

## Privacy Management Annual Report 2013-2014

South Western Sydney Local Health District (LHD) continues to meet its privacy obligations through appropriate governance and the provision of privacy information, training and support to staff. Oversight for monitoring compliance with privacy legislations is provided by the Director Medical Services with assistance from the Privacy Contact Officer.

South Western Sydney LHD provides ongoing privacy information and support to the general public and staff through:

- A website which provides access to:
  - NSW privacy legislation
  - NSW Health privacy policies (Privacy Management Plan and Privacy Manual)
  - External resources including the NSW Information and Privacy Commission
- Provision of privacy awareness at staff orientation
- Provision of privacy awareness during training for access to electronic systems.
- A privacy declaration form is signed by all employees who are granted access to South Western Sydney LHD systems, acknowledging their privacy obligations
- Provision of privacy training, available as either an online or face to face training programs
- Access to privacy information posters and patient information brochures, copies of which are available for patients/clients attending as well as staff working in South Western Sydney Local Health District facilities/services
- All Medical Record Departments have a designated officer with privacy training who can assist with enquires and provide advice when required

The SWSLHD Privacy Contact Officer provides policy and compliance support and advice to staff and patients particularly in relation to electronic health records and access to, and disclosure of personal health information.

Information security compliance is monitored by random auditing of electronic records and staff access to programs.

### Internal Review

The *Privacy and Personal Information Protection Act, 1998* provides a framework 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'.

No applications were received for an internal review during this reporting period. However, SWSLHD undertook one self-initiated internal review.

The issue concerned the possible breach of the Health Records and Information Privacy Act 2002. The following Health Protection Principle was applicable: HPP5: Retention and security.

The internal review confirmed a breach of HPP 5 had occurred. Processes and systems are being to improve privacy compliance in this area.