



New South Wales

Health Records and Information Privacy Bill 2002

Explanatory note

This explanatory note relates to this Bill as introduced into Parliament.

Overview of Bill

The purpose of this Bill is to promote fair and responsible handling of health information by:

- (a) protecting the privacy of an individual's health information that is held in the public and private sectors, and
- (b) enabling individuals to gain access to their health information, and
- (c) providing an accessible framework for the resolution of complaints regarding the handling of health information.

The Bill applies to both public sector agencies and private sector persons who are health service providers or who collect, hold or use health information. The Bill establishes 15 Health Privacy Principles to be observed by such public sector agencies and private sector persons. These principles relate to the following matters:

- (a) the purposes of the collection of health information,
- (b) the relevance, extent, accuracy, completeness and currency of health information collected,
- (c) the collection of health information from the individuals concerned,
- (d) making an individual from whom health information is collected aware of certain matters,
- (e) the retention and security of health information,
- (f) enabling an individual to ascertain certain information about health information held by an organisation,
- (g) access to health information,
- (h) amendment of health information,
- (i) the continuing relevance, accuracy, currency and completeness of health information,
- (j) the use of health information,
- (k) the disclosure of health information,
- (l) assigning and using identifiers for individuals,
- (m) enabling individuals to enter into transactions or receive health services anonymously,
- (n) the transfer of information out of New South Wales or to Commonwealth agencies,
- (o) the computerised linkage of health records.

The Bill also sets out some specific requirements for private sector persons who hold health information relating to the retention of health information, and access to and amendment of health information by the individual to whom the information relates.

The Bill provides for the making of health privacy codes of practice by the Minister to regulate specified matters. These health privacy codes of practice may modify the Health Privacy Principles and the other specific requirements for private sector persons.

The Bill provides for the making of complaints about the handling of health information by public sector agencies or private sector persons to the Privacy Commissioner and ultimately to the Administrative Decisions Tribunal, although there are different procedures for complaints against public sector agencies and private sector persons.

Outline of provisions

Part 1 Preliminary

Clause 1 sets out the name (also called the short title) of the proposed Act.

Clause 2 provides for the commencement of the proposed Act on a day or days to be appointed by proclamation.

Clause 3 sets out the purpose and objects of the proposed Act.

Clause 4 contains definitions of terms used in the proposed Act. In particular, it defines *organisation*, *private sector person* and *public sector agency*. *Organisation* means a public sector agency or a private sector person, and includes individuals. Some organisations are *health service providers* (defined to mean an organisation that provides a health service, but not to include an organisation exempted by the regulations, or an organisation that merely arranges for a health service to be provided by another organisation).

Clause 5 defines *personal information*, and **clause 6** defines *health information*.

Clause 7 deals with the circumstances where individuals are incapable of doing an act authorised, permitted or required under the proposed Act, such as making a request for access to health information or consenting to disclosure of health information. The clause provides that an *authorised representative* may do such an act on behalf of the individual, and that an authorised representative may not do such an act on behalf of an individual if the individual is capable of doing that act.

The term *authorised representative* is defined in **clause 8**. **Clause 9** sets out when an organisation “holds” information for the purposes of the proposed Act, and **clause 10** provides that an organisation does not “collect” information for the purposes of the proposed Act if the receipt of the information is unsolicited.

Part 2 General operation of Act

Clause 11 requires organisations to which the proposed Act applies to comply with the Health Privacy Principles and with any health privacy code of practice or a provision of Part 4 that is applicable to the organisation.

The 15 Health Privacy Principles (HPPs) are set out in Schedule 1 to the proposed Act. They deal with matters such as collection and retention of health information, access to and amendment of health information, and inclusion of health information in a computerised health records linkage system.

Part 4 of the proposed Act sets out some additional provisions specifically for private sector persons. These specific provisions assist the operation of the Health Privacy Principles relating to retention, access and amendment of health information by:

- (a) setting out detailed requirements for retention, disposal and transfer of health information by private sector persons who are health service providers, and
- (b) setting out procedures to be followed by private sector persons and individuals seeking access to or amendment of health information held by private sector persons.

Health privacy codes of practice are codes made under Part 5 of the proposed Act by the Minister administering the proposed Act. The Health Privacy Principles and the specific provisions in Part 4 may be modified in their application to organisations by health privacy codes of practice made by the Minister. Health privacy codes of practice may also regulate the collection, retention, use, disclosure, transfer and linkage of, and procedures for dealing with, health information held by organisations.

Clause 12 provides that the Act binds the Crown.

Clauses 13–17 provide exemptions for certain persons, authorities and activities from certain provisions of the proposed Act or the HPPs. The exemptions relate to the following matters:

- (a) courts and tribunals in the exercise of their judicial functions (clause 13),
- (b) individuals conducting their personal, family or household affairs (clause 14),
- (c) the news activities of news media (clause 15),
- (d) the collection, use and disclosure of health information within group practices, (a *group practice* being a group of individuals who provide a health service at shared premises, maintain a shared reception and maintain combined or joint records) (clause 16),
- (e) the functions of the Independent Commission Against Corruption, the Police Service, the Police Integrity Commission, the Inspector of the Police Integrity Commission, the staff of the Inspector of the Police Integrity Commission and the New South Wales Crime Commission (clause 17).

Other exemptions are set out in the Health Privacy Principles in Schedule 1.

Clause 18 prevents an exemption under the proposed Act from authorising an organisation to any thing that it is otherwise prohibited from doing.

Clause 19 sets out how the Health Privacy Principles apply to health information collected before the commencement of Schedule 1 (the Schedule containing the HPPs).

Part 3 Provisions for public sector agencies

The Part deals with the application of the proposed Act to public sector agencies.

Clause 21 establishes a complaints procedure for complaints about the contravention of a Health Privacy Principle or a health privacy code of conduct by public sector agencies. Complaints are dealt with in the same way that a complaint under the *Privacy and Personal Information Protection Act 1998* is dealt with. The complainant can make a complaint to the Privacy Commissioner under that Act, who can investigate and report on the complaint, or the complainant can apply to the public sector agency for an internal review under that Act, followed by review by the Administrative Decisions Tribunal.

Clauses 20 and 22 deal with the relationship between the proposed Act, the *State Records Act 1998* and the *Freedom of Information Act 1989*.

Part 4 Provisions for private sector persons

The Part contains specific provisions for private sector persons that are additional to, and assist the operation of, the Health Privacy Principles in their application to private sector persons.

Division 1 General

The Division deals with two general matters. **Clause 23** provides a general exemption from the requirements of Part 4 for private sector persons who are required or authorised not to comply with such a provision. There are similar exemptions to several of the Health Privacy Principles, set out in the relevant Health Privacy Principle in Schedule 1.

Clause 24 provides for the issuing of guidelines by the Privacy Commissioner with respect to matters dealt with in Part 4 for private sector persons, for the purpose of assisting them to comply with the Health Privacy Principles and this Part.

Division 2 Retention of health information

Clause 25 requires health service providers to retain health information relating to an individual for 7 years from the last occasion on which a health service was provided to the individual by the health service provider. If the health information was collected while the individual was under the age of 18 years, the health service provider must retain the health information until the individual has attained the age of 25 years.

Division 3 Access to health information

The Division (**clauses 26–32**) sets out procedures by which an individual can request and be given access to health information relating to the individual held by a private sector person. The private sector person may refuse to give the individual access on specified grounds (set out in clause 29).

If the private sector person refuses to give the individual access to the health information on the ground that providing access would pose a serious threat to the life or health of the individual, the individual may request the private sector person to give access instead to a registered medical practitioner nominated by the individual.

Division 4 Amendment of health information

The Division (**clauses 33–37**) sets out procedures by which an individual can request amendment of health information relating to the individual held by a private sector person if the individual claims that the health information is inaccurate, out of date, incomplete or misleading. The private sector person may refuse to amend the health information on specified grounds (clause 34 (2)).

If the private sector person refuses to amend the health information, the individual may require the private sector person to add a notation to the health information specifying the respects in which the individual claims the information is incomplete, incorrect, out of date or misleading, and setting out such information as the individual claims is necessary to complete the information or to bring it up to date.

Part 5 Health privacy codes of practice

The Part (**clauses 38–40**) makes provision for health privacy codes of practice to be made by the Minister. A health privacy code of practice may regulate any of the following matters:

- (a) the collection or retention of health information held by organisations,
- (b) the use or disclosure of health information held by organisations,
- (c) the transfer by organisations of health information from New South Wales to a jurisdiction outside New South Wales or to a Commonwealth agency,
- (d) the electronic or computerised linkage of health information held by organisations,
- (e) the procedures for dealing with health information held by organisations.

Health privacy codes of practice can apply to specified classes of health information, or to specified organisations or classes of organisations, or to any specified activity or class of activity.

A health privacy code of practice may modify the application to any organisation of any Health Privacy Principle or any provision of Part 4.

Part 6 Complaints against private sector persons

Division 1 General

The Division (**clauses 41–47**) allows an individual to make a complaint to the Privacy Commissioner about an alleged contravention of a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice by a private sector person.

A complaint against a private sector person is made to the Privacy Commissioner, who makes a preliminary assessment of the complaint to decide whether or not to deal with the complaint. If the Privacy Commissioner decides to deal with the complaint, the Privacy Commission carries out an assessment to determine if there is a *prima facie* case of contravention of a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice.

If the Privacy Commissioner is satisfied that there is such a prima facie case of contravention, the Privacy Commission can deal with the complaint by:

- (a) endeavouring to resolve the complaint by conciliation, or
- (b) further investigating the complaint and making a report, or
- (c) determining that the complaint has been resolved to the Privacy Commissioner's satisfaction.

If the Privacy Commissioner decides that the matter has been resolved or conducts a conciliation, no further action is to be taken by the Privacy Commissioner (whether or not the parties reach an agreement at conciliation).

If the Privacy Commissioner makes a report about the complaint, the complainant can apply to the Administrative Decisions Tribunal to hold an inquiry into the complaint under Division 2.

Division 2 The functions of the Administrative Decisions Tribunal

The Division (**clauses 48–57**) provides for the Administrative Decisions Tribunal to conduct an inquiry into a complaint about which the Privacy Commissioner has made a report. After holding an inquiry, the Tribunal may decide to take no action on the matter, or it can make a number of orders, including the following:

- (a) an order requiring the respondent to the complaint to pay to the complainant damages not exceeding \$40,000 if the respondent is a body corporate, or not exceeding \$10,000 in any other case, by way of compensation for any loss or damage suffered by reason of the respondent's conduct,
- (b) an order requiring the respondent to refrain from any conduct or action in contravention of a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice,
- (c) an order requiring the performance of a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice,
- (d) an order requiring health information that has been disclosed to be corrected by the respondent,
- (e) an order requiring the respondent to take specified steps to remedy any loss or damage suffered by the complainant.

However, the Tribunal make an order for payment of damages only if:

- (a) the application relates to conduct that occurs after the end of the 12-month period following the date on which Schedule 1 commences, and

- (b) the Tribunal is satisfied that the applicant has suffered financial loss, or psychological or physical harm, because of the conduct of the respondent.

A person may appeal against an order or decision made by the Tribunal to an Appeal Panel of the Tribunal.

