



Privacy Management Annual Report 2012-13

Nepean Blue Mountains Local Health District (NBMLHD) meets its privacy obligations through appropriate governance and the provision of privacy information, training and support to staff.

NBMLHD provides ongoing privacy information and support to its staff through:

- A privacy Intranet website which provides staff with access to:
 - NSW privacy legislation
 - NSW Health privacy policies (Privacy Manual and Privacy Management Plan and Privacy Internal Review Guidelines)
 - Privacy training program
 - FAQs
 - Links to external resources including the Privacy and Information Commission
- Provision of privacy awareness at new staff orientation
- Provision of privacy training, available as either as an on-line as annual mandatory training or face to face
- Access to a privacy information brochure for staff
- Access to privacy Information posters and patient information brochures, a copy of which is issued to all patients/clients attending a Nepean Blue Mountains facility.

Nepean Blue Mountain's Privacy Contact Officer has continued to provide policy and compliance support/advice to health service staff, particularly in relation to electronic health records, and access to, and disclosure of personal health information. The Privacy Contact Officer and other key LHD representatives also attended privacy information and networking sessions during 2012-13.

Privacy information is provided to consumers through an Information Privacy Internet site at <http://www.nbmlhd.health.nsw.gov.au/Right-to-Information/Information-Privacy/Privacy-Information->.

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 privacy law via the Internal Review process.

Actions have been undertaken by NBMLHD 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 2012-13, Nepean Blue Mountains Local Health District received nine new applications for internal review:

1. Application for internal review was received on 18 July 2012, alleging a breach of HPP 11 disclosure principle. The internal review concluded that there was insufficient evidence to confirm a breach of HPP 11.
2. Application for internal review was received on 17 August 2012. Not enough information was provided to enable the complaint to be investigated and further information was requested from the applicant. This was not forthcoming and the file was closed.
3. Application for internal review was received on 3 September 2012, alleging a breach of HPP's 9 and 11, accuracy and disclosure principles. The internal review concluded that there was insufficient evidence to confirm a breach of these HPPs had occurred.
4. Application for internal review was received on 17 November 2012, alleging breaches of HPP's 2 and 10 relevance, excessiveness and accuracy and use principles. The internal review confirmed a breach of these HPP's had occurred. Processes are being reviewed to ensure privacy compliance in this area. An apology was provided to the applicant.
5. Application for internal review was received on 20 November 2012, alleging a breach of HPP 7 access to personal health information principle. The internal review confirmed a breach of this HPP as the requested health information had not been provided to the applicant "without excessive delay". Relevant staff were counselled about the privacy breach and processes for access to information. An apology was provided to the applicant.
6. Application for internal review was received on 29 November 2012, alleging a breach of HPP's 5 and 10, security and use principles. The internal review concluded that there had not been a breach of these HPPs.
7. Application for internal review was received on 6 December 2012, alleging breaches of HPP's 7 and 11 access and disclosure principles. The internal review concluded there had not been a breach of HPP11 but confirmed a breach of HPP7. Recommendations were made to improve processes for access to information and an apology was extended to the applicant.
8. An application for internal review was received on 8 February 2013, alleging a breach of HPP 11 disclosure principle. The internal review concluded there had not been a breach of this HPP.
9. An application for internal review was received on 24 April 2013, alleging a breach of HPP 11 disclosure principle. The investigation into this matter was still being finalised at the close of the reporting period.

No privacy internal reviews were carried over from 2011-12.

Lynne Paine
Privacy Contact officer
27 September 2013