



Privacy Management Annual Report 2015-2016

This report is produced by South Eastern Sydney Local Health District in accordance with annual reporting obligations regarding privacy matters, contained in the *Annual Reports (Departments) Regulation 2015*, Section 6 and *Annual Reports (Statutory Bodies) Regulation 2015*, Section 8.

South Eastern Sydney Local Health District is proudly committed to safeguarding the privacy of health and personal information and has implemented a range of measures to comply with its obligations under the *Health Records and Information Privacy Act 2002* and the *Privacy and Personal Information Protection Act 1998*.

Privacy matters are addressed from a range of different perspectives, including:

- Delivery of tailored privacy training and resources for staff
- Privacy Awareness Week presentation
- Communications to staff from the Chief Executive relating to privacy requirements
- Privacy consultation and advice to internal stakeholders
- PCO participation in privacy networking and professional development
- Provision of local and Ministry of Health privacy related information including
 - Privacy leaflet for patients and staff
 - A Privacy Management Plan
 - Mandatory HETI privacy training
 - Privacy policies and related procedures
 - Embedding privacy links in internal and external webpages.

Privacy Complaints

Reflecting the dynamic nature of privacy matters, complaints may be managed in accordance with a range of policies. Those policies include the *Privacy Internal Review Guidelines NSW Health*, the *NSW Health Complaint Management Policy* and related information management requirements. Where an application for a privacy internal review is made, efforts are made to demonstrate to an applicant the difference between the processes, to enable an informed choice in the management of their concerns.

Privacy Internal Review

South Eastern Sydney Local Health District received and completed one internal review application during the reporting period. The application related to alleged disclosure of health information in contravention of health privacy principle (HPP)11. No breach was established, as the disclosure was found to be consistent with permitted disclosure provisions of the relevant health privacy principle. No information was received indicating the matter was referred to NCAT.



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A second internal review application, carried over from a previous reporting period, was also finalised in the 2015/2016 period. That internal review found the alleged breach of HPP 10, relating to use of information was unsubstantiated, however a contravention of HPP 5, relating to security, was found. A range of remedial actions were taken in response to this breach including provision of training for staff.

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