

## Privacy Management Annual Report 2022-23

This report is produced by the South Eastern Sydney Local Health District (SESLHD) in accordance with Ministry of Health annual reporting requirements regarding privacy matters.

### Part 1. Compliance activities

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

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

- Privacy awareness training at staff and volunteer orientation.
- A privacy intranet website which provides staff with access to:
  - NSW privacy legislation
  - NSW Health Privacy Manual for Health Information
  - NSW Health Privacy Internal Review Guidelines
  - NSW Health Privacy Management Plan
  - Links to mandatory privacy training
  - Links to external resources including the NSW Information and Privacy Commission
- Guided on-line privacy training and provided on-demand, tailored face to face programs.
- Access to a privacy information leaflet for staff.
- Access to privacy information posters and patient information leaflets, a copy of which is available to all patients/clients attending SESLHD's facilities.
- Privacy information is provided to consumers through an Information Privacy Internet site at: [SESLHD Internet Privacy Statement](#).
- Privacy audits on access to information systems.
- The SESLHD Privacy Contact Officer has continued to provide policy and compliance support and 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 2022-23 which were facilitated by the NSW Ministry of Health Regulation and Compliance Unit.

## Part 2. Internal review

Privacy complaints are managed in accordance the NSW Health Privacy Internal Review Guidelines. The PPIP Act provides a formal structure for managing privacy complaints relating to this Act and to the HRIP Act. This process is known as 'internal review'.

For the 2022-23 reporting year, internal review applications and outcomes can be summarised as follows:

### Internal review applications carried over

Two privacy internal review matters were carried over from 2021-22.

Date received	25 May 2022
Privacy Principle breached	No
Details	<p>The applicant was an employee of SESLHD. The conduct complained about concerned the action of another employee, involving the alleged unauthorised audio-visual recording on a mobile phone and disclosure of personal information to other employees.</p> <p>The applicant complained that the agency had breached Information Protection Principle(s) 1, 3, 4, 8 and 10 in relation to their personal information.</p> <p>The agency undertook an investigation and concluded that no breach had occurred.</p>
Further review in NCAT	NIL

Date received	17 May 2022
Privacy Principle breached	No
Details	<p>The applicant was a former employee of SESLHD. The conduct complained about concerned the allegations of unauthorised disclosure of personal information to Healthshare NSW, providing inaccurate information for inclusion on the Service Check Register and unauthorised disclosure of information provided by the applicant under the <i>Public Interest Disclosures Act 2002</i> to another agency.</p> <p>The applicant complained that the agency had breached Information Protection Principle(s) 9, 10 and 11 in relation to their personal information.</p> <p>The agency undertook an investigation and concluded that no breach had occurred.</p>
Further review in NCAT	<p>YES.</p> <p>The applicant withdrew the NCAT application and the proceedings were dismissed on 13 December 2022.</p>

## Internal review applications received 2022-23

During 2022-23, SESLHD received one application for Internal Review.

Date received	9 February 2023
Privacy Principle breached	Yes
Details	<p>The applicant requested an amendment to the medical record of her deceased brother in relation to the date/time of his death and his residential address. The applicant was the authorised representative of the deceased for the purposes of the HRIP Act.</p> <p>The applicant complained that the agency had breached Health Privacy Principle(s) 2 and 9 in relation to the deceased's health information.</p> <p>The agency undertook an investigation and concluded that breaches had occurred. The deceased's medical record was amended in accordance with the applicant's request.</p>
Further review in NCAT	NO.

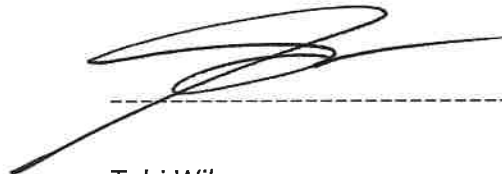
Report prepared by:



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*Privacy Contact Office*

Date: 9 October 2023

Approved by:



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*Tobi Wilson*  
*Chief Executive*

Date: