Mandatory Standards

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1. This chapter

This chapter summarises the mandatory standards in *Risk Management and CLC Practice: A guide for community legal centres in delivering legal and related services* ('the Guide'). It must be read in the context of the whole Guide. The chapter provides references to the more detailed information contained elsewhere in the Guide.

2. The Guide

2.1 See **Ch 1** for general information about the role and purpose of the Guide. The Guide sets mandatory minimum standards for CLCs that are in the National PII Scheme. These standards also apply to CLCs not in the Scheme that are full members of a state or territory CLC association unless there is a similar alternative risk management program that applies. See **1.3, 1.5**.

2.2 The standards in this Guide apply also to any branch office, to any specialist, auspiced or hosted service or project that is, in a legal sense, part of and controlled by a centre (see **7.11**) and to any centre that is part of a multi-program agency.

2.3 All workers, volunteers and management committee members must be familiar with the mandatory components of the Guide. These requirements apply to all legal and related service delivery of the centre. See in particular **3.1**.

3. Supervision of centre practice by the Responsible Person

3.1 Each centre must appoint in writing at least one Responsible Person to perform the roles set out in the Guide and must advise their state or territory PII representative of the name of this person and also of any change in their position. See the detailed information, including as to the qualifications of Responsible Persons, at **3.6.17-24**.

3.2 When the Responsible Person is unable to fulfill the role for any significant period for whatever reason, the CLC must make arrangements for another suitably qualified and experienced person to be responsible for the centre's compliance with the Guide. This should be a centre employee who is a lawyer with an unrestricted practising certificate. If this is not possible, the centre will need to negotiate with their state or territory PII representative together with the state/territory CLC association and obtain approval for an alternative arrangement. See **3.6.21-22, 7.3.5**.

4. Delegation of responsibility to a Nominated Person/s

4.1 It may be necessary and appropriate for the Responsible Person to delegate responsibility to one or more Nominated Persons with sufficient qualifications, expertise and experience. See in particular **3.6.25-29** and **7.3**. The appointment must be in writing and the Responsible Person must make clear the nature and extent of the responsibilities delegated.

4.2 A centre must advise their state or territory PII representative of the name of any person appointed as a Nominated Person and also of any change in their position. Where a Nominated Person is not a centre employee and/or not a lawyer, the centre must in addition notify their PII representative and state/territory CLC association of the responsibilities delegated to the person and the expertise and experience of the person that makes them suitable to perform those roles.

4.3 All Nominated Persons of a centre must take part in the annual cross-check process.

5. General responsibilities of CLCs

See in particular **3.6.31-4**.

5.1 An individual CLC must: support centre staff and volunteers to ensure compliance with the Guide's mandatory standards; examine policies and procedures to minimise risk of claims; have written guidelines and procedures about the type of work the centre will and will not take on and ensure that workers and management committee members are familiar with these.

5.2 A centre must provide the Responsible Person with support and resources to ensure the Guide is implemented.

5.3 A centre must recognise and respect the professional obligations of its workers. See **3.6.32-34**.

5.4 A centre must participate in any mandatory meetings and training and induction activities undertaken by the PII Committee or the PII Network.

See also the other mandatory standards listed above and below.

6. Insurance, notifications and claims

See generally **Ch 4**.

6.1 A centre must have professional indemnity insurance that satisfies the requirements of the relevant state and territory legal profession regulatory bodies and the terms of relevant legislation in the jurisdiction. See **4.9**. A centre may obtain such insurance by participating in the National PII Scheme. See **Ch 4**.

6.2 A centre must list and/or describe all its services in its PII application and in renewal applications including any specialist, auspiced or hosted project or service (see **7.11**), branch office, clinical legal education program (see **7.13**), duty lawyer service (see **7.14**) or service provided pursuant to contract, for example with Legal Aid Commissions (see **7.15**).

6.3 A centre participating in the National PII Scheme must cooperate fully in the insurance renewal process by completing all details on the appropriate form, including providing information on all the services that their CLC (including any branch offices and any specialist, auspiced or hosted services or projects) provides and disclosing any new or altered relevant information. See in particular **4.6.19-20**.

