PROMPT WORKS STUDIO

Chaos to calm, built to be yours.

Bellbird Street Family Practice

AI use policy

Prepared for the Principal GP

Chad Maxwell · Prompt Works Studio · Toowoomba

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> **A made-up example.** Bellbird Street Family Practice and its people aren't real. The software, its terms and the rules in it are real, as read on the dates shown.

PROMPT WORKS STUDIO

Part 1: How this policy was built

This is your final policy, after our call on Thursday 5 November. Part 1 records what I found, what you decided and why, so when the Principal GP reviews it next March, the reasons behind each rule are here. Your practice had a Workflow Audit with me first, so the policy draws on that too. Part 2 is the policy your team signs.

It was written with AI (Claude) and checked by me. It isn't legal or clinical advice.

What went into it

Step	When	What it gave the policy
Workflow Audit, a full day at the practice	Tuesday 27 October	The five jobs, the AI already in use, the gaps in your mail and accounts, and the fix-now list
Staff survey, anonymous, seven of eight answered	Tuesday 27 October to Monday 2 November, five working days	Which tools your team uses, what goes into them, and what they'd like help with
Interview with the Principal GP and the Practice Manager, about an hour	Tuesday 3 November	How each job runs, who checks what, and your choices on the hard questions
Each tool's terms read on the maker's own pages	Before the call, and again on Sunday 8 November for this copy	Which tools can take patient details, and which can't (the appendix)
Written version, then our 30-minute call	Wednesday 4 November, Thursday 5 November	Your decisions below, and one round of changes

What I found, and what the policy does about it

What I found	What the policy does	Section
A free AI scribe, Heidi, ran in one consult room. Consent was asked out loud and not noted	One scribe, Lyrebird, which comes with Best Practice and keeps data in Australia. Consent is asked every consult and noted. Heidi is out	4, 12, 17
Some email replies were drafted in free ChatGPT, with names and questions in them	Free ChatGPT is out. Replies are drafted in Claude or Copilot with names and health details left out	4, 5, 7
The privacy policy doesn't mention AI or scribes	A new privacy policy and patient form from Monday 9 November, AI lines worded by your adviser	11, 15
Nobody had asked a defence organisation whether AI use is covered	A GP uses the scribe only when their defence organisation's OK is on file	3, 17
The results routine works, but outstanding requests are chased from memory	The Practice Nurse runs a weekly check of the Investigation requests screen. AI never reads a result	5, 8
About 120 letters a week are filed by hand from faxes, emailed PDFs and scans	HotDoc's Document Assistant reads letters and referrals and pre-fills the fields. A receptionist checks every field	4, 5
Two Copilot licences were barely used	Copilot is approved for plain admin email with no names or health details	4, 7

What I found	What the policy does	Section
One mailbox forwards patient email to a personal address, and two receptionists share a login	No patient mail to a personal address, and one login a person	6
Nobody was named for AI and there was no list of tools	The Practice Manager is the AI lead and keeps the register	3, 4
Busy season, April to June, with flu vaccinations	Training every March, and nothing new approved from April to June	3, 10

What your team said

Seven of the eight answered the survey, and you read the answers as written. Five use AI in some way: the free scribe, free ChatGPT for some email, and Copilot now and then. Six said the filing and the email take the most time. Four asked whether they have to tell the patient, and all wanted to know what's safe to put in. That's why section 7 lists it.

Your decisions

You made these on our call. Where you went a different way from me, the reason's recorded.

Question	My recommendation, and why	What you decided
Which scribe	Lyrebird Scribe only. It comes with Best Practice and its page says all patient data is stored in Australia, which the ACSQHC asks for	As recommended. Heidi's free-plan terms let it train on de-identified content, so Heidi is out
Consent for the scribe	Ask out loud at the start of every consult and note the answer (RACGP, Ahpra)	**Changed:** also written, on the new patient form from Monday 9 November, since your two contractor GPs have different defence organisations and you want one rule in every room
Patient email in Claude	The Audit's design: Claude reads email from patients who've said yes	**Changed:** names, dates of birth and anything about health come out before Claude sees an email. You read the RACGP's "should never enter sensitive or identifying data" strictly, and would rather lose some of the hours back than test it
Copilot in Outlook	Plain admin email only, with no names or health details, the same rule as Claude	As recommended
Letters in HotDoc's Document Assistant	Letters and referrals only. HotDoc says documents are processed in Australia, deleted within 72 hours and not used to train AI	As recommended. Results stay out of it. Switched on from Monday 9 November, when the privacy policy goes up
HotDoc Results and Lyrebird's Document Sorter	Not approved. HotDoc Results' page doesn't say where data is stored or whether it trains AI, and one filing tool is enough	As recommended