Part 7 Privacy Commissioner

Clause 58 confers functions on the Privacy Commissioner relating to the following matters:

- (a) promoting the adoption of, and monitoring compliance with, the Health Privacy Principles and the provisions of Part 4,
- (b) preparing and publishing guidelines relating to the protection of health information and other privacy matters, and promoting the adoption of such guidelines,
- (c) providing assistance to organisations in adopting and complying with the Health Privacy Principles and the provisions of Part 4,
- (d) conducting research, and collecting and collating information, about any matter relating to the protection of health information and the privacy of individuals,
- (e) providing advice on matters relating to the protection of health information and the privacy of individuals,
- (f) receiving, investigating and conciliating complaints about alleged contraventions of Health Privacy Principles, provisions of Part 4 or health privacy codes of practice.

Clauses 59–61 provide the Privacy Commissioner with the same powers to make inquiries and conduct investigations that the Privacy Commissioner has under the *Privacy and Personal Information Protection Act 1998*, in order to enable the Privacy Commissioner to exercise the Privacy Commissioner's functions under the proposed Act.

Clause 62 enables the Privacy Commissioner to make a written direction exempting an organisation from a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice, or modifying the application of such a Principle, provision or code. However, such a direction may only be made if it is in the public interest, and after consultation with the Attorney General and approval by the Minister.

Clause 63 empowers the Privacy Commissioner to require an organisation to provide the Privacy Commissioner with information:

- (a) concerning the arrangements made by the organisation to enable the organisation to comply with the Health Privacy Principles, the provisions of Part 4 and any health privacy code of practice applying to the organisation, and
- (b) demonstrating the means by which the organisation is implementing such arrangements.

Clause 64 enables the Privacy Commissioner to issue guidelines with respect to certain matters, and provides for the preparation and making of guidelines. The Privacy Commissioner cannot issue guidelines unless the guidelines are approved by the Minister.

Clauses 65–67 provide for the Privacy Commissioner to refer complaints to the Health Care Complaints Commission, the Commonwealth Privacy Commissioner (that is, the Office of the Privacy Commissioner established by the *Privacy Act 1988* of the Commonwealth), and other persons or bodies.

Part 8 Miscellaneous

Clauses 68 and 69 create new offences relating to corrupt disclosure of health information by public officials and offering to supply health information corruptly disclosed. These offences mirror existing offences in the *Privacy and Personal Information Protection Act 1998*. **Clause 70** creates offences prohibiting the use of intimidation, threats or misrepresentations to persuade an individual to refrain from making or pursuing a request, complaint or application under the proposed Act, or to give a consent (or do, without consent, an act for which consent is required) under the proposed Act.

Clause 71 prevents the proposed Act from giving rise to any civil or criminal liability except to the extent expressly provided by the proposed Act. For example, a contravention of the Act does not give rise to any action for a breach of statutory duty.

Clause 72 protects persons acting in good faith under the proposed Act from any action for defamation or breach of confidence or any criminal liability.

Clause 73 enables an organisation to charge a fee for certain matters, such as giving an individual a copy of health information. The fee must not exceed any fee prescribed by the regulations.

Clause 74 provides that offences against the proposed Act are to be dealt with summarily before a Local Court.

Clause 75 empowers the Governor to make regulations for or with respect to specified matters.

Clauses 76 and 77 are formal provisions giving effect to Schedule 2 (Savings and transitional provisions) and Schedule 3 (Amendment of the *Privacy and Personal Information Protection Act 1998*).

Clause 78 provides for the Minister to review the proposed Act as soon as possible after 5 years from the date of assent to the proposed Act. A report on the outcome of the review is to be tabled in Parliament.

Schedule 1 Health Privacy Principles

The Schedule contains the 15 Health Privacy Principles.

Schedule 2 Savings and transitional provisions

The Schedule contains savings and transitional provisions consequent on the enactment of the proposed Act.

Schedule 3 Amendment of Privacy and Personal Information Protection Act 1998

The Schedule contains various amendments to the *Privacy and Personal Information Protection Act 1998* (the **PPIP Act**). The amendments set out in **Schedule 3 [2], [3], [5], [12]–[20] and [22]–[25]** are consequential to the enactment of the proposed Act. The other amendments are miscellaneous amendments to the PPIP Act.

Schedule 3 [4] and [11] make it clear that the requirements in section 15 of the PPIP Act relating to alteration of personal information held by public sector agencies apply despite anything to the contrary in section 25 of the PPIP Act or section 21 of the *State Records Act 1998*. Section 25 of the PPIP Act is a general exemption that authorises public sector agencies not to comply with specified provisions of the PPIP Act if non-compliance is authorised under an Act or any other law (including the *State Records Act 1998*). Section 21 of the *State Records Act 1998* prohibits a person from (among other things) altering a State record.

Section 19 (1) of the PPIP prevents a public sector agency from disclosing certain personal information unless the disclosure is necessary to prevent a “serious or imminent threat” to the life or health of the individual concerned or another person. **Schedule 3 [6]** alters “serious **or** imminent threat” to “serious **and** imminent threat” in section 19 (1), for consistency with the wording of section 18 (1) (c) of the PPIP Act.

Section 19 (2)–(5) of the PPIP Act prevent a public sector agency from disclosing personal information to any person or body who is in a jurisdiction outside New South Wales except in specified circumstances. **Schedule 3 [1], [7], [8] and [10]** extend the prohibition to disclosure to Commonwealth agencies, which may be located within New South Wales. **Schedule 3 [9]** removes some redundant matter from section 19.

Schedule 3 [21] inserts two new sections into the PPIP Act. Proposed section 66A protects persons acting in good faith under that Act from any action for breach of confidence or defamation and from any criminal liability. This provision reflects a similar provision in the proposed *Health Records and Information Privacy Act 1998* (clause 72) and in the *Freedom of Information Act 1989*.

Proposed section 66B enables a public sector agency to charge a fee for specified matters, such as giving an individual a copy of health information.



New South Wales

Health Records and Information Privacy Bill 2002

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New South Wales

Health Records and Information Privacy Bill 2002

No. , 2002

A Bill for

An Act to make provision for the protection of health records and information; and
for other purposes.

The Legislature of New South Wales enacts: 1

Part 1 Preliminary 2

1 Name of Act 3

This Act is the *Health Records and Information Privacy Act 2002*. 4

2 Commencement 5

This Act commences on a day or days to be appointed by proclamation. 6
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3 Purpose and objects of Act 8

(1) The purpose of this Act is to promote fair and responsible handling of health information by: 9
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(a) protecting the privacy of an individual's health information that is held in the public and private sectors, and 11
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(b) enabling individuals to gain access to their health information, and 13
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(c) providing an accessible framework for the resolution of complaints regarding the handling of health information. 15
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(2) The objects of this Act are: 17

(a) to balance the public interest in protecting the privacy of health information with the public interest in the legitimate use of that information, and 18
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(b) to enhance the ability of individuals to be informed about their health care, and 21
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(c) to promote the provision of quality health services. 23

4 Definitions 24

(1) In this Act: 25

authorised representative has the meaning given by section 8. 26

Commonwealth agency means an entity referred to in paragraph (a)–(h) of the definition of *agency* in the *Privacy Act 1988* of the Commonwealth. 27
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<i>Commonwealth Privacy Commissioner</i> means the Office of the Privacy Commissioner established by the <i>Privacy Act 1988</i> of the Commonwealth.	1
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<i>exercise</i> a function includes perform a duty.	4
<i>function</i> includes a power, authority or duty.	5
<i>generally available publication</i> means a publication (whether in paper or electronic form) that is generally available to members of the public, but does not include any publication or document declared by the regulations not to be a generally available publication for the purposes of this Act.	6
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<i>guidelines</i> means guidelines issued by the Privacy Commissioner as referred to in section 64.	11
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<i>health care</i> means any care, treatment, advice, service or goods provided in respect of the physical or mental health of a person.	13
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<i>Health Care Complaints Commission</i> means the Health Care Complaints Commission constituted by the <i>Health Care Complaints Act 1993</i> .	15
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	17
<i>health information</i> has the meaning given by section 6.	18
<i>health privacy code of practice</i> or <i>code</i> means a privacy code of practice relating to health information made under Part 5.	19
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<i>Health Privacy Principle</i> or <i>HPP</i> means a clause of Schedule 1. A reference in this Act to a Health Privacy Principle by number is a reference to the clause of Schedule 1 with that number.	21
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<i>health registration Act</i> has the same meaning as in the <i>Health Care Complaints Act 1993</i> .	24
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<i>health service</i> includes the following services, whether provided as public or private services:	26
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(a) medical, hospital and nursing services,	28
(b) dental services,	29
(c) mental health services,	30
(d) pharmaceutical services,	31
(e) ambulance services,	32
(f) community health services,	33
(g) health education services,	34

- (h) welfare services necessary to implement any services referred to in paragraphs (a)–(g), 1
2
 - (i) services provided by podiatrists, chiropractors, osteopaths, optometrists, physiotherapists, psychologists and optical dispensers in the course of providing health care, 3
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 - (j) services provided by dietitians, masseurs, naturopaths, acupuncturists, occupational therapists, speech therapists, audiologists, audiometrists and radiographers in the course of providing health care, 6
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 - (k) services provided in other alternative health care fields in the course of providing health care, 10
11
 - (l) a service prescribed by the regulations as a health service for the purposes of this Act. 12
13
- health service provider** means an organisation that provides a health service but does not include: 14
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- (a) a health service provider, or a class of health service providers, that is prescribed by the regulations as an exempt health service provider: 16
17
18
 - (i) for the purposes of this Act generally, or 19
 - (ii) for the purposes of specified provisions of this Act, or 20
 - (iii) for the purposes of specified Health Privacy Principles or health privacy codes of practice, or 21
22
 - (iv) to the extent to which it is prescribed by the regulations as an exempt health service provider, or 23
24
 - (b) an organisation that merely arranges for a health service to be provided to an individual by another organisation. 25
26
- identifier** means an identifier (which is usually, but need not be, a number), not being an identifier that consists only of the individual's name, that is: 27
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29
- (a) assigned to an individual in conjunction with or in relation to the individual's health information by an organisation for the purpose of uniquely identifying that individual, whether or not it is subsequently used otherwise than in conjunction with or in relation to health information, or 30
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 - (b) adopted, used or disclosed in conjunction with or in relation to the individual's health information by an organisation for the purpose of uniquely identifying that individual. 35
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<i>immediate family member</i> of an individual means a person who is:	1
(a) a parent, child or sibling of the individual, or	2
(b) a spouse of the individual, or	3
(c) a member of the individual's household who is a relative of the individual, or	4 5
(d) a person nominated to an organisation by the individual as a person to whom health information relating to the individual may be disclosed.	6 7 8
<i>investigative agency</i> means any of the following:	9
(a) the Ombudsman's Office,	10
(b) the Independent Commission Against Corruption,	11
(c) the Police Integrity Commission,	12
(d) the Inspector of the Police Integrity Commission and any staff of the Inspector,	13 14
(e) the Community Services Commission,	15
(f) the Health Care Complaints Commission,	16
(g) the office of Legal Services Commissioner,	17
(h) a person or body prescribed by the regulations for the purposes of this definition.	18 19
<i>law enforcement agency</i> means any of the following:	20
(a) the Police Service, or the police force of another State or a Territory,	21 22
(b) the New South Wales Crime Commission,	23
(c) the Australian Federal Police,	24
(d) the National Crime Authority,	25
(e) the Director of Public Prosecutions of New South Wales, of another State or a Territory or of the Commonwealth,	26 27
(f) the Department of Corrective Services,	28
(g) the Department of Juvenile Justice,	29
(h) a person or body prescribed by the regulations for the purposes of this definition.	30 31
<i>local government authority</i> means a council, or a county council, within the meaning of the <i>Local Government Act 1993</i> .	32 33

