

Privacy Management Annual Report 2017 - 2018

Northern Sydney Local Health District (NSLHD) meets its privacy obligations through appropriate governance and the provision of privacy information, training and support to staff. Compliance with privacy legislation continues to be provided by the Privacy Contact Officer (PCO).

The District has taken action in complying with the requirements of the *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002* by;

- Updating the privacy intranet website.
- Providing privacy information to the public on the District's internet site.
- Completion of staff undertaking mandatory training through Health Education Training Institute (HETI) Online, Privacy Module 1 and at Orientation
- Providing privacy training, which is available to staff on a one-to-one and group basis.
- Distribution of memos via area communications to educate and reiterate to staff their obligations under privacy legislation.
- The availability of key privacy resources for staff via the District's intranet and from the District's PCO. Key resources include:
 - NSW Health Privacy Manual for Health Information
 - NSW Health Privacy Management Plan
 - NSW Health Privacy Internal Review Guidelines
 - Information and Privacy Commission fact sheets
 - Links to legislation via the intranet
 - Information Privacy Leaflet for Staff
- Participating in the annual Privacy Awareness Week.
- Processing privacy internal review requests within the required timeframe.
- Progressing of the privacy prevention action plan for a proactive approach to the prevention of privacy breaches.
- The availability of contact details for the PCO both on the Intranet and Internet to provide advice on privacy matters for both staff and the public.

The NSLHD Privacy Contact Officer and other delegated staff provide policy and compliance support/advice to health service staff, particularly in relation to electronic health records, and access to, and disclosure of personal information and personal health information. The Privacy Contact Officer and other LHD representatives also attended privacy information and networking sessions during 2017 – 2018.

Operational privacy issues and privacy complaints are addressed as required, either as informal complaints handled through existing complaints handling processes, or as formal complaints under the privacy law via the Internal Review process.

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

Internal Review

Privacy law governs all aspects relating to the management of personal and personal health information held by an agency in NSW. The *Health Records and Information Privacy Act 2002* governs personal health information and the *Privacy and Personal Information Protection Act 1998* governs all other personal information and provides a formalised structure for managing privacy complaints relating to these acts.

Privacy and Personal Information Protection Act 1998 provides a formalised structure for managing privacy complaints relating to this Act and to the *Health Records and Information Privacy Act 2002*. This process is known as 'Internal Review'.

During 2017 – 2018, NSLHD received three new applications for Internal Review and one case that was carried over from the previous year and finalised before the NSW Civil and Administrative Tribunal (NCAT)

Date received: 30 October 2017

Privacy principles breached: Nil

Details: The applicant submitted a privacy internal review request alleging a breach of Health Privacy Principles 10 and 11, use or disclosure of health information. Following provision of the audit report to the applicant and investigation into the access to the health record, it was shown that a breach of the Health Privacy Principle (s) was unable to be substantiated.

Date received: 22 March 2018

Privacy principles breached: HPP 10

Details: The applicant submitted a privacy internal review request alleging a breach of Health Privacy Principle – HPP 5 Retention and Security, HPP 10 Limits on Use of Health Information, HPP 11 Limits on Disclosure of Health Information. The internal review concluded that breaches of the Health Privacy Principle 10 were substantiated, HPP 5 and HPP 11 were unable to be substantiated.

Recommendations: a formal apology was provided to the applicant, the staff involved will not access the record in future, privacy training to the unit to be provided to ensure staff have an understanding of their privacy obligations

Date received: 12 April 2018

Privacy principles breached: HPP 5, HPP 11

Details: The applicant submitted a privacy internal review request alleging a breach of Health Privacy Principle – HPP 5 Retention and Security and HPP 11 Limits on Disclosure of Health Information. The internal review concluded that breaches of both HPP 5 and HPP 11 substantiated.

Recommendations: a formal apology was provided to the applicant, a review of the placement of Electronic Patient Journey Boards and ways in which patient information can be further protected i.e. technical enhancements, patients be informed of their right to not have their name displayed on the Boards, the age of patients to be removed from the Boards

NCAT Review

NCAT review date commenced December 2016

The applicant submitted an application to NCAT in July 2016 seeking a review of the internal review decision made by the NSLHD. Following attempts at mediation, the matter progressed to hearing in November 2017. The matter was settled between both parties, reaching agreement prior to the hearing date. The matter was then formally heard on the proposed hearing date in November and withdrawn and dismissed by consent of both parties and NCAT.

Deb Willcox
Chief Executive

Carol Parker
Privacy Contact Officer