Question	My recommendation, and why	What you decided
Where AI use is recorded	A note in the patient's record each time	**Changed:** scribe use and consent go in the consult note. Other AI work goes on an AI log in Microsoft 365, so the Practice Manager reads one place and patient records stay clinical
Who's the AI lead	The Practice Manager, who runs the software day to day	As recommended

Rules for your field

- **Ahpra**, "Meeting your professional obligations when using Artificial Intelligence in healthcare" (reviewed 22 August 2024). The practitioner stays responsible, gets informed consent and checks their indemnity. Sections 3, 12, 17.
- **RACGP.** Its AI scribes fact sheet and its conversational AI page (never enter sensitive or identifying data). Sections 4, 7, 11, 17.
- **TGA**, Digital scribes (updated 16 October 2026). A scribe that only records, transcribes and drafts isn't a medical device. One that suggests diagnoses, treatments or triage is likely to be. Sections 4, 8, 17.
- **The Privacy Act.** You're covered whatever your turnover, since the OAIC says a health service provider holding health information is covered "even if they're a small business". From 10 December 2026, a business under the Act has to say in its privacy policy if a computer program makes, or does something closely tied to, a decision that could reasonably be expected to significantly affect someone's rights or interests. Human review doesn't on its own take a tool out of it. No approved tool's output is used to make or help make a decision like that, so your privacy policy doesn't need the line yet. Section 15.
- **The Fair Work Commission.** You have staff, so section 14 covers its rule on AI in case documents, in force since 20 October 2026.
- **The RACGP Standards.** Accreditation still uses the 5th edition. The 6th edition supersedes it and adds criteria for practices that use AI, and this policy is your base for them. Section 17.

What's not in it, and why

- **AI agents** that send, book or pay on their own. You don't use any.
- **AI that answers patient calls or messages.** None is on the register.
- **AI triage or anything that suggests a diagnosis or treatment.** That's clinical work (section 8).

If any of that changes, my emails at 3, 6 and 12 months cover it. I can also make changes at a yearly review for $350 inc GST.

Part 2: The policy

AI use policy, Bellbird Street Family Practice

Policy owner	Principal GP
AI lead	Practice Manager
Version	1.0
Adopted	Friday 6 November 2026
Next review	March 2027
Current copy	The practice's shared Policies folder in Microsoft 365. A printed copy may be out of date, so check the version first
Goes with	Our privacy policy, our new patient and consent form, and our RACGP Standards records

This policy was drafted with AI (Claude) by Prompt Works Studio, then checked and approved by Chad Maxwell. Bellbird Street Family Practice has read it, changed it to fit and adopted it as its own. It isn't legal or clinical advice.

1. Why we have this policy

About 4,500 patients trust us with their health. We use AI to take admin off the front desk, like filing letters and answering the practice email, and to save our GPs typing consult notes. This policy sets out how we use it so our patients' information stays private and our records stay right.

2. Who it covers, and what counts as AI

It covers everyone who works for us or with us: the GPs, including contractors, the Practice Manager, the Practice Nurse, the receptionists, and any locum or temp. It covers any device used for our work, including your own phone.

It also covers anyone we bring in to help, like our IT support. They don't use AI on patients' information unless the tool's on our register and the Principal GP has said yes in writing.

AI means any tool that writes, sums up, suggests or decides things for us. That includes chatbots like Claude, and the AI inside the software we already use: Lyrebird Scribe in Best Practice, Document Assistant in HotDoc, and Copilot in Microsoft 365. It doesn't include Best Practice's own lists and screens, fixed rules like an automatic reply, or spelling and grammar checks.