news activity means:	1
(a) the gathering of news for the purposes of dissemination to the public or any section of the public, or	2
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(b) the preparation or compiling of articles or programs of or concerning news, observations on news or current affairs for the purpose of dissemination to the public or any section of the public, or	4
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(c) the dissemination to the public or any section of the public of any article or program of or concerning news, observations on news or current affairs.	8
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news medium means any organisation whose business, or whose principal business, consists of a news activity.	11
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organisation means a public sector agency or a private sector person.	13
personal information has the meaning given by section 5.	14
PPIP Act means the <i>Privacy and Personal Information Protection Act 1998</i> .	15
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Privacy Commissioner means the Privacy Commissioner appointed under the PPIP Act.	17
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private sector person means any of the following that is not a public sector agency:	19
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(a) a natural person,	21
(b) a body corporate,	22
(c) a partnership,	23
(d) a trust or any other unincorporated association or body,	24
but does not include a small business operator within the meaning of the <i>Privacy Act 1988</i> of the Commonwealth, or an agency within the meaning of that Act.	25
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Note. Small business operator is defined in section 6D of the <i>Privacy Act 1988</i> of the Commonwealth. Several types of businesses or activities are excluded from that definition. In particular, under section 6D (4) (b) an individual, body corporate, partnership, unincorporated association or trust is not a small business operator if it provides a health service to an individual and holds any health information except in an employee record.	28
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public sector agency means any of the following:	34
(a) a government department or the Education Teaching Service,	35
(b) a statutory body representing the Crown,	36

-
- (c) a declared authority under the *Public Sector Management Act 1988*, 1
2
- (d) a person or body in relation to whom, or to whose functions, an 3
account is kept of administration or working expenses, if the 4
account: 5
- (i) is part of the accounts prepared under the *Public 6
Finance and Audit Act 1983*, or 7
- (ii) is required by or under any Act to be audited by the 8
Auditor-General, or 9
- (iii) is an account with respect to which the 10
Auditor-General has powers under any law, or 11
- (iv) is an account with respect to which the 12
Auditor-General may exercise powers under a law 13
relating to the audit of accounts if requested to do so by 14
a Minister of the Crown, 15
- (e) the Police Service, 16
- (f) a local government authority, 17
- (g) a person or body that: 18
- (i) provides data services (being services relating to the 19
collection, processing, disclosure or use of personal 20
information or that provide for access to such 21
information) for or on behalf of a body referred to in 22
paragraphs (a)–(f), or that receives funding from any 23
such body in connection with providing data services, 24
and 25
- (ii) is prescribed by the regulations for the purposes of this 26
definition, 27
- but does not include a State owned corporation. 28
- public sector official*** means any of the following: 29
- (a) a person appointed by the Governor, or a Minister, to a 30
statutory office, 31
- (b) a judicial officer within the meaning of the *Judicial Officers 32
Act 1986*, 33
- (c) a person employed in the Public Service, the Education 34
Teaching Service or the Police Service, 35
- (d) a local government councillor or a person employed by a local 36
government authority, 37
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- (e) a person who is an officer of the Legislative Council or Legislative Assembly or who is employed by (or who is under the control of) the President of the Legislative Council or the Speaker of the Legislative Assembly, or both, 1
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- (f) a person who is employed or engaged by: 5
(i) a public sector agency, or 6
(ii) a person referred to in paragraphs (a)–(e), 7
- (g) a person who acts for or on behalf of, or in the place of, or as deputy or delegate of, a public sector agency or person referred to in paragraphs (a)–(e). 8
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- related body corporate**, in relation to an organisation that is a body corporate, has the same meaning as in the *Corporations Act 2001* of the Commonwealth. 11
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- relative** of an individual means a grandparent, grandchild, uncle, aunt, nephew or niece of the individual. 14
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- sibling** of an individual includes a half-brother, half-sister, adoptive brother, adoptive sister, step-brother or step-sister of the individual. 16
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- spouse** means: 18
- (a) a husband or wife, or 19
- (b) the other party to a de facto relationship (within the meaning of the *Property (Relationships) Act 1984*, 20
21
- but where more than one person would so qualify as a spouse, means only the last person so to qualify. 22
23
- staff of the Inspector of the Police Integrity Commission** means: 24
- (a) any staff employed under section 92 (1) or (2) of the *Police Integrity Commission Act 1996*, and 25
26
- (b) any consultants engaged under section 92 (3) of that Act. 27
- State record** has the same meaning as in the *State Records Act 1998*. 28
- Tribunal** means the Administrative Decisions Tribunal established by the *Administrative Decisions Tribunal Act 1997*. 29
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- (2) A reference in this Act to non-compliance with a requirement of this Act being permitted (or necessarily implied or reasonably contemplated) under an Act or other law includes a reference to non-compliance that is permitted (or necessarily implied or reasonably contemplated) under an Act of the Commonwealth. 31
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- (3) Notes included in this Act do not form part of this Act. 36

5 Definition of “personal information”

- (1) In this Act, *personal information* means information or an opinion (including information or an opinion forming part of a database and whether or not recorded in a material form) about an individual whose identity is apparent or can reasonably be ascertained from the information or opinion.
- (2) Personal information includes such things as an individual’s fingerprints, retina prints, body samples or genetic characteristics.
- (3) Personal information does not include any of the following:
 - (a) information about an individual who has been dead for more than 30 years,
 - (b) information about an individual that is contained in a generally available publication,
 - (c) information about an individual that is contained in a document kept in a library, art gallery or museum for the purposes of reference, study or exhibition,
 - (d) information about an individual that is contained in a State record under the control of the State Records Authority that is available for public inspection in accordance with the *State Records Act 1998*,
 - (e) information about an individual that is contained in archives within the meaning of the *Copyright Act 1968* of the Commonwealth,
 - (f) information about a witness who is included in a witness protection program under the *Witness Protection Act 1995* or who is subject to other witness protection arrangements made under an Act,
 - (g) information about an individual arising out of a warrant issued under the *Telecommunications (Interception) Act 1979* of the Commonwealth,
 - (h) information about an individual that is contained in a protected disclosure within the meaning of the *Protected Disclosures Act 1994*, or that has been collected in the course of an investigation arising out of a protected disclosure,

- (i) information about an individual arising out of, or in connection with, an authorised operation within the meaning of the *Law Enforcement (Controlled Operations) Act 1997*, 1
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- (j) information about an individual arising out of a Royal Commission or Special Commission of Inquiry, 4
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- (k) information about an individual arising out of a complaint made under Part 8A of the *Police Service Act 1990*, 6
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- (l) information about an individual that is contained in a document of a kind referred to in clause 1 or 2 of Schedule 1 (Exempt documents) to the *Freedom of Information Act 1989* (ie Cabinet documents or Executive Council documents), 8
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- (m) information or an opinion about an individual's suitability for appointment or employment as a public sector official, 12
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- (n) information about an individual that forms part of an employee record (within the meaning of the *Privacy Act 1988* of the Commonwealth) about the individual held by a private sector person, 14
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- (o) information about an individual that is of a class, or is contained in a document of a class, prescribed by the regulations for the purposes of this subsection. 18
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6 Definition of "health information" 21

In this Act, *health information* means: 22

- (a) personal information that is information or an opinion about: 23
 - (i) the physical or mental health or a disability (at any time) of an individual, or 24
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 - (ii) an individual's express wishes about the future provision of health services to him or her, or 26
27
 - (iii) a health service provided, or to be provided, to an individual, or 28
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- (b) other personal information collected to provide, or in providing, a health service, or 30
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- (c) other personal information about an individual collected in connection with the donation, or intended donation, of an individual's body parts, organs or body substances, or 32
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- (d) other personal information that is genetic information about an individual arising from a health service provided to the individual in a form that is or could be predictive of the health (at any time) of the individual or of any sibling, relative or descendant of the individual, 1
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- but does not include health information, or a class of health information or health information contained in a class of documents, that is prescribed as exempt health information for the purposes of this Act generally or for the purposes of specified provisions of this Act. 6
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7 Capacity 10

- (1) An individual is incapable of doing an act authorised, permitted or required by this Act if the individual is incapable (despite the provision of reasonable assistance by another person) by reason of age, injury, illness, physical or mental impairment of: 11
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- (a) understanding the general nature and effect of the act, or 15
- (b) communicating the individual's intentions with respect to the act. 16
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- (2) An authorised representative of an individual may do such an act on behalf of an individual who is incapable of doing that act. 18
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- (3) An authorised representative may not do such an act on behalf of an individual who is capable of doing that act, unless the individual expressly authorises the authorised representative to do that act. 20
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8 Definition of "authorised representative" 23

- (1) In this Act, *authorised representative*, in relation to an individual, means: 24
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- (a) an attorney for the individual under an enduring power of attorney, or 26
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- (b) a guardian within the meaning of the *Guardianship Act 1987*, or a person responsible within the meaning of Part 5 of that Act, or 28
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- (c) a person having parental responsibility for the individual, if the individual is a child, or 31
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- (d) a person who is otherwise empowered under law to exercise any functions as an agent of or in the best interests of the individual. 33
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- (2) A person is not an authorised representative of an individual for the purposes of this Act to the extent that acting as an authorised representative of the individual is inconsistent with an order made by a court or tribunal. 1
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- (3) In this section: 5
- child* means an individual under 18 years of age. 6
- parental responsibility*, in relation to a child, means all the duties, powers, responsibility and authority which, by law, parents have in relation to their children. 7
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9 What constitutes “holding” information 10

For the purposes of this Act, health information is *held* by an organisation if: 11
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- (a) the organisation is in possession or control of the information (whether or not the information is contained in a document that is outside New South Wales), or 13
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- (b) the information is in the possession or control of a person employed or engaged by the organisation in the course of such employment or engagement, or 16
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- (c) in the case of a public sector agency—the information is contained in a State record in respect of which the agency is responsible under the *State Records Act 1998*. 19
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10 Unsolicited information not considered “collected” 22

For the purposes of this Act, health information is not collected by an organisation if the receipt of the information by the organisation is unsolicited. 23
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Part 2 General operation of Act

11 How this Act applies to organisations

- (1) This Act applies to every organisation that is a health service provider or that collects, holds or uses health information.

Note. The term **organisation** means a public sector agency or a private sector person.

- (2) An organisation to whom or to which this Act applies is required to comply with the Health Privacy Principles and with any health privacy code of practice or provision of Part 4 that is applicable to the organisation.

- (3) An organisation must not do any thing, or engage in any practice, that contravenes a Health Privacy Principle or a health privacy code of practice or a provision of Part 4 in respect of which the organisation is required to comply.

Note. The application of Health Privacy Principles and the provisions of Part 4 may be modified by health privacy codes of practice. See section 39.

12 Crown bound by Act

This Act binds the Crown in right of New South Wales and also, in so far as the legislative power of Parliament permits, the Crown in all its other capacities.

13 Courts, tribunals and Royal Commissions not affected

- (1) Nothing in this Act affects the manner in which a court or tribunal, or the manner in which the holder of an office relating to a court or tribunal, exercises the court's, or the tribunal's, judicial functions.

