

**Northern Sydney Local Health District  
Privacy Annual Report  
1 July 2013 to June 30 2014**

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:

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

Privacy posters and privacy leaflets are available to patients/carers, and privacy information is provided through the Internet site.

Privacy complaints are investigated via the Internal Review process.

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 2013-14, NSLHD received four new applications for Internal Review.

1. Application received in July 2013, a member of the public alleging that information regarding the birth of her baby was released without permission. The internal review did not uncover any evidence that a particular person had unlawfully accessed the electronic medical record.
2. Application received in March 2014 from a member of the public alleging that a private company working within the LHD breached privacy. It was not clear following investigation how the information was collected by the private company. The LHD requested that the company change in practice in how information was collected from patients in regard to offering the patient a service. The findings of the Internal Review confirmed that a breach of IPP 5 (Retention and security), had inadvertently occurred.
3. Application for internal review received in April 2014 from a member of the public alleging a breach of privacy in relation to personal health information. The Internal Review confirmed that a breach of HPP's 5, 10 and 11 had occurred. In-house privacy training occurred and a formal apology sent to the complainant.
4. Application for internal review received in April 2014 from a member of the public alleging a breach of privacy in relation to personal health information. The Internal Review could not substantively conclude that a breach of HPP 10 and 11 had occurred, but there were inconsistencies in a statement. In-house privacy training occurred and a formal apology sent to the complainant.

*Carol Parker*  
Privacy Officer