3. Who's in charge

- **The Practice Manager is our AI lead.** They keep the AI register in section 4 and the AI log in section 12, show new staff how to use our tools, answer questions, and are who you tell when something goes wrong.
- **The Principal GP is responsible** for this policy and signs it off. Each GP is responsible for the notes and letters they approve.
- **Each GP's defence organisation.** A GP uses the scribe only when their defence organisation's OK is on file with the Practice Manager.
- **Each month the Practice Manager picks five consults from each GP** and checks the consent note is in the record and the GP reviewed the note.
- **No new tool or new use goes on the register from April to June.** A request in that time waits for July.

4. Our AI register

We only use the tools on this list, on the practice's own accounts, for the jobs listed. A tool goes on the list only after the AI lead has read its terms and they say our data won't be used to train it, and the Principal GP has agreed. Want a new tool, or a new use for one on the list? Ask the AI lead.

The register can change between reviews. Every change goes on the review record, and the AI lead tells the team before anyone uses it.

Tool	Account	Approved for	Patient details?	Approved
Lyrebird Scribe, in Best Practice	The Best Practice Free plan that comes with our subscription. Each GP uses their own login	Recording a consult and drafting the note, for the GP to review. Letters only within the plan's 10 document and letter actions a month, and the GP writes the rest as now. Its diagnosis, treatment and triage suggestions aren't used	Yes, for patients who've agreed at the start of that consult. Lyrebird says all patient data is processed and stored in Australia	6 November 2026, by the Principal GP
HotDoc Document Assistant	Our HotDoc account, through the HotDoc Sidebar	Incoming letters and referrals only: pre-filling patient, date of birth, doctor, sender, category and date, and importing into Best Practice. Results and investigation reports never go through it	Yes. HotDoc says documents are processed in Australia and deleted within 72 hours. Switched on from Monday 9 November 2026	6 November 2026, by the Principal GP
Claude	The practice's Team plan, two seats: the Practice Manager and the receptionist who runs the practice email. Each uses their own login	Sorting practice email, drafting replies to routine questions from our approved answers, drafting privacy policy and consent wording, and recall message wording	No. Names, dates of birth and anything about health come out first (section 7)	6 November 2026, by the Principal GP
Microsoft 365 Copilot Chat, in Outlook and Word	Our Microsoft 365 accounts, with the two Copilot Business licences	Drafting a reply to a plain admin email, and tidying our own wording	No. Only email with no patient named and no health detail in it (section 7)	6 November 2026, by the Principal GP

Not approved:

- Heidi, the free AI scribe. Its free-plan terms let de-identified content be used to train its models, and it stores data by region, not only in Australia (appendix).
- ChatGPT, the free version. Its terms let it train on what goes in (appendix).
- Any personal or free AI account, including a personal Claude account. We can't see or set what a personal account does with what goes in (appendix).
- HotDoc Results. HotDoc's page doesn't say where the data is stored or whether it trains AI (appendix).
- Lyrebird's Document Sorter. HotDoc's Document Assistant does the filing, and one filing tool is enough (appendix).
- AI agents that send, book, pay or change things without a person each time.
- AI that answers patient calls or messages.
- Any tool that suggests diagnoses or treatments, prioritises or triages patients, or reads results. That's clinical work, and the TGA may treat the tool as a medical device (section 8).
- Any tool that would make, or help make, a decision about a person. That needs a line in our privacy policy first (section 15).

What each tool's terms say about training is in the appendix.

5. How AI is used in our work

Every job has a person who checks the AI's work before it's used. Some steps stay with people for good (section 8).

Job	Where AI helps	Who checks, and against what
Filing letters (about 120 a week)	HotDoc Document Assistant reads each faxed, emailed or scanned letter and referral and pre-fills the fields. Results and investigation reports arrive by secure messaging and Best Practice files them. Any by fax or email are filed by hand	The receptionist filing checks every field against the letter before it's imported. When the name or date of birth doesn't fit, a person decides the match. The GP then reviews every letter
Practice email (about 150 a week)	The receptionist on email takes names, dates of birth and anything about health out, then asks Claude to sort the email into fees, forms, hours, appointments and other, and to draft replies to routine questions from our approved answers	The receptionist reads every reply before it goes. Anything that might be clinical goes to a GP. A request for a copy of records goes to the Practice Manager
Practice email, plain admin	Copilot in Outlook drafts a reply to an email with no patient named and no health detail in it	The receptionist reads it before it goes
Keeping track of results	None. The Practice Nurse runs the weekly check of Best Practice's Investigation requests and Incoming reports screens by hand, and reception chases the lab or the patient	The Practice Nurse. Claude may word a generic recall message with no patient details, and a receptionist reads it before it goes
Consult notes	Lyrebird Scribe drafts the note from the consult	The GP reads and corrects every note before it's saved in Best Practice, as soon after the consult as they can. If the scribe suggests an MBS item number, the GP checks it