6.4 To be covered by the policy, a centre must notify the broker/insurer in writing as soon as possible and while the policy is in force about a claim or loss and about a potential claim (any fact/s or circumstance/s that might give rise to a claim). See in particular **4.7**. Wherever possible steps should be taken in the following order:

- talk to your state/territory PII representative or if that person cannot be contacted and the matter is urgent, to another state/territory representative
- discuss possible notification with the broker
- notify the broker who will forward the notification to the insurer; or, if notifying the insurer directly (for example, because of urgency) copy the broker.

A copy of any notification must be given to the PII representative. The PII representative must also be advised of the outcome of any notification/claim that is made.

6.5 A centre must not make any admissions of liability. See **4.7.14-16, 7.3.8-9**.

7. Legal Profession Regulation

See generally **Ch 5**.

7.1 A centre must comply with the requirements of the legal profession laws operating in their state or territory.

7.2 Any person practising as a lawyer at a centre must be admitted to practice and have a current practising certificate. Where relevant, they must ensure that they are on the relevant rolls of court. See **5.5.1-3**.

7.3 Where the law of a state or territory provides for 'supervised' practice and a lawyer in a centre is subject to a condition of supervised practice, the Responsible Person at the centre must ensure that reasonable supervision is provided. See **5.5.4-7**, **3.6.20** and **7.3.1-5**.

8. Trust money, controlled money and transit money

8.1 Centres that accept money from or on behalf of clients - as controlled monies or on trust - must ensure that there are adequate, appropriate and legally compliant procedures for dealing with and accounting for it. Centres must comply with all requirements of their state/territory legal profession laws and rules of their legal profession regulatory body in this regard. See **5.5.12**.

8.2 Where legal profession legislation in a particular jurisdiction provides for the receipt of transit money, a centre receiving transit money must deal with it as required by the relevant legislation. See **5.5.13-15**.

9. Immigration Assistance and Registered Migration Agents

9.1 A person, whether a lawyer or not, must not provide 'immigration assistance' unless that person is a Registered Migration Agent. See **5.5.16**. The Responsible Person must ensure that the requirements of the *Migration Act 1958* and associated regulations are met.

9.2 A centre worker or volunteer who is a Registered Migration Agent must comply with the Migration Agents Registration Authority's code of conduct. See **6.5.1**.

10. Financial counsellors

Any person practising as a financial counsellor at a centre, whether as an employed worker or volunteer, must comply with the relevant professional association code operating in the jurisdiction, be accredited by the relevant state or territory association, meet the exemption requirements under the ASIC Class Order for the *Financial Services Reform Act 2001* (Cth) and meet the exemption requirements under the *National Consumer Credit Protection Act 2009* (Cth). See **6.3**.

11. Social workers

A centre worker or volunteer who is a qualified social worker and is a member of the Australian Association of Social Workers (AASW) must comply with the codes set out by the AASW. See **6.4**. Other similarly qualified workers must also comply with relevant industry codes where they hold membership of professional associations.

12. Duty of confidentiality

12.1 Centre workers, volunteers, students and management committee members must comply with all ethical, contractual and statutory duties of confidentiality. See **6.6**. These duties are owed to all of the centre's clients including those of any specialist, auspiced or hosted service/project (see **7.11**) and branch office of the centre.

12.2 Any statutory or contractual requirements for information privacy must be complied with. See **8.20**.

13. Conflicts of interest

See generally **Ch 6**.

13.1 A centre must avoid conflicts of interest.

13.2 A centre must have a policy dealing with conflicts of interest and conflict checking. The policy must cover any branch office and any specialist, auspiced or hosted service of the centre. See **Ch 6** generally and in particular **6.7.6-7**, **8.2** and see **Appendix G** for an example.

13.3 All staff (employed and volunteer) and management must be trained to identify potential conflicts of interest and in their centre's conflict of interest policy and procedures. The subject must be covered during the orientation of new staff (employed and volunteer) and management committee members who will have any contact with clients, and reinforced regularly. See in particular **6.7.7**, **6.7.16-20**, **6.7.42-43**, **8.7.10-11**, **8.8**.

13.4 A centre must conduct a full conflict of interest check **before** giving advice (whether the advice is given in person, on the telephone, or in any other form) **or** commencing casework for a person. See **Ch 6** generally and in particular **6.7.39-66**. A full conflict check requires the client's name/s *and* the name/s of the other party or parties to be checked in the centre's client database/s. There are some very limited situations where a *full* conflict check is not required. These are set out at **6.7.51-62**.

