

**Northern Sydney Local Health District  
Privacy Annual Report  
July 1 2012 to June 30 2013**

The Northern Sydney Local Health District meets its privacy obligations through appropriate governance and the provision of privacy information. The Privacy Contact Officer monitors compliance with privacy legislation.

Provision of privacy information training and support to its staff is provided through:

- NSLHD privacy Intranet website:
  - NSW privacy legislation
  - NSW Health privacy policies
  - External resources
  - Provision of privacy awareness at new staff orientation

The District Privacy Contact Officer continues to provide policy and compliance support/advice to health service staff, particularly in relation to electronic health records, and access to/disclosure of personal health information and personal information. The District Privacy Contact Officer attended several privacy information and networking sessions during 2012-2013.

Privacy information is provided to consumers through an Information Privacy Internet site, as well as privacy posters and privacy leaflets.

Operational privacy issues and privacy complaints are addressed as required, either as informal complaints handled through existing complaints management procedures, or investigated via the Internal Review process.

Actions have been undertaken by NSLHD resulting from the complaints, including review of policies practices, staff counselling and further training.

The *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002* provide a formalised structure for managing privacy complaints, known as an 'Internal Review'.

During 2011-12, NSLHD received two new applications for Internal Review.

1. Application for internal review received August 2012. The applicant alleged that health information was released without the applicant's permission. The internal review concluded that there had not been an inappropriate disclosure of the applicant's personal health information.
2. Application for internal review was received January 2013. The applicant alleged that their privacy had been breached by the release of personal health information whilst an in-patient. The applicant had requested that certain information not be released to certain persons 'known' to them. This request was recorded in the clinical file and also highlighted in the clinical handover. The hospital switchboard and reception staff were not notified of the applicant's request, and therefore without malice, released the information to the 'known' person. The findings of the internal review concluded that a breach of the HPDD 5 – Retention and Security, and HPP11 – Limits on the disclosure of Health Information had occurred.

**Carol Parker**  
**Privacy Contact Officer**