

Privacy Management Annual Report 2019 – 2020

Statutory requirements

This report is produced by Sydney Local Health District (SLHD) in accordance with annual reporting requirements regarding privacy matters, as set out in:

- NSW Annual Reports (Departments) Regulation 2015, Clause 6, and
- NSW Annual Reports (Statutory Bodies) Regulation 2015, Clause 8.

Part 1. Compliance activities

SLHD is committed to meeting its privacy obligations under the Privacy and Personal Information Protection Act 1998 and the *Health Records and Information Privacy Act 2002* through the appropriate governance and the provision of privacy information, training and support to its staff members.

SLHD provides ongoing privacy information and support to its staff members through:

- A privacy information link on the SLHD Intranet home page which gives staff members access to:
 - SLHD Policy Compliance Procedure [SLHD PCP2017 005 Access to Health Information by Client/Patient / Authorised Representatives and Third Parties](#)
 - SLHD Policy Compliance Procedure [SLHD PCP2017 010 Access to Health Information by Police and Other Investigative Agencies](#)
 - SLHD Policy Compliance Procedure [SLHD PCP2018 003 Release of Information under Child Protection Law](#)
 - SLHD Policy Compliance Procedure [SLHD PCP2018 010 Access to Health Information Authorised by Other Laws](#)
 - SLHD Policy Compliance Procedure [SLHD PCP2017 020 Release of Information under Subpoena](#)
 - NSW Health Privacy Manual for Health Information, 2015
<http://www.health.nsw.gov.au/policies/manuals/Pages/privacy-manual-for-health-information.aspx>
 - NSW Health Privacy Intranet page <http://internal.health.nsw.gov.au/privacy/>
 - NSW State Archives and Records *General Retention and Disposal Authorities* (GDAs 17 and 21)
 - Privacy Leaflet for Staff
 - SLHD *Application to Access Personal Health Information* form
 - SLHD *Consent to Release Information* form
- Mandatory online privacy training during orientation of new staff members

- Regular face to face privacy presentations
- Privacy awareness during training of electronic systems and requirement to sign a Data Security Declaration form before access is granted
- Regular memorandums from SLHD Chief Executive
- Privacy Audits on access to information systems.

Privacy information is provided to clients/patients through:

- Privacy information on the SLHD Internet website:
<http://www.slhd.nsw.gov.au/personalInfo.html>
- Privacy Leaflet for Patients

SLHD Privacy Contact Officer has continued to provide legislative, policy and compliance support/advice to health service staff, particularly in relation to access to, and disclosure of personal health information and electronic medical records.

The Privacy Contact Officer actively participates in privacy networking and professional development, and attended privacy information and network sessions during 2019-20 which were facilitated by the NSW Ministry of Health Regulation and Compliance Unit.

Privacy complaints

Complaints may either be addressed as informal complaints, handled through existing complaints handling and investigation processes.

Alternatively, a complaint may be handled formally under privacy law via the internal review process, in accordance with the NSW privacy legislation and the *NSW Health Privacy Internal Review Guidelines*.

Appropriate action has been undertaken by Sydney Local Health District to address the outcome/s of complaints received, including review of policies and practices, staff training and disciplinary action.

Part 2. 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'.

Internal review applications carried over from 2018-2019 reporting period

Internal Reviews carried over:	2
Breaches substantiated:	1 HPP 9 Accuracy
Complaints not substantiated:	1
Matters appealed to NCAT	None
Matters awaiting judgement:	1

New internal review applications for 2019-2020 reporting period

Internal Reviews:	3
Breaches substantiated:	Particulars of the breaches substantiated: 1. There was a breach of HPP 5 and HPP11 2. There was a breach of HPP 5 and HPP11 3. There was a breach of HPP 7
Complaints not substantiated:	0
Matters appealed to NCAT	0
Matters awaiting judgement:	0

Approved for publication by:



Ms Sharon Campbell
A/ Executive Director, Clinical Governance and Risk
Sydney Local Health District

Date: 10/9/2020