Job	Where AI helps	Who checks, and against what
Privacy policy and consent wording	First version drafted in Claude or Copilot in Word, from the RACGP template and our notes	The Principal GP signs off
Reviewing results and letters	None	The GP, as always

Right and wrong, in our work

Right. A patient sits down for a consult. The GP says Lyrebird Scribe turns the conversation into a note and that Lyrebird destroys the audio, and asks if that's all right. The patient says yes. The GP notes the yes in the record and starts the scribe. After the patient leaves, the GP reads the draft note, fixes a medicine's dose and a date, deletes a line the scribe added, and saves it in Best Practice.

Wrong. It's May, flu vaccines are booked solid and the email is piling up. A receptionist pastes an email from a patient into free ChatGPT. It has a name, a date of birth and a question about a result. That's two things the policy rules out: ChatGPT, and identifying health details going into a chatbot. What to do instead: take the name, date of birth and health details out and ask Claude for a plain reply, or pass a question about a result to a GP. Tell the AI lead it happened.

Wrong. A GP is running late and uses an AI scribe app that's free on their own phone. It isn't on the register, and we don't know where it keeps a recording. What to do instead: start Lyrebird Scribe in Best Practice, or type the note by hand. If a recording has already gone into the other app, tell the AI lead the same day (section 16).

6. Personal accounts

Don't use a personal AI account for our work, on your phone or anywhere else. That includes the free version of a tool we pay for, and any AI scribe app on your own phone. Everyone uses their own login to the practice's tools, and nobody shares one. No patient email is forwarded to a personal address. If you've got patient details in a personal account now, tell the AI lead. You won't be in trouble (section 16).

7. What goes in, and what never does

- Our own templates, approved answers and public information can go into any tool on the register.
- **Claude and Copilot:** no patient details at all. Take out names, dates of birth, phone numbers, addresses, Medicare numbers, and anything about a patient's health, tests, medicines or treatment. Use Copilot only on an email with no patient named and no health detail in it. Don't ask Copilot a web question with patient details in it, since Microsoft handles web searches under different terms (appendix).
- **Lyrebird Scribe:** patient details go in, for patients who've agreed at the start of that consult.
- **HotDoc's Document Assistant:** incoming letters and referrals only, from Monday 9 November 2026. Until then, letters are filed by hand. Every incoming letter goes through it, so letters about a patient who's said no to the scribe do too. The privacy policy and the new patient form tell patients so.
- **Never in any AI tool:** results, images, scans, Medicare or Centrelink details, logins and passwords, and anything a patient has asked us to keep out.
- **Patients who've said no to the scribe:** their consult isn't recorded. Mark "No scribe" in their record.
- If something goes in by mistake, tell the AI lead the same day.

8. What we never use AI for

- **Reviewing a result or letter, and deciding what happens next.** The GP is responsible for the care.
- **Anything clinical in a reply to a patient.** What a result means, or whether to come in, comes from a GP. The Practice Nurse may pass on the GP's advice.
- **Suggesting a diagnosis, a treatment or a test.** We don't use any scribe feature that does. The TGA may treat a tool that does as a medical device.
- **Triage,** or deciding who gets seen first.
- **Asking for consent.** A person explains and takes the patient's yes.
- **Matching a letter when the details don't fit.** A person decides.
- **Requests for a patient's records.** The Practice Manager handles them, with the person's identity checked.
- **Anything meant to mislead anyone.**

9. Checking AI work

- The person who checks must know the work well enough to spot a mistake. Section 5 says who.
- Check names, doses, dates and numbers against the source: what the patient said, the letter, or Best Practice. AI can make things up that look right, and a scribe can leave things out or add them.
- Don't use AI to answer a question you couldn't check yourself.
- If you're not sure an answer's right, don't use it. Ask.

