co.za

Contact telephone number: 011-315 2512

Please note that archived client information is stored off site by Rent a Store, which entity is also governed by POPI, access to retrieve information is limited to authorised personal.

All product suppliers, insurers and other third-party service providers will be required to sign a service level agreement guaranteeing their commitment to the Protection of Personal Information; this is however an ongoing process that will be evaluated as needed.

All current electronic files or data are backed up by Med-e-Mass which is also responsible for system security that protects third party access and physical threats. The Med-e-Mass's IT Division, under is responsible for Electronic Information Security.

7. ACCESS TO AND CORRECTION OF PERSONAL INFORMATION

All patients have the right to access the personal information that Midrand Medical Centre holds about them. Patients also have the right to ask to update, correct or delete their personal information on reasonable grounds.

Once a patient objects to the processing of their personal information has been met then, Midrand Medical Centre:

a) may no longer process said personal information; and

b) will take all reasonable steps to confirm its patients' identity before providing details of their personal information or making changes to their personal information.

8. AMENDMENTS TO THIS POLICY

Amendments to, or a review of this Policy, will take place on an ad hoc basis as circumstances dictate, or at least once a year. Where material changes take place, patients will be notified directly, or changes will be stipulated on the Midrand Medical Centre's website.

9. POLICY ON THE RETENTION & CONFIDENTIALITY OF DOCUMENTS, INFORMATION AND ELECTRONIC TRANSACTIONS

<u>Purpose</u>: To exercise effective control over the retention of documents and electronic transactions:

- (a) as prescribed by legislation; and
- (b) as dictated by business practice.

Documents need to be retained in order to prove the existence of facts and to exercise rights the Midrand Medical Centre may have. Documents are also necessary for defending legal action, for establishing what was said or done in relation to business conducted and to minimize reputational and compliance risks. There is also the need to ensure that Midrand Medical Centre's interests are protected and that own and patient's rights to privacy and confidentiality are not breached.

10. ACCESS TO DOCUMENTS

All Midrand Medical Centre's and patient's information must be dealt with in the strictest confidence and may only be disclosed, without fear of redress, in the following circumstances:

- 10.1 where disclosure is under compulsion of law.
- 10.2 where there is a duty to the public to disclose.
- 10.3 where the interests of the Company require disclosure; and
- where disclosure is made with the express or implied consent of the patient.

11. DISCLOSURE TO 3RD PARTIES

- 11.1 All employees have a duty of confidentiality in relation to information relating to our business and its patients.
- 11.2 Information on patients: Our patients' right to confidentiality is protected in the Constitution. Information may be given to a 3rd party if the patient has consented in writing to that person receiving the information.
- 11.3 Requests for company information: These are dealt with in terms of PAIA, which gives effect to the constitutional right of access to information held by the State or any person (natural and juristic) that is required for the exercise or protection of rights. Private bodies, like the Midrand Medical Centre, must however refuse access to records if disclosure would constitute an

action for breach of the duty of secrecy owed to a third party. In terms hereof, requests must be made in writing on the prescribed form to the Information Officer in terms of PAIA. The requesting party must state the reason for wanting the information and has to pay a prescribed fee.

- 11.4 Confidential company and/or business information may not be disclosed to third parties as this could constitute industrial espionage. The affairs of the Company must be always kept strictly confidential.
- 11.5 Midrand Medical Centre views any contravention of this policy very seriously and employees who are guilty of contravening the policy will be subject to disciplinary procedures, which may lead to the dismissal of any guilty party.

12. <u>DESTRUCTION OF DOCUMENTS</u>

Medical Records:

Midrand Medical Centre does not destroy medical records.

13. REVIEW OF POLICY AND COMPLIANCE FRAMEWORK

This policy, manual and compliance framework will be reviewed and amended whenever there is a change to legislation governing the POPI Act, or when it is required to amend a procedure to make it more effective, provided that a general review shall be made at least annually.

POLICY AND PROCEDURES VERSION 1.0

POLICY CREATED: 29 June 2021

POLICY REVISED: Annually

Policy approved and adopted by Director: Dr A Jacovides

Signature of CEO:

Policy approved and adopted by Information officef: Dr A Jacovides

Signature of information officer: