

Privacy Management Annual Report 2016 - 2017

Northern Sydney Local Health District (NSLHD) meets its privacy obligations through appropriate governance and the provision of privacy information, training and support to staff.

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

- A privacy Intranet website:
 - NSW privacy legislation
 - NSW Health privacy policies (Privacy Manual, Privacy Management Plan and Privacy Internal Review Guidelines)
 - Privacy training
 - Links to external resources (NSW Information and Privacy Commission)
 - Provision of privacy awareness at new staff orientation, privacy training on-line as annual mandatory training or face to face training as needed
 - Privacy information leaflet for staff
 - Privacy information posters and patient information leaflets, available to patients/clients/carers

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 2016 – 2017.

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

The *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 2016 -17, NSLHD received four new applications for Internal Review.

1. Application received in August 2016, alleging a breach of HPP 5 – retention and security principles, HPP 10 – Limits on the use of health information, HPP 11 – Limits on disclosure of health information. The internal review confirmed a breach had occurred of Health Privacy Principles 5 and 10. An apology was provided to the applicant. Staff were counselled regarding their privacy obligations and access to the particular health record in question was upgraded to limited access.
2. Application received in October 2016, alleging breaches of HPPs 8, 9, 10 and 11 – amendment, accuracy, use and disclosure. The internal review concluded that there had not been a breach of the HPP 8 – Amendment or HPP 9 Accuracy. The review did find that there had been a breach of HPPs 10 and 11. Privacy sessions with staff were implemented to ensure staff understood their privacy obligations. An apology letter was provided to the applicant.

3. Application for internal review received December 2016, alleging breaches of HPPs 10 and 11. The internal review concluded there had not been a breach of the HPPs. The applicant then sought a further review in the NSW Civil and Administrative Tribunal (NCAT). The case went to mediation and was then closed following agreement by all parties.
4. Application for internal review received in February 2017, alleging breaches of HPPs 8, 9, 10 and 11 – amendment, accuracy, use and disclosure. The internal review concluded that there had not been a breach of the HPP 8, HPP 9, HPPs 10 and 11. The applicant then sought a further review in the NSW Civil and Administrative Tribunal (NCAT). The Final Orders were completed in September 2017 as per the following; supplementations to the health record be added and amendment correspondence be provided to 3rd parties involved.

Carol Parker
Privacy Officer
24 October 2017