10. Training

- Before anyone uses a tool on the register, the AI lead shows them how, what it's approved for, and this policy, and they sign the sign-off page. That includes locums and temps, before their first shift.
- Every March, before flu season, the whole team goes over this policy again, along with any change to the register.
- The AI lead keeps a list of who's been shown what, and when.

11. Telling our patients

- Our privacy policy says we use AI tools, which ones, what each is used for, that Lyrebird Scribe keeps patient data in Australia and HotDoc processes letters in Australia and deletes them within 72 hours, and that no patient details go into Claude or Copilot. Our adviser worded the AI lines, in the privacy policy and on the new patient form. They're live from Monday 9 November 2026, on the website and at the front desk.
- The new patient form asks for the patient's OK to the scribe in writing, from Monday 9 November 2026. It also says every incoming letter goes through HotDoc's Document Assistant. Existing patients get the form at their next visit.
- Before every consult where the scribe is used, the GP asks, whether or not the form is signed. A yes goes in the consult note. A no means no scribe, and "No scribe" goes on the record. Until a patient has been asked, their consult isn't recorded.
- A patient can change their mind about the scribe at any time. We change the record the same day.
- If a patient asks how AI was used on their care, we tell them.

12. Keeping a record

- **Scribe:** the consent, and that the scribe was used, go in the consult note. The GP's review is the note being saved.
- **Everything else:** the AI lead keeps an AI log, a sheet in the practice's Microsoft 365. Each line is the date, the tool, what it did and who checked it. It takes a line, and it's what we'd show a patient or a regulator who asked.

13. Fake voices and messages

AI can copy a voice or a face. Before we pay anything, change a supplier's bank details, release a patient's records or results, or give anyone access to our systems, we call back on a number we already have on file. That goes even when the request seems to come from a hospital, a lab, a GP here, or a patient we know well.

14. Fair Work Commission documents

If AI helps write anything for a Fair Work Commission case, the document says AI was used and how, and a person checks it and says they have. Using AI only for spelling, grammar or layout doesn't count. A witness statement is in the witness's own words. Other people's personal details and confidential case information don't go into public AI for it at all. The Commission counts paid Claude and Copilot as public AI, so that covers both of our tools.

15. Privacy and data breaches

- We're covered by the Privacy Act because we provide a health service and hold health information, whatever our turnover. Everything we collect in providing care is health information, so even a patient's email about fees counts.
- If personal information goes somewhere it shouldn't, through AI or anything else, tell the AI lead the same day. The AI lead and the Principal GP act straight away to contain it.
- The Principal GP then works out, within 30 days, whether it's likely to cause someone serious harm. If it is, and we can't stop that harm, we tell the people affected and the OAIC, as the Privacy Act requires.
- If a breach involves My Health Record, the OAIC and the System Operator are told as soon as practicable under the My Health Records Act.
- Before any tool would make, or help make, a decision that could reasonably be expected to significantly affect a person's rights or interests, our privacy policy has to say so. That rule applies from 10 December 2026. A person reviewing the output doesn't on its own take a tool out of it. No tool on our register is used that way.

16. When something goes wrong

- Tell the AI lead the same day if patient information went somewhere it shouldn't, a scribe note went in with a mistake in it, or a tool did something unexpected.
- If a tool is down, we carry on by hand as before. The GP types the note.
- Breaking this policy is handled like any other breach of our rules. Owning up to a mistake, or to AI you've already been using, won't get you in trouble. We'd rather know.

17. Our duties as a general practice

- **Consent.** We get the patient's informed consent before the scribe starts recording, and we note it, as Ahpra and the RACGP ask.
- **The GP stays responsible.** Ahpra says practitioners must apply human judgement to any AI output. We check every note before it's saved.
- **Our scribe only records, transcribes and drafts.** The TGA says a scribe that does only that isn't a medical device. If Lyrebird adds a feature that suggests diagnoses, treatments or triage, we don't use it. The AI lead reads the TGA's page again each review.
- **Data stays in Australia.** The ACSQHC says scribe data is stored and processed in Australia unless the patient explicitly agrees otherwise. We don't ask them to.
- **Indemnity.** Each GP's defence organisation's OK is on file with the Practice Manager before they use the scribe.
- **The RACGP Standards.** Accreditation still uses the 5th edition: the GP reviews every letter and result we receive (GP2.2) and patients are told how we manage their information (C6.3). The 6th edition supersedes it and adds criteria for practices that use AI. This policy, the register and the log are our base for them.

