



# VISITOR WELLNESS CHECKS & GDPR

## Transparency Statement

Leopardstown Park Hospital make protection of your Personal Data a high priority, taking all appropriate measures to ensure your rights and data are protected. This document relates solely to the data collected during Visitor Wellness Checks and further information is available on the Privacy Notice on our website

## Visitor Wellness Checks - Purpose of Collecting Information

In accordance with Public Health guidelines the Hospital is required to take all reasonable steps to ensure the safety and wellbeing of its Residents, Visitors and Staff members. One aspect of this is for all Visitors to be participate in a Wellness Check prior to commencement of their visit to a Hospital Resident.

The information collected will be used for the following purposes:

- to comply with our health and safety obligations
- to comply with our occupational health obligations.
- for reasons of public interest regarding public health

## Visitor Wellness Checks – Data Collected

The Hospital's aim is to minimise the personal data collected and to ensure it is adequate for achieving the purpose of the Wellness Check. The data collected at the Wellness Check is in accordance with the 'COVID-19 Guidance on visitations to Residential Care Facilities V1.0 05.06.2020'. The Wellness Check gathers the following data:

- Your name and date of your visit
- It asks for confirmation that:
  - you do not have/have not had any of the symptoms\* associated with COVID-19 including a high temperature in past 14 days
  - you have not been diagnosed with confirmed or suspected COVID-19 infection in the last 14 days
  - you have not been a 'close contact' of a confirmed or suspected COVID-19 positive case in past 14 days (i.e. less than 2m for more than 15 minutes accumulative in 1 day)
  - you have not been advised to self isolate by a Doctor/GP at this time
  - you have not returned from foreign travel within past 14 days

\*Please note: these are subject to change as determined by Public Health/HSE.

## Visitor Wellness Checks – Retention & Sharing of Information

We will retain this information for no longer than two months from collection or in accordance with any legal requirements that are imposed on the Hospital.

The information collected may be used for internal contact tracing purposes and will not be shared with any third party unless legally obliged to do so.

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## Declaration

I, \_\_\_\_\_, hereby declare that I will attend Visitor Wellness Checks as required and that I will answer the questions put to me honestly, in good faith and to the best of my knowledge at that time. I further understand this information may be used when considering future visitation applications.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_