See also **8.2**, **8.3.5-6** and **Appendix G**.

13.5 Conflicts checks must cover the whole of a centre's services including within each and across all branch offices and all specialist, auspiced or hosted projects or services (see **7.11**) if those offices, services and projects ever provide advice or casework. See in particular **6.7.41**.

13.6 If a conflict of interest is discovered, the client should be told that the centre is unable to provide a service and she or he should be referred appropriately. The centre must be mindful of the duty of confidentiality. See **6.7.66**.

13.7 A centre must record on every client file and advice record that a conflict check has been done. In the situation set out at **6.7.60**, where a conflict check was not done of the name of the other party before providing the advice, that fact and the reason/s for it should be noted. See **6.7.64-65** and **8.3.5-6**.

13.8 A centre that is a 'program' within a multi-program agency must have specific procedures to avoid and manage conflicts of interest and in particular must have: an 'information barrier' that complies with the legal profession laws operating in the relevant state or territory and that has been approved by the relevant state/territory CLC association in consultation with the PII representative; an advertised written policy that supports this information barrier; inclusion of key aspects of the policy in staff employment contracts; regular training on the policy; regular review of the effectiveness of the policy by a nominated staff member. In addition, staff can only be transferred between programs under controlled circumstances. In order to avoid perceived conflicts of interest, the CLC must have a distinctive name and its own distinctive letterhead and branding on other communications that clearly differentiates the CLC from the other programs. See **6.7.67-72**.

13.9 Where a centre obtains confidential information from a person in the course of giving that person information or a referral, the client and other party information must be entered into the Community Legal Services Information System (CLSIS) and/or other database used. See in particular **6.7.16**.

14. Practice supervision: general

14.1 CLCs funded under the Commonwealth Community Legal Services Program (CLSP) must comply with the CLSP Service Standards. See **7.2**.

14.2 The Responsible Person must ensure that adequate and appropriate **supervision** is provided to all workers and volunteers providing professional services for the centre. See **7.3**, **3.6.20**, **5.5.4-7**. This includes appropriate supervision of workers and volunteers providing services in any branch office and any specialist, auspiced or hosted service or project: see **7.11**.

14.3 A Responsible Person may delegate their supervisory responsibility to one or more Nominated Persons who have appropriate qualifications, expertise and experience. See **7.3** and **3.6.25-29**.

14.4 If the Responsible Person or other supervisor is on leave, or resigns from the centre and there is no immediate replacement, the centre must make arrangements for another suitably qualified and experienced supervisor. See in particular **7.3.9**, **3.6.21-22**.

14.5 **Checking advice and casework**

14.5.1 The Responsible Person or a Nominated Person must check all advice and casework performed by **volunteer lawyers and volunteer non-lawyers** including in any branch office and any specialist, auspiced or hosted service or project. Where a volunteer is a Nominated Person, his or her advice and casework must be checked by a Responsible Person who is a lawyer with an unrestricted practising certificate or principal certificate (however described) or other employed lawyer who has an unrestricted practising certificate. If this is not possible, the centre will need to negotiate with their state/territory PII representative and CLC association to obtain approval for an alternative arrangement. Checking must be done in a timely manner.

14.5.2 The Responsible Person or a Nominated Person must check, as a minimum, a significant proportion of advice and casework performed by **employed non-lawyers** (including seconded non-lawyers), including in any branch office and any specialist, auspiced or hosted service or project. This includes the advice and casework of a Nominated Person who is not a lawyer.

14.5.3 The Responsible Person or a Nominated Person must check, as a minimum, a sample of advice and casework performed by **employed lawyers** (including seconded lawyers), including in any branch office and any specialist, auspiced or hosted service or project, on a regular, frequent and random basis. This includes the advice and casework of the Nominated Person/s themselves and also that of the Responsible Person unless the Responsible Person is the principal or senior solicitor at the centre and has an unrestricted practising certificate.

See in particular **7.3.6-7**, **7.3.10**, **7.11**, **7.12** and **3.6.20**.

14.6 If it becomes apparent that incorrect or incomplete advice has been given to a client, the caseworker responsible must be alerted, the client must be advised of the correct advice and the new advice must be recorded. The Responsible Person should consider whether the person may possibly have a claim against the centre and the imperative not to admit liability: see **7.3.8-9** and **4.7.14-16**.