- (2) Nothing in this Act affects the manner in which a Royal Commission, or any Special Commission of Inquiry, exercises the Commission's functions.

- (3) In this section, **judicial functions of a court or tribunal** means such of the functions of the court or tribunal as relate to the hearing or determination of proceedings before it, and includes:

- (a) in relation to a justice—such of the functions of the justice as relate to the conduct of committal proceedings, and

(b)	in relation to a coroner—such of the functions of the coroner as relate to the conduct of inquests and inquiries under the <i>Coroners Act 1980</i> .	1 2 3
14	Exemption for personal, family or household affairs	4
	Nothing in this Act applies in respect of the collection, holding, management, use, disclosure or transfer of health information by an individual, or health information held by an individual, only for the purposes of, or in connection with, his or her personal, family or household affairs.	5 6 7 8 9
15	News media	10
(1)	Nothing in HPP 1–4, 10, 11 or 14 applies in respect of the collection, use or disclosure of health information by a news medium if the collection, use or disclosure is in connection with its news activities.	11 12 13
(2)	Nothing in HPP 6–8 or Part 4 applies to health information held by a news medium in connection with its news activities unless and until the information is actually disseminated to the public or any section of the public.	14 15 16 17
16	Group practices	18
(1)	Nothing in HPP 1–6, 10 or 11 applies in respect of:	19
(a)	the collection of information from a member of a group practice by another member of the group practice, or	20 21
(b)	the use of health information held by a member of a group practice by another member of the group practice, or	22 23
(c)	the disclosure of health information held by a member of a group practice to another member of the group practice,	24 25
	if the purpose of the collection, use or disclosure is to ensure that a patient of a member of the group practice receives quality health care from members of the group practice.	26 27 28
(2)	Nothing in HPP 15 applies in respect of the keeping of combined or joint electronic records by members of a group practice.	29 30

(3) In this section:	1
<i>group practice</i> means:	2
(a) a group of 2 or more individuals who each provide a health service in the course of carrying on a business and who, by written agreement:	3
(i) carry on the business at shared premises, and	4
(ii) maintain a shared reception, and	5
(iii) maintain combined or joint records, or	6
(b) the provision of a health service in accordance with such other arrangements or associations between health service providers as may be prescribed by the regulations for the purposes of this definition.	7
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17 Specific exemptions (ICAC, Police Service, PIC, Inspector of PIC and Inspector's staff and NSW Crime Commission)	13
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This Act does not apply to the Independent Commission Against Corruption, the Police Service, the Police Integrity Commission, the Inspector of the Police Integrity Commission, the staff of the Inspector of the Police Integrity Commission and the New South Wales Crime Commission, except in connection with the exercise of their administrative and educative functions.	15
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18 Act does not authorise unauthorised activities	21
If an organisation is exempt from a Health Privacy Principle, or a provision of Part 4, the exemption does not operate to authorise the organisation to do any thing that it is otherwise prohibited from doing under an Act (including an Act of the Commonwealth) or any other law.	22
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19 Application of Health Privacy Principles to information collected at certain times	27
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(1) Except as otherwise provided by this section, the Health Privacy Principles apply in relation to all health information, whether collected by the organisation before or after the commencement of Schedule 1.	29
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(2) HPP 1 (Purposes of collection of health information), HPP 2 (Information must be relevant, not excessive, accurate and not intrusive), HPP 3 (Collection to be from individual concerned) and	32
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- HPP 4 (Individual to be made aware of certain matters), to the extent that they apply to the collection of health information, apply only in relation to the collection of health information after the commencement of Schedule 1. 1
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- (3) HPP 7 (Access to health information), HPP 8 (Amendment of health information) and Divisions 3 and 4 of Part 4 apply to all health information collected after the commencement of Schedule 1 and also apply to the following health information collected before that commencement: 5
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- (a) a history of the health or an illness of an individual, 10
 - (b) any findings on an examination of the individual in relation to the health or an illness of an individual, 11
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 - (c) the results of an investigation into the health or an illness of an individual, 13
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 - (d) a diagnosis, or preliminary diagnosis, of an illness of an individual, 15
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 - (e) a plan of management, or proposed plan of management, of the treatment or care of an illness of the individual, 17
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 - (f) action taken or services provided (whether or not in accordance with a plan of management) by or under the direction or referral of a health service provider in relation to the individual, 19
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 - (g) health information about the individual collected in connection with the donation, or intended donation, by the individual of his or her body parts, organs or body substances, 22
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 - (h) genetic information about an individual arising from a health service provided to the individual in a form that is or could be predictive of the health (at any time) of the individual or of any sibling, relative or descendant of the individual. 25
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- (4) HPP 13 (Anonymity) applies only in relation to transactions entered into, or health services received, after the commencement of Schedule 1. 29
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- (5) HPP 15 (Linkage of health records) applies only in relation to information collected after the commencement of Schedule 1. 32
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Part 3 Provisions for public sector agencies

Note. Section 11 requires organisations to which this Act applies (including public sector agencies) to comply with the Health Privacy Principles. This Part makes special provision for public sector agencies, while Part 4 makes special provision for private sector persons.

20 Application of Health Privacy Principles—amendment of health information

HPP 8 (Amendment of health information), and any provision of a health privacy code of practice applying to a public sector agency that relates to the requirements set out in that Health Privacy Principle, applies to public sector agencies despite HPP 8 (4) and section 21 of the *State Records Act 1998*.

21 Complaints against public sector agencies

- (1) The following conduct by a public sector agency is conduct to which Part 5 (Review of certain conduct) of the PPIP Act applies:
 - (a) the contravention of a Health Privacy Principle that applies to the agency,
 - (b) the contravention of a health privacy code of practice that applies to the agency.
- (2) For that purpose, a reference in that Part:
 - (a) to personal information is taken to include health information, and
 - (b) to an information protection principle is taken to include a Health Privacy Principle, and
 - (c) to a privacy code of practice is taken to include a health privacy code of practice.
- (3) This section applies only to conduct engaged in after the commencement of this section.

22 Freedom of Information Act 1989 not affected

- (1) Nothing in this Act affects the operation of the *Freedom of Information Act 1989*.
- (2) In particular, this Act does not operate:
 - (a) to modify any exemption under the *Freedom of Information Act 1989*, or

Part 4 Provisions for private sector persons

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Note. Section 11 requires organisations to which this Act applies (including private sector persons) to comply with the Health Privacy Principles and the provisions of this Part. This Part makes special provision for private sector persons, while Part 3 makes special provision for public sector agencies.

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5**Division 1 General**

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23 When non-compliance authorised

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A private sector person is not required to comply with a requirement of this Part applying to the person if:

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- (a) the private sector person is lawfully authorised or required not to comply with it, or
- (b) non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law.

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Note. For example, a medical practitioner who is required to comply with regulations under the *Medical Practice Act 1992* that deal with the retention or disposal of records held by medical practitioners is not required to comply with Division 2.

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18**24 Guidelines by Privacy Commissioner**

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The Privacy Commissioner may issue guidelines with respect to access to, and retention and amendment of, health information held by private sector persons for the purpose of assisting them to comply with the Health Privacy Principles and this Part.

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23**Division 2 Retention of health information**

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Note. This Division contains specific provisions that are additional to, and assist the operation of, the general principles in HPP 5 (Retention and security).

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26**25 Retention of health information: health service providers**

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- (1) A private sector person who is a health service provider must retain health information relating to an individual as follows:
 - (a) in the case of health information collected while the individual was an adult—for 7 years from the last occasion on which a

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- health service was provided to the individual by the health service provider, 1
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- (b) in the case of health information collected while the individual was under the age of 18 years—until the individual has attained the age of 25 years. 3
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- (2) A health service provider who deletes or disposes of health information must keep a record of the name of the individual to whom the health information related, the period covered by it and the date on which it was deleted or disposed of. 6
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- (3) A health service provider who transfers health information to another organisation and does not continue to hold a record of that information must keep a record of the name and address of the organisation to whom or to which it was transferred. 10
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- (4) A record referred to in subsection (2) or (3) may be kept in electronic form, but only if it is capable of being printed on paper. 14
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- (5) Nothing in this section authorises a health service provider to delete, dispose of or transfer health information in contravention of an Act (including an Act of the Commonwealth) or any other law. 16
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Division 3 Access to health information 19

Note. This Division contains specific provisions for private sector persons that are additional to, and assist the operation of, the general principles in HPP 7 (Access to health information). 20
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26 Making a request for access 22

- (1) An individual may request a private sector person to provide the individual with access to health information relating to the individual held by the private sector person. A request must: 23
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- (a) be in writing, and 26
- (b) state the name and the address of the individual making the request, and 27
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- (c) sufficiently identify the health information to which access is sought, and 29
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- (d) specify the form in which the individual wishes the information to be provided, being a form provided for by this Act. 31
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- (2) An individual who requests access to health information relating to the individual may authorise another person to have access to the information in the place of the individual. Such an authority must:
- (a) be in writing, and
 - (b) name the person who is authorised to have access to the information.
- A private sector person is to provide access under this Act in accordance with any such written authority.
- Note.** This section does not prevent an individual and a private sector person from making other arrangements for access to information: see section 32.

27 Response to request for access

- (1) A private sector person must respond to a request for access within 45 days after receiving the request.
- (2) A private sector person responds to a request for access by:
- (a) providing access to the information as required by this Act, or
 - (b) refusing access to the information.
- (3) A private sector person who refuses to give an individual access to information must give the individual a written reason for refusal of access, being a reason for refusal provided for by this Act.
- (4) A private sector person who charges a fee for providing access to information need not provide access until 7 days after payment of the fee, if:
- (a) the private sector person has given the individual written notice stating that access will be provided on payment of a specified fee, and
 - (b) that notice is given within 45 days after receiving a request.
- (5) Access may be refused to a part of the information to which a request relates (with access provided to the remainder of the information).
- (6) A private sector person is taken to have refused access to health information if the private sector person fails to respond to the request for access as required by this section.

28 Form of access	1
(1) Access to health information relating to an individual is to be provided to the individual:	2
(a) by giving the individual a copy of the health information, or	3
(b) by giving the individual a reasonable opportunity to inspect and take notes from the health information.	4
(2) If an individual has requested that access to health information be provided in a particular form, the private sector person is to provide access in that form, and in accordance with any guidelines issued by the Privacy Commissioner for the purposes of this section.	5
(3) Despite subsection (2), a private sector person may refuse to provide access to health information in the form requested if providing the information in that form:	6
(a) would place unreasonable demands on the organisation's resources, or	7
(b) would be detrimental to the preservation of the information or (having regard to the physical form in which the information is contained) would otherwise not be appropriate, or	8
(c) would involve an infringement of copyright subsisting in matter contained in the information.	9
If access is refused under this clause, the information is to be provided in another form.	10
(4) Despite anything to the contrary in this Part or HPP 7, a private sector person who receives a request for access to health information collected before the commencement of this section need only give the individual an accurate summary of the health information.	11
29 Situations where access need not be granted	12
A private sector person is not required to provide an individual with access to health information relating to the individual held by the private sector person if:	13
(a) providing access would pose a serious threat to the life or health of the individual or any other person and refusing access is in accordance with guidelines, if any, issued by the Privacy Commissioner for the purposes of this paragraph, or	14
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- (b) providing access would have an unreasonable impact on the privacy of other individuals and refusing access is in accordance with guidelines, if any, issued by the Privacy Commissioner, or
 - (c) the information relates to existing or anticipated legal proceedings between the private sector person and the individual and the information would not be accessible by the process of discovery in those proceedings or is subject to legal professional privilege, or
 - (d) providing access would reveal the intentions of the private sector person in relation to negotiations, other than about the provision of a health service, with the individual in such a way as to expose the private sector person unreasonably to disadvantage, or
 - (e) providing access would be unlawful, or
 - (f) denying access is required or authorised by or under law, or
 - (g) providing access would be likely to prejudice an investigation of possible unlawful activity, or
 - (h) providing access would be likely to prejudice a law enforcement function by or on behalf of a law enforcement agency, or
 - (i) a law enforcement agency performing a lawful security function asks the private sector person not to provide access to the information on the basis that providing access would be likely to cause damage to the security of Australia, or
 - (j) the request for access is of a kind that has been made unsuccessfully on at least one previous occasion and there are no reasonable grounds for making the request again, or
 - (k) the individual has been provided with access to the health information in accordance with this Act and is making an unreasonable, repeated request for access to the same information in the same manner.
- 30 Access refused because serious threat to individual**
- (1) This section applies if a private sector person that holds health information about an individual refuses to provide the individual with access to the health information on the ground that providing access would pose a serious threat to the life or health of the individual.

