

Privacy Management Annual Report 2021-22

This report is produced by Illawarra Shoalhaven Local Health District in accordance with Ministry of Health annual reporting requirements regarding privacy matters.

Part 1. Compliance activities

Illawarra Shoalhaven Local Health District 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 appropriate governance and the provision of privacy information, training and support to staff.

The Illawarra Shoalhaven Local Health District provides ongoing privacy information and support to its staff through:

- (a) guided online privacy training for all new staff during their orientation period;
- (b) a privacy intranet website which provides staff with access to:
 - a. NSW privacy legislation
 - b. NSW Health Privacy Manual for Health Information
 - c. NSW Health Privacy Internal Review Guidelines
 - d. NSW Health Privacy Management Plan
 - e. links to mandatory privacy training
 - f. answers to privacy related frequently asked questions;
- (c) guided online privacy training and provided on-demand, tailored face to face programs;
- (d) access to a privacy information leaflet for staff;
- (e) access to privacy information posters and patient information leaflets, a copy of which is available to all patients/clients attending all Illawarra Shoalhaven Local Health District facilities and services;
- (f) regular information sharing on staff accountabilities and the Illawarra Shoalhaven Local Health District's expectations in relation to privacy through the Chief Executive newsletter ("The Rounds") and at Chief Executive Forums;
- (g) privacy information is provided to consumers through an Information Privacy Internet site at <https://www.islhd.health.nsw.gov.au/privacy-policy>; and
- (h) privacy audits on access to information systems.

The 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 2021-2022 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 *Privacy and Personal Information Protection Act 1998* provides a formal 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'.

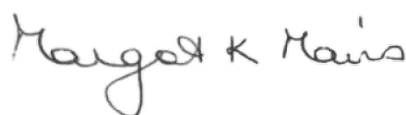
For the 2021-2022 reporting year, internal review applications and outcomes can be summarised as follows:

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|----|---|----|
| 1. | Number of internal review applications carried over from the previous reporting year: | 0 |
| 2. | Number of internal review applications received in the current reporting year: | 4 |
| 3. | Number of internal reviews where at least one breach of a privacy principle has been found: | 1 |
| 4. | Number of internal reviews where no breach of a privacy principle has been found: | 3 |
| 5. | Number of internal reviews appealed in the NSW Civil and Administrative Court (NCAT): | 1 |
| 6. | Number of NCAT matters where judgement found in favour of the agency: | 1* |
| 7. | Number of NCAT matters where judgement found in favour of the applicant: | 0 |
| 8. | Number of NCAT matters awaiting judgement: | 1* |

*The judgement found in favour of the agency was subsequently appealed by the applicant to the NCAT's Internal Appeal Panel. The agency awaits the judgement of the Internal Appeal Panel in this matter.

Report prepared by:

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Lawyer and Privacy Contact Officer

Chief Executive

Date: 16.9.22

Date: 27.09.22