14.7 Any employee or volunteer giving advice or doing casework must have timely access to the Responsible Person or the appropriate Nominated Person. See **7.3.10**.

14.8 **File management**: for ongoing casework, the day-to-day management or supervision of each file must be the responsibility of an employed worker. See **7.3.11**.

14.9 **File review**: a centre must have a comprehensive and accessible file review system which must ensure that all files are regularly reviewed both by the responsible lawyer or caseworker and by the Responsible Person or a Nominated Person. The system must record in each file and in the system itself, the review date, the limitation date with appropriate forewarnings, any other critical dates, the employed worker responsible for the file and file reviews conducted. The system must ensure that action to be taken in a matter on a particular date, including file review, is not missed due to the absence of a particular person. See detail at **7.5** and see **8.9.5**.

14.10 **Email policy**: a centre must have a policy that deals with email use which must, as a minimum, set out the disclaimer to be used, the procedure for responding to email inquiries and requests for advice, the treatment of confidential information, obtaining consent from the client to communicate by email (where the initial contact by the client was not by email) and the requirement that emails relating to ongoing clients be printed out and placed in their file and/or stored on their electronic file. If the centre provides advice by email, the email policy should incorporate the relevant mandatory standards in this Guide that apply to the giving of advice, for example, data entry, conflict of interest checks, file opening, checking advice. The Responsible Person or Nominated Person (if any) must ensure that there is an email policy, that staff and volunteers know about it and check that it is being followed. See **7.6**, **8.5.6-8** and **Appendix F**.

14.11 **CLE and materials**: the Responsible Person or Nominated Person (if any) must check any brochures, publications or other community legal education materials produced by a centre (including specialist, auspiced and hosted services or projects and branch offices, if any) for accuracy and legal risk prior to their distribution: see **7.7**, **7.10-11**, **7.13**. The Responsible Person or Nominated Person must ensure that the content of CLE sessions is accurate and up to date and providers are aware of the law of defamation. Materials must contain a disclaimer. Workers conducting CLE sessions must not give legal advice during the course of those sessions and must make clear that information provided in the session is general legal information and not legal advice. See **7.7**.

14.12 **Checking law reform materials**: the Responsible Person or Nominated Person (if any) must check any law reform materials produced by the centre, (including specialist, auspiced and hosted services and branch offices, if any) prior to publication or distribution to ensure they are legally accurate and any risk of defamation has been considered. See **7.8**, **7.10-11**, **7.13**.

14.13 **Checking media statements**: the Responsible Person or Nominated Person (if any) must check all media releases and statements prior to their publication and make sure that workers who may speak to the media are aware of issues around defamation laws. See **7.9**, **7.10-11**.

14.14 **Branch offices**: centres operating branch offices must ensure that they comply with relevant legal profession laws and that staff in branch offices are suitably qualified, supervised and trained in and comply with any risk management processes and policies including this Guide. See **7.3.16**.

14.15 **Workloads**: the management committee and Responsible Person must ensure that centres do not take on more work than staff can reasonably and safely handle, that casework is kept within reasonable limits and that workloads are monitored to ensure they are kept at a manageable level and that adequate supervision can be provided. See **7.4**.

14.16 **Volunteers**: all new volunteers must participate in a training and orientation program and receive an orientation package that includes information about this Guide and its requirements and how to access it and about policies and procedures of the centre (at a minimum, the Conflict of Interest policy), including office procedures, advice and casework guidelines. See **7.12**. See also **7.13**, **6.7.7**, **6.7.23-30**, **6.7.73-75**, **7.6**.

15. Specialist, auspiced or hosted services and projects and auspiced CLCs

See generally **7.11** and see **3.6.20**.

15.1 A specialist, auspiced or hosted service or project that is in a legal sense part of and controlled by the centre must also comply with the mandatory components of this Guide and be supervised by the centre's Responsible Person and/or Nominated Person/s (if any). See discussion at **7.11**.

15.2 Any advice or casework done by the service/project must be opened as a record of the centre, the service/project must use centre letterhead (which may then have a subheading in the name of the service/project), service/project workers must sign correspondence over their stated position and the service/project must be included in the annual cross-check of the centre.

15.3 Where a centre is an auspiced service of a larger entity, specific procedures must be put in place to avoid and manage conflicts of interest. See 13.8 above and see **6.7.67-72**.

16. Guidelines about centre work

Each centre must have written guidelines about the type of work (advice and casework, community legal education and law reform) they will and will not take on. See **3.6.31** and **8.1**. Centres within the CLSP must also comply with the requirements of that program's service agreement in relation to conduct of services.

17. Intake – records and procedures

17.1 This section does not refer to contact with a person that only entails providing information and/or referral. The following information must be recorded for all clients at the point of initial contact: client's name (including alternative spellings/ other names used etc), contact details, date instructions received, type of matter, indication that a conflict check has been performed and, unless within the very limited exceptions at **6.7.51-60**, name/s of other parties. See **8.3**.

17.2 There must be a unique client identifier for every client. This may be a name or number/s. Where a file is opened it must have a unique file number. All advice records and files must be readily retrievable. Centres must have a central file register and a filing system that allows all client matters to be located by name and number and their status (open/closed) recorded. See **8.3.9** and **8.11**.

17.3 **CLSIS**: centres that use the Community Legal Services Information System (CLSIS) must implement the usage standards, data security and data protection measures described at **8.7**. Centres must ensure that workers and volunteers receive appropriate CLSIS training.

17.4 **Databases other than CLSIS**: centres that use databases other than CLSIS must implement the usage standards and data protection measures described at **8.8**.

18. Instructions

All legal and related problems must be recorded legibly and in sufficient detail so that the nature of the matter and client's enquiry is clear. Copies of relevant documents should be attached to the advice record. See **8.4**.

19. Advice and cases

See **8.5** and **8.6**.

19.1 A record of all advice, referral or other information given must be noted in sufficient detail on the matter file or advice record/sheet, the name of the person giving the advice must be recorded and the record must be signed and dated by the person giving the advice. Electronic records must clearly record who gave advice and the date it was given. See **8.5.3** and **8.5.5**.

19.2 Clients must be advised of all relevant limitation dates or limitation periods and this advice must be recorded. See **8.5.4**.

19.3 The professional basis of the advice must be disclosed and non-legally qualified persons must not hold themselves out as lawyers. See **8.5.1-2**.

19.4 **Email advice**: if a centre gives advice by email the mandatory standards in this Guide apply to giving the advice in the same way as to advice in person, by telephone or by written communication. This must be reflected in the centre's email policy. See **7.6** and **8.5.6-8**.

19.5 **Advice to third parties**

See **8.5.9-13** and **6.7.17-20**.

19.5.1 A centre must not provide advice to a third party (that is, to a person who requests advice on behalf of another person) unless there are exceptional circumstances, for example:

- it is a person who clearly acts with the client's consent or with clear delegated authority from an organisation
- it is a person representing the client in a professional capacity, for example, a solicitor, a social worker, welfare worker and/or financial counsellor
- the client is incapacitated or hospitalised
- the client lacks the capacity to give instructions, or
- a power of attorney or guardianship is held (and the centre has sighted these documents).

19.5.2 Before providing advice to a third party, the advisor should ascertain whether it is possible to communicate directly with the ultimate client. If it is not, there should be some recorded evidence that the advisor has used their best endeavours in the circumstances to confirm that the third party is acting in the best interests of the client and that there is no reasonable basis for thinking that there is a conflict of interest between the third party and the client.

19.5.3 If the CLC intends to provide advice, the ultimate client's name and the name/s of other parties must be obtained so a conflict check can be performed and details entered on the relevant database.

19.6 **Retention and destruction of advice records**: centres must keep every advice record for at least 7 years from the date the advice was provided. Generally after this time the record may be destroyed, without notice to the client. However, before doing so centres should consider whether in a particular instance there are circumstances warranting a longer period of retention. Before destroying any documents or copies of documents attached to an advice record a centre must consider whether those documents ought to be returned to the client, are originals and/or documents to which the client is entitled. See **8.5.14-16**. (In relation to retention and destruction of casework files, see 20.14 below and **8.15**.)

20. Files (paper and electronic records)

20.1 **Central file register**: a centre must have, maintain and use a central file register in some form. See **8.3.9**, **8.11**.

20.2 The central file register must record when a file has been opened (and see 17.2 above) and closed. See **8.9.2**, **8.14.1-2**.