- (2) The individual may request the private sector person to give access to the information to a registered medical practitioner nominated by the individual. 1
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- (3) The request is to be made within 21 days after the notice of refusal was received. 4
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- (4) The notice of refusal: 6
- (a) must advise the individual that he or she may nominate a medical practitioner to be given access to the health information, and 7
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- (b) must advise the individual that if he or she nominates a medical practitioner, the nomination must be made to the private sector person within 21 days after receiving the notice of refusal. 10
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- (5) The private sector person must provide access to the health information to the nominated registered medical practitioner within 21 days after being advised by the individual of the nomination of the practitioner. 13
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- 31 Private sector person may require evidence of identity or authority** 17
- (1) Before a private sector person provides access to health information to a person, the private sector person must take reasonable steps to be satisfied about that person's authority to have access to the information. 18
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- (2) For this purpose, the private sector person may require evidence of: 22
- (a) the person's identity, and 23
- (b) if person seeking access claims to be authorised to have access to the information under section 26 (2), the authority of that person, and 24
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- (c) if the person seeking access claims to be an authorised representative of the individual to whom the information relates, the authority of that person. 27
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- Note.** The term *authorised representative* is defined in section 8. 30
- 32 Alternative arrangements may be made** 31
- (1) Nothing in this Division is intended to prevent or discourage a private sector person from providing an individual, with his or her consent, with access to his or her health information otherwise than as required by this Division. 32
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- (2) A private sector person is not to provide an individual with access to health information otherwise than as required by this Division unless the private sector person has informed the individual of the requirements of this Division.

Division 4 Amendment of health information

Note. This Division contains specific provisions for private sector persons that are additional to, and assist the operation of, the general principles in HPP 8 (Amendment of health information).

33 Making a request for amendment

An individual may request a private sector person to amend health information relating to the individual held by the private sector person. The request must:

- (a) be in writing, and
- (b) state the name and the address of the individual making the request, and
- (c) identify the health information concerned, and
- (d) specify the respect or respects in which the individual claims the health information is inaccurate, out of date, irrelevant, incomplete or misleading, and
- (e) if the request specifies that the individual claims the health information is incomplete or out of date—be accompanied by such information as the individual claims is necessary to complete the health information or to bring it up to date.

34 Response to request for amendment

- (1) A private sector person must respond to a request for amendment within 45 days after receiving the request.
- (2) A private sector person responds to a request by:
 - (a) making the amendment requested, or
 - (b) refusing to make the amendment requested.
- (3) A private sector person may refuse to amend health information in accordance with a request:
 - (a) if it is satisfied that the health information is not incomplete, incorrect, irrelevant, out of date or misleading, or

- (b) if it is satisfied that the request contains or is accompanied by matter that is incorrect or misleading in a material respect. 1
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 - (4) A private sector person who refuses to make an amendment requested must give the individual a written reason for the refusal. 3
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 - (5) A private sector person is taken to have refused to make the amendment requested if the private sector person fails to respond to the request for amendment as required by this section. 5
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- 35 Notations added to records** 8
- (1) If a private sector person has refused to amend health information held by the person, the individual to whom the information relates may, by notice in writing, require the private sector person to add to the health information a notation: 9
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 - (a) specifying the respects in which the individual claims the information to be incomplete, incorrect, irrelevant, out of date or misleading, and 13
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 - (b) if the individual claims the information to be incomplete or out of date—setting out such information as the individual claims is necessary to complete the information or to bring it up to date. 16
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 - (2) The private sector person must take reasonable steps to comply with the requirements of a notice given under this section and is to cause written notice of the steps taken, and the nature of a notation, to be given to the individual. 20
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 - (3) If the private sector person discloses to any person or organisation (including any public sector agency or any Minister) any health information to which a notice under this section relates, the private sector person: 24
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 - (a) must ensure that there is given to that person or organisation, when the information is disclosed, a statement: 28
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 - (i) stating that the person to whom the information relates claims that the information is incomplete, incorrect, irrelevant, out of date or misleading, and 30
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 - (ii) setting out particulars of a notation added to the information under this section, and 33
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 - (b) may include in the statement the reason for the private sector person's refusal to amend its records in accordance with the notation. 35
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- (4) Nothing in this section is intended to prevent or discourage private sector persons from giving particulars of a notation added to health information under this section to a person or organisation (including a public sector agency or any Minister) to whom information was given before the commencement of this section.

36 Private sector person may require evidence of identity or authority

- (1) Before a private sector person amends health information at the request of an individual or an authorised representative of the individual, the private sector person must take reasonable steps to be satisfied about the authority of the person making the request to request amendment of the information.
- (2) For this purpose, the private sector person may require evidence of:
- (a) the identity of the person making the request, and
 - (b) if the person making the request claims to be an authorised representative of the individual to whom the information relates, the authority of that person.

Note. The term **authorised representative** is defined in section 8.

37 Alternative arrangements may be made

- (1) Nothing in this Division is intended to prevent or discourage a private sector person from providing an individual, with his or her consent, with an opportunity to amend his or her health information otherwise than as required by this Division.
- (2) A private sector person is not to provide an individual with an opportunity to amend health information otherwise than as required by this Division unless the private sector person has informed the individual of the requirements of this Division.

Part 5 Health privacy codes of practice

38 Operation of health privacy codes of practice

- (1) Health privacy codes of practice may be made for the purpose of protecting the privacy of health information with respect to individuals.
- (2) A health privacy code of practice may regulate any of the following matters:
 - (a) the collection or retention of health information held by organisations,
 - (b) the use or disclosure of health information held by organisations,
 - (c) the transfer by organisations of health information from New South Wales to a jurisdiction outside New South Wales or to a Commonwealth agency,
 - (d) the electronic or computerised linkage of health information held by organisations,
 - (e) the procedures for dealing with health information held by organisations.
- (3) In particular, a health privacy code of practice may provide for the protection of health information contained in a record that is more than 30 years old, and any such provision has effect despite the provisions of any other Act that deals with the disclosure of, or access to, health information of that kind. Any such code must, to the extent that it relates to health information contained in a State record that is more than 30 years old, be consistent with any relevant guidelines issued under section 52 of the *State Records Act 1998*.
- (4) A health privacy code of practice can apply to any one or more of the following:
 - (a) any specified class of health information,
 - (b) any specified organisation or class of organisation,
 - (c) any specified activity or class of activity.
- (5) Except in the case of a health privacy code of practice that is referred to in subsection (3), a code cannot affect the operation of any exemption provided under this Act.

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| (6) A health privacy code of practice: | 1 |
| (a) must provide standards of health information privacy protection that operate to protect organisations from any restrictions in relation to the importation of health information into New South Wales, and | 2
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| (b) must not impose on any organisation any requirements that are more stringent (or of a higher standard) than the Health Privacy Principles. | 6
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| 39 Modification of Health Privacy Principles or Part 4 | 9 |
| (1) A health privacy code of practice may modify the application to any organisation or class of organisation of any one or more of the Health Privacy Principles or any provision of Part 4. | 10
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| (2) A code may: | 13 |
| (a) specify requirements that are different from the requirements set out in the Health Privacy Principles or in a provision of Part 4, or exempt any activity or conduct of or by the organisation or class of organisation from compliance with any such Principle or provision, or | 14
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| (b) specify the manner in which any one or more of the Health Privacy Principles or any provision of Part 4 are to be applied to, or are to be followed by, the organisation or class of organisation, and | 19
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| (c) exempt an organisation or class of organisation from the requirement to comply with any Health Privacy Principle or any provision of Part 4. | 23
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| 40 Preparation and making of health privacy codes of practice | 26 |
| (1) The Privacy Commissioner, or any organisation, may: | 27 |
| (a) initiate the preparation of a draft health privacy code of practice, and | 28
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| (b) develop the draft code in consultation with such other persons or bodies as the Commissioner or organisation thinks fit, and | 30
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| (c) submit the draft code to the Minister. | 32 |
| (2) If a draft code is initiated and prepared by an organisation, the organisation must consult with the Privacy Commissioner on the draft code before it is submitted to the Minister. | 33
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| (3) The Privacy Commissioner may make such submissions to the Minister in respect of a draft code as the Privacy Commissioner thinks appropriate. | 1
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| (4) Once a draft code is submitted to the Minister, the Minister may, after taking into consideration any submissions by the Privacy Commissioner and after consulting the Attorney General about the draft code, decide to make the code. | 4
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| (5) A health privacy code of practice is made by order of the Minister published in the Gazette. | 8
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| (6) A code takes effect when the order making the code is published (or on such later date as may be specified in the order). | 10
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| (7) The procedures specified in this section extend to any amendment of a health privacy code of practice. | 12
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Part 6 Complaints against private sector persons	1
Division 1 General	2
41 Definitions	3
In this Part:	4
<i>complainant</i> , in relation to a complaint, means the person who makes the complaint.	5
<i>respondent</i> , in relation to a complaint, means a person against whom the complaint is made.	7
42 Making of privacy related complaints	9
(1) A complaint may be made to the Privacy Commissioner about the alleged contravention of any of the following by a private sector person:	10
(a) a Health Privacy Principle,	11
(b) a provision of Part 4,	12
(c) a health privacy code of practice.	13
(2) A complaint must be made:	14
(a) in writing, and	15
(b) in accordance with such regulations (if any) as may be made for the purposes of this section.	16
(3) A complaint must be made within 6 months (or such later time as the Privacy Commissioner may allow) after the time the complainant first became aware of the conduct the subject of the complaint.	17
(4) A complainant may amend or withdraw a complaint.	18
(5) This Part does not apply to any conduct that occurred before the commencement of this Part.	19
43 Preliminary assessment of complaints	20
(1) The Privacy Commissioner may conduct a preliminary assessment of a complaint made under this Part for the purpose of deciding whether to deal with the complaint.	21
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- (2) The Privacy Commissioner may decide not to deal with a complaint if the Privacy Commissioner is satisfied that:
- (a) the complaint is frivolous, vexatious or lacking in substance, or is not in good faith, or
 - (b) the subject matter of the complaint is trivial, or
 - (c) the subject matter of the complaint relates to a matter permitted or required by or under any law, or
 - (d) there is available to the complainant an alternative, satisfactory and readily available means of redress, or
 - (e) the matter should be referred to the Health Care Complaints Commission or another person or body under section 65, 66 or 67, or
 - (f) the person has made a complaint about the same subject matter to the Commonwealth Privacy Commissioner, or to an adjudicator under an approved privacy code within the meaning of the *Privacy Act 1988* of the Commonwealth, and:
 - (i) the complaint has not been withdrawn, or
 - (ii) the Commonwealth Privacy Commissioner has made a determination under section 52 of that Act, or
 - (iii) the adjudicator has made a determination under a provision of the approved privacy code that corresponds to section 52 of that Act.
- (3) If the Privacy Commissioner decides not to deal with a complaint, the Privacy Commissioner must advise the complainant of the reasons for deciding not to deal with the complaint.
- 44 Assessment of complaints**
- (1) If the Privacy Commissioner decides to deal with a complaint made under this Part, the Privacy Commissioner:
- (a) is to carry out an assessment to determine whether there is a prima facie case that the respondent contravened a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice, and
 - (b) for that purpose, may make such inquiries and investigations into the complaint as the Privacy Commissioner thinks appropriate.

