



**Privacy Management Annual Report
July 2017 – June 2018**

Sydney Local Health District (SLHD) meets its privacy obligations through appropriate governance and provision of privacy health information, liaising with customers, training and support to staff. Compliance with privacy legislation continues to be provided by the A/Privacy Contact Officer.

SLHD is committed to complying with the privacy obligations under the *Privacy and Protection Act 1998* and the *Health Records and Information Privacy Act 2002*. SLHD provides the following:

- Privacy information on the SLHD intranet website – updated when required. The key resources include:
 - Health Information Privacy Leaflet for Patients
 - Health Information Privacy Leaflet for Staff
 - NSW Health Privacy Manual
 - NSW Health Privacy Intranet
 - Relevant release of health information forms
 - Relevant release of health information policies (District and State)
- Providing privacy information to the consumers on the SLHD internet website – updated when required. <https://www.slhd.nsw.gov.au/personalInfo.html>
- All clinical staff completing the mandatory My Health Learning course; Privacy Module 1.
- Providing privacy training to staff within the SLHD facilities.
- Distribution of correspondence (including memos) via SLHD communication to educate and reiterate to staff their privacy obligations.
- SLHD participating in the annual Privacy Awareness Week 2018. Activities included:
 - Health Information Privacy Leaflet for Patients Audit
 - eMR Security Audit
 - Privacy Awareness Week training sessions with a focus on the digital age conducted at each facility
 - Privacy Awareness Week quizzes for staff to complete
 - Privacy Awareness Week information stalls regarding the digital age
- Processing privacy internal review applications within the required timeframe.
- Provision of privacy awareness during training of electronic systems.
- Requirement of all staff to sign a Data Security Declaration form before access is granted to electronic systems.
- Working in consultation with SLHD Workforce Services and SLHD Internal Audit to respond appropriately to conduct issues associated with non-compliance of privacy obligations.

A/Privacy Contact Officer continues to provide policy and compliance support/advice to SLHD staff, particularly in relation to electronic health records, and access to, and disclosure of personal information and personal health information. The A/Privacy Contact Officer also attended privacy information and networking sessions during 2017 – 2018

Operational privacy issues and privacy complaints are addressed as required, either as informal complaints through existing complaints handling processes, or as formal complaints under privacy laws via the internal review process.

Following the investigation/review of a privacy complaint, actions undertaken by SLHD include review of policies and procedures, additional staff training and if necessary, disciplinary action in relation to serious privacy breaches. It is from these processes that SLHD continues to review and improve staff member's knowledge about privacy obligations and more effectively manage personal and health information.

Internal Review

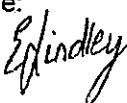

The *Privacy and Personal Information Protection Act 1998* provides a formalised structure for managing privacy complaints relating to this Act and to the *Health Records and Information Privacy Act 2002*. An individual can apply for an Internal Review to be conducted and this will be facilitated by the A/PCO.

During 2017-18, SLHD received three new applications for privacy internal review:

- o **Date received:** 22 March 2018
Privacy principles breached: Undecided
Details: the applicant submitted a privacy internal review request alleging a breach of the following health privacy principles (HPP):
 - HPP 8 Correct
 - HPP 9 AccurateTimeframe for this internal review was extended with agreement by applicant and IPC. The status was ongoing as of 30/06/18.

- o **Date received:** 24 May 2018
Privacy principles breached: Nil
Details: the applicant submitted a privacy internal review request alleging a breach of the following information protection principles (IPP):
 - IPP 12 Retention and security of personal information
 - IPP 17 Limits on use of personal information
 - IPP 18 Limits on disclosure of personal information

- o **Date received:** 31 May 2018
Privacy principles breached: Nil
Details: the applicant submitted a privacy internal review request alleging a breach of the following health privacy principles:
 - HPP 1 Lawful
 - HPP 5 Secure
 - HPP 10 and 11 Limited

<p>Elizabeth Lindley A/Privacy Contact Officer Sydney Local Health District Date: 1/11/18 Signature: </p>	<p>Dr Katherine Moore Director of Clinical Governance and Risk (HSFAC) Sydney Local Health District Date: 2/11/2018 Signature: </p>
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