18. Reviewing this policy

The Principal GP reviews this policy each March, before flu season, and sooner if we take on a new tool, something goes wrong, or the law or guidance changes. Every review goes on the review record, even when nothing changes. When the policy changes, everyone signs again.

Review record

Fill in a row at every review, and whenever the policy or the AI register changes. The AI lead keeps this page with the policy.

Date	What was reviewed or changed	Why	Reviewed by	Team signed again?
6 November 2026	First adopted	Written after the Workflow Audit and the policy interview	Principal GP	Yes, all eight

Sign-off

Everyone who works for us signs this page: the team on the day the policy's adopted, and anyone who joins after, before they use any AI tool for our work (section 10). When the policy changes, everyone signs again on a fresh page. The AI lead keeps the signed pages.

Version signed: 1.0, adopted 6 November 2026.

By signing, I confirm I've read this policy, I've been shown the tools I'm approved to use, and I'll follow it.

Role	Name	Signature	Date
Principal GP			
Contractor GP			
Contractor GP			
Practice Manager			
Practice Nurse			
Receptionist			
Receptionist			
Receptionist			

Appendix: what each tool's terms say about training

Read on each maker's own pages before the register was approved, and again on Sunday 8 November 2026 for this copy. Before approving Claude, Copilot, Lyrebird and HotDoc, the AI lead also read the contract terms each one sits under.

Tool	What the maker says	Where, and when read
Claude, Team plan	"we will not use your inputs or outputs from our commercial products" to train its models, unless someone sends feedback with the thumbs up or down	privacy.claude.com, "Is my data used for model training?", 8 November 2026
Microsoft 365 Copilot Chat	"Your data isn't used to train foundation models", and "We won't use your data except as you instruct." Of web searches: "Web queries have their own data handling practices"	learn.microsoft.com, enterprise data protection page (updated 4 November 2026), 8 November 2026
Lyrebird Scribe	"We don't train AI on your data", and notes and transcripts are "never sold, shared, or used to train external AI models". "All patient data is processed and stored within Australia." Audio: "Speech converted to text in real time, then audio securely destroyed". The detail says "external", so it doesn't speak to Lyrebird's own models. The plan: "Best Practice Free", $0, "Included with your Best Practice subscription", 10 document and letter actions a month	lyrebirdhealth.com/au/compliance and /au/pricing, 8 November 2026
HotDoc Document Assistant	"Documents are processed in Australia, encrypted, and deleted from HotDoc within 72 hours." Documents "are not used to train AI models."	practices.hotdoc.com.au/document-assistant, 8 November 2026
Heidi, free plan (not approved)	Terms, free plans: Heidi may use de-identified content to "develop, train, test and improve our models, products and services". Privacy policy: "We do not use Health Information as an input to train" any model, and information is "stored in regional hosting environments", by region. Not approved because the free plan's terms allow that training use	heidihealth.com/en-au/legal/heidi-scribe-terms-of-use (section 4.3) and /legal/privacy-policy (sections 8 and 11), 8 November 2026
ChatGPT, free version (not approved)	"we may use your content to train our models." The opt-out is each person's own setting	help.openai.com, "How your data is used to improve model performance", 8 November 2026
Claude, personal accounts (not approved)	Chats are used to improve its models if "You choose to allow us to use your chats and coding sessions". That's each person's own privacy setting, which the practice can't see or set. Not approved for that reason	privacy.claude.com, "Is my data used for model training?" (consumer article, dated 17 March 2026), 8 November 2026

Tool	What the maker says	Where, and when read
HotDoc Results (not approved)	The page says nothing on where data is stored, whether it's used to train AI, or the price. Not approved because no terms were found	practices.hotdoc.com.au/results, 8 November 2026
Lyrebird Document Sorter (not approved)	Not approved because HotDoc's Document Assistant does the filing. Lyrebird's own Document Sorter page wasn't read on 8 November 2026	Not read