- (2) If, after carrying out such an assessment, the Privacy Commissioner is satisfied that there is no prima facie case that the respondent contravened a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice, the Privacy Commissioner is to cease to deal with the complaint. 1
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 - (3) If the Privacy Commissioner ceases to deal with a complaint, the Privacy Commissioner must advise the complainant of the reasons for ceasing to deal with the complaint. 6
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- 45 Dealing with complaint 9**
 - (1) If the Privacy Commissioner is satisfied that there is a prima facie case that the respondent contravened a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice, the Privacy Commissioner may: 10
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 - (a) endeavour to resolve the complaint by conciliation under section 46, or 14
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 - (b) further investigate the complaint and make a report under section 47, or 16
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 - (c) determine that the complaint has been resolved to his or her satisfaction. 18
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 - (2) In deciding which course of action to take, the Privacy Commissioner is to take into consideration the following matters: 20
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 - (a) the nature of the complaint, 22
 - (b) the views of the complainant and respondent, 23
 - (c) any action taken by the respondent (or that the respondent gives an undertaking to take) to address the complaint, 24
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 - (d) whether the complaint raises a matter of public interest. 26
 - (3) If the Privacy Commissioner determines that the complaint has been resolved to his or her satisfaction under subsection (1) (c), the Privacy Commissioner is to: 27
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 - (a) notify the complainant and the respondent of the determination, and 30
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 - (b) take no further action on the complaint. 32

46	Resolution of complaint by conciliation	1
(1)	The Privacy Commissioner may endeavour to resolve the complaint by conciliation.	2 3
(2)	The Privacy Commissioner may by written notice request the complainant and the respondent to appear before the Privacy Commissioner in conciliation proceedings.	4 5 6
(3)	A person or body must not without reasonable excuse fail to comply with the terms of a notice under subsection (2).	7 8
	Maximum penalty: 50 penalty units in the case of a body corporate or 10 penalty units in any other case.	9 10
(4)	The parties to any such conciliation proceedings before the Privacy Commissioner are not entitled to be represented by any other person except by leave of the Privacy Commissioner.	11 12 13
(5)	The procedures for conciliation are to be determined by the Privacy Commissioner.	14 15
(6)	Evidence of anything said or done in the course of conciliation proceedings under this section is not admissible in subsequent proceedings under this Part relating to the complaint.	16 17 18
(7)	The Privacy Commissioner is to take no further action after the conclusion of the conciliation proceedings, whether or not the parties reach any agreement as a result of the proceedings.	19 20 21
47	Reports and recommendations of Privacy Commissioner	22
(1)	The Privacy Commissioner may make a written report as to any findings or recommendations by the Privacy Commissioner in relation to a complaint dealt with by the Privacy Commissioner under section 45 (1) (b).	23 24 25 26
(2)	The Privacy Commissioner may give a copy of any such report to the complainant, the respondent and to such other persons or bodies as appear to be materially involved in matters concerning the complaint.	27 28 29
(3)	A report under this section is admissible in subsequent proceedings under this Part relating to the complaint.	30 31

Division 2 Functions of the Tribunal

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Note. The *Administrative Decisions Tribunal Act 1997* contains provisions dealing with the procedure of the Tribunal, including matters such as who may be a party to proceedings for an original decision and representation of parties.

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48 Application to Tribunal

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- (1) A person who has made a complaint to the Privacy Commissioner under Division 1 may apply to the Tribunal for an inquiry into the complaint, but only if the complaint was the subject of a report of the Privacy Commissioner under section 47.

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Note. This section confers jurisdiction on the Tribunal to make an original decision. It does not confer jurisdiction to review a decision of the Privacy Commissioner.

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- (2) An application may only be made within 28 days after:

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- (a) the day on which the complainant received the report of the Privacy Commissioner, or
- (b) the day (if any) recommended in the report of the Privacy Commissioner as the day after which an application may be made to the Tribunal,

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whichever is later.

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- (3) However, a person cannot apply to the Tribunal if the person has made a complaint about the same subject matter to the Commonwealth Privacy Commissioner, or to an adjudicator under an approved privacy code within the meaning of the *Privacy Act 1988* of the Commonwealth, and:

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- (a) the complaint has not been withdrawn, or
- (b) the Commonwealth Privacy Commissioner has made a determination under section 52 of that Act, or
- (c) the adjudicator has made a determination under a provision of the approved privacy code that corresponds to section 52 of that Act.

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49 Inquiries into complaints

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The Tribunal is to hold an inquiry into a complaint that is the subject of an application.

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50	Appearance by Privacy Commissioner	1
(1)	The Privacy Commissioner is to be notified by the Tribunal of any application made to it under section 48.	2 3
(2)	The Privacy Commissioner has a right to appear and be heard in any proceedings before the Tribunal in relation to an inquiry under this Part.	4 5 6
51	Proof of exemption	7
	If in proceedings in relation to an inquiry into a complaint the respondent relies on an exemption under any provision of this Act or the regulations, the onus of proving that the exemption applies to the respondent in the circumstances lies on the respondent.	8 9 10 11
52	Tribunal may dismiss frivolous etc complaints	12
(1)	If, at any stage of an inquiry into a complaint, the Tribunal is satisfied that the complaint is frivolous, vexatious, misconceived or lacking in substance, or that for any other reason the complaint should not be dealt with, it may dismiss the complaint.	13 14 15 16
(2)	The Tribunal may dismiss a complaint if satisfied that the person does not wish to proceed with the complaint.	17 18
(3)	If the Tribunal dismisses a complaint under this section, it may order the complainant to pay the costs of the inquiry.	19 20
53	Relationship to Administrative Decisions Tribunal Act 1997	21
	Nothing in section 52 limits the generality of the powers conferred on the Tribunal by Chapter 6 of the <i>Administrative Decisions Tribunal Act 1997</i> .	22 23 24
54	Order or other decision of Tribunal	25
(1)	After holding an inquiry, the Tribunal may decide not to take any action on the matter, or it may make any one or more of the following orders:	26 27 28
(a)	subject to subsection (2), an order requiring the respondent to pay to the complainant damages not exceeding \$40,000 if the respondent is a body corporate, or not exceeding \$10,000 in any other case, by way of compensation for any loss or damage suffered by reason of the respondent's conduct,	29 30 31 32 33

(b)	an order requiring the respondent to refrain from any conduct or action in contravention of a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice,	1 2 3
(c)	an order requiring the performance of a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice,	4 5 6
(d)	an order requiring health information that has been disclosed to be corrected by the respondent,	7 8
(e)	an order requiring the respondent to take specified steps to remedy any loss or damage suffered by the complainant,	9 10
(f)	such ancillary orders as the Tribunal thinks appropriate.	11
(2)	The Tribunal may make an order under subsection (1) (a) only if:	12
(a)	the application relates to conduct that occurs after the end of the 12-month period following the date on which Schedule 1 commences, and	13 14 15
(b)	the Tribunal is satisfied that the applicant has suffered financial loss, or psychological or physical harm, because of the conduct of the respondent.	16 17 18
(3)	In making an order for damages under this section concerning a complaint lodged on behalf of a person or persons, the Tribunal may make such order as it thinks fit as to the application of those damages for the benefit of the person or persons.	19 20 21 22
55	Costs	23
(1)	Except as provided by section 52 and subsection (2), each party to an inquiry is to pay his or her own costs.	24 25
(2)	If the Tribunal is of the opinion in a particular case that there are circumstances that justify it doing so, it may make such order as to costs and security for costs, whether by way of interim order or otherwise, as it thinks fit.	26 27 28 29
56	Compliance with order of Tribunal	30
	A person must not refuse, neglect or for any reason fail to obey or comply with an order referred to in section 54 (1) (b)–(e), or an interim order, of the Tribunal.	31 32 33
	Maximum penalty: 50 penalty units in the case of a body corporate or 10 penalty units in any other case.	34 35

Clause 57 Health Records and Information Privacy Bill 2002

Part 6 Complaints against private sector persons

Division 2 Functions of the Tribunal

57 Appeals to Appeal Panel against decisions and orders of Tribunal	1
An order or other decision made by the Tribunal under this Division	2
may be appealed to an Appeal Panel of the Tribunal under Part 1 of	3
Chapter 7 of the <i>Administrative Decisions Tribunal Act 1997</i> by a	4
party to the proceedings in which the order or decision is made.	5

Part 7 Privacy Commissioner

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58 Functions of Privacy Commissioner

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The Privacy Commissioner has the following functions:

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- (a) to promote the adoption of, and monitor compliance with, the Health Privacy Principles and the provisions of Part 4,
- (b) to prepare and publish guidelines relating to the protection of health information and other privacy matters, and to promote the adoption of such guidelines,
- (c) to provide assistance to organisations in adopting and complying with the Health Privacy Principles and the provisions of Part 4,
- (d) to conduct research, and collect and collate information, about any matter relating to the protection of health information and the privacy of individuals,
- (e) to provide advice on matters relating to the protection of health information and the privacy of individuals,
- (f) to receive, investigate and conciliate complaints about alleged contraventions of the Health Privacy Principles, the provisions of Part 4 or any health privacy code of practice,
- (g) such other functions as are conferred by this Act.

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Note. The Privacy Commissioner may also deal with privacy related complaints under Parts 4 and 5 of the PPIP Act.