20.3 A **letter of engagement** or **client/litigation agreement** must be provided to the client in circumstances where this is required by legal profession legislation operating in the relevant jurisdiction. See **8.9.3-4**, **Appendix J**.

20.4 **Record key information**

20.4.1 The following information must be recorded prominently on or at the front (eg inside the front cover) of all casework files: full name, address and telephone number of client; full name of the other party; indication that a conflict of interest check has been done; matter type; file number; limitation date (see **8.9.5**); other critical dates (if any); review dates; name of worker responsible for file. Centres should consider client confidentiality when determining what information will appear on the front of a file. See **8.9.6**.

20.4.2 The following information must be recorded in the file when a new casework file is opened: outline of the client's problem; outline of the advice given; date file opened; date instructions first received; date advice given. See **8.9.7**.

20.4.3 Where legal profession laws impose additional requirements, these must also be complied with. See **8.9.8**.

20.5 **File notes** must be made and put on the file of all telephone or face-to-face attendances with the client or any other person spoken to in relation to the matter. See **8.9.9** for details.

20.6 **Communications**: records must be made and kept of all incoming and outgoing client-related calls and other communications. See **8.9.10**.

20.7 **Documents**: copies of all correspondence, court documents, evidence and disbursements must be kept on the hard copy file and electronic records must be stored in an electronic file dedicated to the particular client matter. See **8.9.11-13**.

20.8 **Client information security**: centres must protect client confidentiality by ensuring that unauthorised (including inadvertent) access to, and unauthorised imparting of, client information does not occur. Physical and electronic files must be securely maintained. Strong passwords should be required to access any computer on a centre's network. All centre data must be backed up regularly, including but not only CLSIS data. Mobile devices (eg. smart 'phones, laptops) containing client information should be password protected. Portable data storage devices (eg. USB flash drives) containing client information should be securely managed and stored. See **8.10** and **8.7**, **8.8**.

20.9 **File movements**: if files are taken out of the centre (for example, to court) the centre must take all reasonable and practicable steps to maintain the security of the file/s, to minimise the risk of a file being damaged or lost and to maintain client confidentiality. See **8.11.**

20.10 **File ownership**: centre staff and volunteers do not own client files and must not treat them as their property. When the employment or volunteer relationship ends, the files remain with the centre. See **8.13**.

20.11 If a third party (including a funder) seeks access to a file, the Responsible Person or the centre must, absent the client's consent, claim client legal privilege on behalf of the client. See **8.13, 8.16.**

20.12 **Wills**: if a centre retains an original will of a client, it must not be kept on the file but in a secure place with a Wills Register. See **8.15.9**.

20.13 **Closing files**: before a file is closed, it must be reviewed by the Responsible Person or a Nominated Person, the client must be given written advice as described in **8.14.1** and the administrative processes described at **8.14.1-2** must be completed.

20.14 **Archiving and destruction**

20.14.1 Closed files (hard copy) must be stored in a secure environment away from public or unauthorised access, including inadvertent access. They should be archived in such a way as to allow easy access. See **8.15.1**.

20.14.2 Casework files must be kept for (at least) the period prescribed by applicable legislation (usually 7 years from the date the file is closed). Client consent must be obtained to destroy documents to which the client is entitled. Files containing instructions for wills, original wills and powers of attorney must not be destroyed. Where a file is not to be destroyed this should be clearly marked on the file. See **8.15**. (See **8.5.14-16** in relation to the retention and destruction of advice records.)

20.14.3 Client files that are in electronic form must be retained for the period prescribed by relevant legislation and if they are CLSIS records, must be retained indefinitely. A centre will need the client's consent to destroy documents to which the client is entitled that are in electronic form. See **8.15.2**.

20.14.4 A centre must comply with any legislative requirements in their jurisdiction in relation to archiving and destruction of files. See **8.15**.

20.14.5 CLSIS records must be kept permanently and not deleted from the database. See **8.15.3**.

21. Cross-checking

See **Ch 9** and **Appendix E**.

21.1 A centre must participate in an annual cross-check procedure. This includes a cross-check of any branch office and any specialist, auspiced or hosted service that is in a legal sense part of and controlled by the centre.

21.2 Any centre worker carrying out a cross-check must sign an undertaking that any client and centre information obtained during the cross-check process will be kept confidential as part of the PII process.