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59 Requirement to give information

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- (1) The Privacy Commissioner may, in connection with the exercise of the Privacy Commissioner's functions, require any person or organisation:
 - (a) to give the Privacy Commissioner a statement of information, or
 - (b) to produce to the Privacy Commissioner any document or other thing, or
 - (c) to give the Privacy Commissioner a copy of any document.
- (2) The Privacy Commissioner is not to make any such requirement if it appears to the Privacy Commissioner that:
 - (a) the person or organisation concerned does not consent to compliance with the requirement, and

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- (b) the person or organisation would not, in court proceedings, be required to comply with a similar requirement on the grounds of public interest, privilege against self-incrimination or legal professional privilege. 1
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- (3) A requirement under this section must be in writing, must specify or describe the information, document or thing required, and must specify the time and manner for complying with the requirement. 5
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- (4) This section does not confer any function on the Privacy Commissioner that may be exercised in relation to the Independent Commission Against Corruption. 8
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- 60 Inquiries and investigations** 11
- (1) For the purposes of any inquiry or investigation conducted by the Privacy Commissioner under this Act, the Privacy Commissioner has the powers, authorities, protections and immunities conferred on a commissioner by Division 1 of Part 2 of the *Royal Commissions Act 1923*, and that Act (section 13 and Division 2 of Part 2 excepted) applies (subject to this section) to any witness summoned by or appearing before the Privacy Commissioner in the same way as it applies to a witness summoned by or appearing before a commissioner. 12
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- (2) Subsection (1) does not confer any function on the Privacy Commissioner that may be exercised in relation to the Independent Commission Against Corruption, Police Integrity Commission, Inspector of the Police Integrity Commission, staff of the Inspector of the Police Integrity Commission or New South Wales Crime Commission. 21
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- (3) Any inquiry or investigation conducted by the Privacy Commissioner under this Act is to be conducted in the absence of the public, except as otherwise directed by the Privacy Commissioner. 27
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- (4) The Privacy Commissioner, in the course of conducting an inquiry or investigation under this Act, must set aside any requirement: 30
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- (a) to give any statement of information, or 32
- (b) to produce any document or other thing, or 33
- (c) to give a copy of any document, or 34

(d)	to answer any question,	1
	if it appears to the Privacy Commissioner that the person or	2
	organisation concerned does not consent to compliance with the	3
	requirement and the person or organisation would not, in court	4
	proceedings, be required to comply with a similar requirement on the	5
	grounds of public interest, privilege against self-incrimination or legal	6
	professional privilege. However, the person or organisation must	7
	comply with any such requirement despite any duty of secrecy or other	8
	restriction on disclosure.	9
(5)	A person is not entitled to be represented by another person at an	10
	inquiry or investigation conducted by the Privacy Commissioner	11
	except with the leave of the Privacy Commissioner.	12
(6)	The Privacy Commissioner may allow any person appearing before the	13
	Privacy Commissioner to have the services of an interpreter.	14
61	General procedure for inquiries and investigations	15
	The Privacy Commissioner:	16
(a)	may determine the procedures to be followed in exercising the	17
	Privacy Commissioner's functions under this Act, including the	18
	procedures to be followed at an inquiry or investigation	19
	conducted by the Privacy Commissioner, and	20
(b)	is to act in an informal manner (including avoiding conducting	21
	formal hearings) as far as possible, and	22
(c)	is not bound by the rules of evidence and may inform himself	23
	or herself on any matter in any way that the Privacy	24
	Commissioner considers to be just, and	25
(d)	is to act according to the substantial merits of the case without	26
	undue regard to technicalities.	27
62	Exempting organisations from complying with Principles and codes	28
(1)	The Privacy Commissioner may, in accordance with this section, make	29
	a written direction that:	30
(a)	an organisation is not required to comply with a Health Privacy	31
	Principle, a provision of Part 4 or a health privacy code of	32
	practice, or	33

- (b) the application of a Health Privacy Principle, a provision of Part 4 or a code to an organisation is to be modified as specified in the direction. 1
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- (2) Any such direction has effect despite any other provision of this Act. 4
- (3) The Privacy Commissioner is not to make a direction under this section unless: 5
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 - (a) the Privacy Commissioner is satisfied that the public interest in requiring the organisation to comply with the Health Privacy Principle, the provision of Part 4 or health privacy code of practice is outweighed by the public interest in the Privacy Commissioner making the direction, and 7
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 - (b) the Privacy Commissioner has consulted the Attorney General about the direction, and 12
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 - (c) the Minister has approved the making of the direction. 14
- 63 Information about compliance arrangements 15**
 - (1) The Privacy Commissioner may require an organisation to provide the Commissioner with information: 16
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 - (a) concerning the arrangements made by the organisation to enable the organisation to comply with the Health Privacy Principles, the provisions of Part 4 and any health privacy code of practice applying to the organisation, and 18
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 - (b) demonstrating the means by which the organisation is implementing such arrangements. 22
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 - (2) Any such requirement must be in writing and specify a time for complying with the requirement. 24
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 - (3) This section does not confer any function on the Privacy Commissioner that may be exercised in relation to the Independent Commission Against Corruption, Police Integrity Commission, Inspector of the Police Integrity Commission, staff of the Inspector of the Police Integrity Commission, New South Wales Crime Commission or Ombudsman's Office. 26
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64 Guidelines by Privacy Commissioner

- (1) The Privacy Commissioner may issue guidelines for or with respect to any matter for which guidelines may be issued under this Act. The Privacy Commissioner may from time to time amend or replace the guidelines. 1
- (2) Guidelines issued by the Privacy Commissioner may apply, adopt or incorporate any publication as in force for the time being. 2
- (3) The Minister may request the Privacy Commissioner to develop guidelines relating to any matter that the Minister considers should be the subject of guidelines. 3
- (4) The procedure for the issuing of guidelines is as follows: 4
- (a) the Privacy Commissioner is to prepare proposed guidelines in draft form and is to prepare an impact assessment statement for the proposed guidelines in accordance with such requirements as the Minister may from time to time determine, 5
- (b) the draft guidelines and impact assessment statement are to be publicly exhibited for a period of at least 21 days, 6
- (c) the Privacy Commissioner is to seek public comment on the draft guidelines during the period of public exhibition and public comment may be made during the period of the exhibition and for 21 days (or such longer period as the Privacy Commissioner may determine) after the end of that period, 7
- (d) the Privacy Commissioner is to submit the draft guidelines to the Minister for approval together with a report by the Privacy Commissioner giving details of public comment received during the period allowed for public comment and the Privacy Commissioner's response to it, 8
- (e) the Privacy Commissioner is not to issue the draft guidelines as guidelines unless the Minister approves the guidelines. 9
- (5) The procedure for the amendment or replacement of guidelines is the same as for the issuing of the guidelines unless the Minister otherwise directs in respect of a particular amendment. 10

65	Referring privacy related complaint to Health Care Complaints Commission	1 2
(1)	The Privacy Commissioner may refer a complaint made under this Act to the Health Care Complaints Commission if the complaint concerns:	3 4
(a)	the professional conduct of a health service provider, or	5
(b)	a health service that affects the clinical management or care of a person who uses or receives a health service (including a patient).	6 7 8
(2)	The Privacy Commissioner may communicate to the Health Care Complaints Commission any information that the Privacy Commissioner has obtained in relation to the complaint.	9 10 11
(3)	The Privacy Commissioner and the Health Care Complaints Commission are to consult regularly to ensure the appropriate referral of complaints between them.	12 13 14
	Note. Section 26 of the <i>Health Care Complaints Act 1993</i> provides that the Health Care Complaints Commission may refer a complaint to another person or body. The Commission may therefore refer a complaint that raises a possible contravention of a Health Privacy Principle, a provision of Part 4 or a health privacy code of practice to the Privacy Commissioner.	15 16 17 18 19
(4)	This section does not affect the operation of section 47 (Referring privacy related complaints to other authorities) of the PPIP Act.	20 21
66	Referring privacy related complaint to Commonwealth Privacy Commissioner	22 23
(1)	The Privacy Commissioner may refer a complaint made under this Act to the Commonwealth Privacy Commissioner if it appears that the complaint should be dealt with by the Commonwealth Privacy Commissioner.	24 25 26 27
(2)	The Privacy Commissioner may communicate to the Commonwealth Privacy Commissioner any information that the Privacy Commissioner has obtained in relation to the complaint.	28 29 30
(3)	This section does not affect the operation of section 47 (Referring privacy related complaints to other authorities) of the PPIP Act.	31 32

- 67 Referring privacy related complaint to other persons or bodies** 1
- (1) The Privacy Commissioner may refer a complaint made under this Act 2
for investigation or other action to any person or body (the *relevant* 3
authority) considered by the Privacy Commissioner to be relevant in 4
the circumstances (other than as provided by section 65 or 66). 5
- (2) The Privacy Commissioner may communicate to the relevant authority 6
any information that the Privacy Commissioner has obtained in relation 7
to the complaint. 8
- (3) The Privacy Commissioner may only refer a complaint to a relevant 9
authority after appropriate consultation with the complainant and the 10
relevant authority, and after taking their views into consideration. 11
- (4) This section does not affect the operation of section 47 (Referring 12
privacy related complaints to other authorities) of the PPIP Act. 13

Part 8 Miscellaneous

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68 Corrupt disclosure or use of health information by public sector officials

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- (1) A public sector official must not, otherwise than in connection with the lawful exercise of his or her official functions, intentionally disclose or use any health information about an individual to which the official has or had access in the exercise of his or her official functions.

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Maximum penalty: 100 penalty units or imprisonment for 2 years or both.

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- (2) A person must not induce or attempt to induce a public sector official (by way of a bribe or other similar corrupt conduct) to disclose any health information about an individual to which the official has or had access in the exercise of his or her official functions.

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Maximum penalty: 100 penalty units or imprisonment for 2 years or both.

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- (3) Subsection (1) does not prohibit a public sector official from disclosing any health information if the disclosure is made in accordance with the *Protected Disclosures Act 1994*.

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- (4) In this section, a reference to a public sector official includes a reference to a person who was formerly a public sector official.

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Note. Corrupt conduct by employees or agents of private sector persons in relation to health information may be dealt with under Part 4A (Corruptly receiving commissions and other corrupt practices) of the *Crimes Act 1900*.

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69 Offering to supply health information that has been disclosed unlawfully

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- (1) A person who offers to supply (whether to a particular person or otherwise), or holds himself or herself out as being able to supply (whether to a particular person or otherwise), health information that the person knows, or ought reasonably to know, has been or is proposed to be disclosed in contravention of section 68 is guilty of an offence.

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Maximum penalty: 100 penalty units or imprisonment for 2 years, or both.

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- (2) If a person is convicted of an offence under section 68 or subsection (1), the court may order the confiscation of any money or other benefit alleged to have been obtained by the person in connection with the offence and for that money or other benefit to be forfeited to the Crown.

70 Intimidation, threats or misrepresentation

- (1) A person must not, by threat, intimidation or misrepresentation, persuade or attempt to persuade an individual:
- (a) to refrain from making or pursuing:
 - (i) a request for access to health information, or
 - (ii) a complaint to the Privacy Commissioner or the Tribunal under Part 6, or
 - (iii) an application under Part 5 of the PPIP Act with respect to the alleged contravention of a Health Privacy Principle or a health privacy code of practice, or
 - (b) to withdraw such a request, complaint or application.
- Maximum penalty: 100 penalty units.
- (2) A person must not, by threat, intimidation or false representation, require another person:
- (a) to give a consent under this Act, or
 - (b) to do, without consent, an act for which consent is required.
- Maximum penalty: 100 penalty units.

71 Legal rights not affected

- (1) Nothing in this Act gives rise to, or can be taken into account in, any civil cause of action, and, without limiting the generality of the foregoing, nothing in this Act:
- (a) operates to create in any person any legal rights enforceable in a court or tribunal otherwise than in accordance with the procedures set out in this Act, or
 - (b) affects the validity, or provides grounds for review, of any judicial or administrative act or omission.
- (2) A contravention of this Act does not create any criminal liability except to the extent expressly provided by this Act.

72 Protection from liability	1
(1) Civil proceedings do not lie against a person in respect of loss, damage or injury of any kind suffered by another person by reason only of any of the following acts done in good faith:	2
(a) the making of a complaint or application under this Act,	3
(b) the making of a statement to, or the giving of a document or information to, the Privacy Commissioner, whether or not pursuant to a requirement under section 59 or 63.	4
(2) If an organisation provides an individual with access to health information under this Act, and the access was required by HPP 7 (Access to health information) or Part 4, or an employee, officer or agent of the organisation believed in good faith that the access was required by HPP 7 or a provision of Part 4:	5
(a) no action for defamation or breach of confidence lies against the organisation, any employee, officer or agent of the organisation or the Crown by reason of the provision of access, and	6
(b) no action for defamation or breach of confidence in respect of any publication involved in, or resulting from, the giving of access lies against the person who provided the health information to the organisation by reason of the person having supplied the health information to the organisation, and	7
(c) the organisation, or any employee, officer or agent of the organisation, or any other person concerned in giving access to the health information is not guilty of an offence merely because of the giving of access.	8
(3) The provision of access to health information in the circumstances referred to in subsection (2) must not be taken to constitute, for the purposes of the law relating to defamation or breach of confidence, an authorisation or approval of the publication of the health information by the person to whom access to the information is provided.	9
73 Fees	10
(1) An organisation may charge a fee for any of the following matters:	11
(a) giving an individual a copy of health information,	12
(b) giving an individual an opportunity to inspect and take notes of the health information,	13
(c) amending health information at the request of an individual,	14

(d)	any other matter prescribed by the regulations.	1
(2)	Any fee charged must not exceed such fee (if any) prescribed by the regulations for the matter concerned.	2 3
74	Proceedings for offences	4
	Proceedings for an offence against this Act are to be dealt with summarily before a Local Court.	5 6
75	Regulations	7
(1)	The Governor may make regulations, not inconsistent with this Act, for or with respect to any matter that by this Act is required or permitted to be prescribed or that is necessary or convenient to be prescribed for carrying out or giving effect to this Act.	8 9 10 11
(2)	Without limiting the generality of subsection (1), regulations may be made for or with respect to the following matters:	12 13
(a)	disapplying any provision or provisions of Part 6 with respect to any private sector person or class of private sector persons, subject to subsection (3),	14 15 16
(b)	the manner in which health privacy codes of practice are to be prepared and developed,	17 18
(c)	exempting specified persons, private sector persons or public sector agencies, or classes of person, private sector persons or public sector agencies, from:	19 20 21
(i)	any of the requirements of this Act or the regulations relating to the collection, use or disclosure of specified classes of health information, or	22 23 24
(ii)	any other provision of this Act,	25
(d)	providing for 2 or more public sector agencies or classes of public sector agencies to be treated as a single agency:	26 27
(i)	for the purposes of this Act generally, or	28
(ii)	for the purposes of specified provisions of this Act, or	29
(iii)	for the purposes of specified Health Privacy Principles or health privacy codes of practice,	30 31
(e)	providing for 2 or more private sector persons or classes of private sector persons (including private sector persons that are related bodies corporate) to be treated as a single private sector person:	32 33 34 35
(i)	for the purposes of this Act generally, or	36

(ii)	for the purposes of specified provisions of this Act, or	1
(iii)	for the purposes of specified Health Privacy Principles or health privacy codes of practice,	2
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(f)	the auditing of compliance by organisations with the provisions of this Act, including the types of activities or conduct that may be subject to audit, the persons or bodies by whom an audit may be conducted and the frequency or timing of audits.	4
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(3)	A regulation made under subsection (2) (a) applies with respect to a private sector person only for so long as an individual is entitled to make a complaint that an act or practice by the private sector person may be an interference with the privacy of the individual (as referred to in section 13A of the <i>Privacy Act 1988</i> of the Commonwealth) under a Commonwealth privacy code binding the private sector person or class of private sector persons concerned that sets out procedures for making and dealing with complaints in relation to acts or practices of the private sector person or class of private sector persons.	8
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(4)	The regulations may create offences punishable by a penalty not exceeding 50 penalty units.	17
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(5)	In this section:	19
	<i>Commonwealth privacy code</i> means a privacy code approved by the Commonwealth Privacy Commissioner under the <i>Privacy Act 1988</i> of the Commonwealth.	20
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	<i>complaint</i> means a complaint of any kind, regardless of the nature of any remedies that may be available in respect of the complaint.	23
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76	Savings and transitional provisions	25
	Schedule 2 has effect.	26
77	Amendment of Privacy and Personal Information Protection Act 1998 No 133	27
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	The <i>Privacy and Personal Information Protection Act 1998</i> is amendment as set out in Schedule 3.	29
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78	Review of Act	31
(1)	The Minister is to review this Act to determine whether the policy objectives of the Act remain valid and whether the terms of the Act remain appropriate for securing those objectives.	32
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| (2) The review is to be undertaken as soon as possible after the period of | 1 |
| 5 years from the date of assent to this Act. | 2 |
| (3) A report on the outcome of the review is to be tabled in each House of | 3 |
| Parliament within 12 months after the end of the period of 5 years. | 4 |

Schedule 1 Health Privacy Principles	1
(Section 4)	2
1 Purposes of collection of health information	3
(1) An organisation must not collect health information unless:	4
(a) the information is collected for a lawful purpose that is directly related to a function or activity of the organisation, and	5
(b) the collection of the information is reasonably necessary for that purpose.	6
(2) An organisation must not collect health information by any unlawful means.	7
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2 Information must be relevant, not excessive, accurate and not intrusive	9
An organisation that collects health information from an individual must take such steps as are reasonable in the circumstances (having regard to the purposes for which the information is collected) to ensure that:	10
(a) the information collected is relevant to that purpose, is not excessive and is accurate, up to date and complete, and	11
(b) the collection of the information does not intrude to an unreasonable extent on the personal affairs of the individual to whom the information relates.	12
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3 Collection to be from individual concerned	16
(1) An organisation must collect health information about an individual only from that individual, unless it is unreasonable or impracticable to do so.	17
(2) Health information is to be collected in accordance with any guidelines issued by the Privacy Commissioner for the purposes of this clause.	18
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4 Individual to be made aware of certain matters	21
(1) An organisation that collects health information about an individual from the individual must, at or before the time that it collects the information (or if that is not practicable, as soon as practicable after that time), take steps that are reasonable in the circumstances to ensure that the individual is aware of the following:	22
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| (a) | the identity of the organisation and how to contact it, | 1 |
| (b) | the fact that the individual is able to request access to the information, | 2
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| (c) | the purposes for which the information is collected, | 4 |
| (d) | the persons to whom (or the types of persons to whom) the organisation usually discloses information of that kind, | 5
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| (e) | any law that requires the particular information to be collected, | 7 |
| (f) | the main consequences (if any) for the individual if all or part of the information is not provided. | 8
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| (2) | If an organisation collects health information about an individual from someone else, it must take any steps that are reasonable in the circumstances to ensure that the individual is generally aware of the matters listed in subclause (1) except to the extent that: | 10
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| (a) | making the individual aware of the matters would pose a serious threat to the life or health of any individual, or | 14
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| (b) | the collection is made in accordance with guidelines issued under subclause (3). | 16
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| (3) | The Privacy Commissioner may issue guidelines setting out circumstances in which an organisation is not required to comply with subclause (2). | 18
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| (4) | An organisation is not required to comply with a requirement of this clause if: | 21
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| (a) | the individual to whom the information relates has expressly consented to the organisation not complying with it, or | 23
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| (b) | the organisation is lawfully authorised or required not to comply with it, or | 25
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| (c) | non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law (including the <i>State Records Act 1998</i>), or | 27
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| (d) | compliance by the organisation would, in the circumstances, prejudice the interests of the individual to whom the information relates, or | 30
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| (e) | the information concerned is collected for law enforcement purposes, or | 33
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- (f) the organisation is an investigative agency and compliance might detrimentally affect (or prevent the proper exercise of) its complaint handling functions or any of its investigative functions. 1
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 - (5) If the organisation reasonably believes that the individual is incapable of understanding the general nature of the matters listed in subclause (1), the organisation must take steps that are reasonable in the circumstances to ensure that any authorised representative of the individual is aware of those matters. 5
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 - (6) Subclause (4) (e) does not remove any protection provided by any other law in relation to the rights of accused persons or persons suspected of having committed an offence. 10
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 - (7) The exemption provided by subclause (4) (f) extends to any public sector agency, or public sector official, who is investigating or otherwise handling a complaint or other matter that could be referred or made to an investigative agency, or that has been referred from or made by an investigative agency. 13
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- 5 Retention and security** 18
- (1) An organisation that holds health information must ensure that: 19
 - (a) the information is kept for no longer than is necessary for the purposes for which the information may lawfully be used, and 20
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 - (b) the information is disposed of securely and in accordance with any requirements for the retention and disposal of health information, and 22
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 - (c) the information is protected, by taking such security safeguards as are reasonable in the circumstances, against loss, unauthorised access, use, modification or disclosure, and against all other misuse, and 25
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 - (d) if it is necessary for the information to be given to a person in connection with the provision of a service to the organisation, everything reasonably within the power of the organisation is done to prevent unauthorised use or disclosure of the information. 29
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- Note.** Division 2 (Retention of health information) of Part 4 contains provisions applicable to private sector persons in connection with the matters dealt with in this clause. 34
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| (2) An organisation is not required to comply with a requirement of this clause if: | 1 |
| | 2 |
| (a) the organisation is lawfully authorised or required not to comply with it, or | 3 |
| | 4 |
| (b) non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law (including the <i>State Records Act 1998</i>). | 5 |
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| (3) An investigative agency is not required to comply with subclause (1) (a). | 8 |
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| 6 Information about health information held by organisations | 10 |
| (1) An organisation that holds health information must take such steps as are, in the circumstances, reasonable to enable any individual to ascertain: | 11 |
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| | 13 |
| (a) whether the organisation holds health information, and | 14 |
| (b) whether the organisation holds health information relating to that individual, and | 15 |
| | 16 |
| (c) if the organisation holds health information relating to that individual: | 17 |
| (i) the nature of that information, and | 18 |
| (ii) the main purposes for which the information is used, and | 19 |
| | 20 |
| (iii) that person's entitlement to request access to the information. | 21 |
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| (2) An organisation is not required to comply with a provision of this clause if: | 24 |
| | 25 |
| (a) the organisation is lawfully authorised or required not to comply with the provision concerned, or | 26 |
| | 27 |
| (b) non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law (including the <i>State Records Act 1998</i>). | 28 |
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7	Access to health information	1
(1)	An organisation that holds health information must, at the request of the individual to whom the information relates and without excessive delay or expense, provide the individual with access to the information.	2
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	Note. Division 3 (Access to health information) of Part 4 contains provisions applicable to private sector persons in connection with the matters dealt with in this clause.	5
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	Access to health information held by public sector agencies may also be available under the <i>Freedom of Information Act 1989</i> or the <i>State Records Act 1998</i> .	8
		9
(2)	An organisation is not required to comply with a provision of this clause if:	10
		11
(a)	the organisation is lawfully authorised or required not to comply with the provision concerned, or	12
		13
(b)	non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law (including the <i>State Records Act 1998</i>).	14
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8	Amendment of health information	17
(1)	An organisation that holds health information must, at the request of the individual to whom the information relates, make appropriate amendments (whether by way of corrections, deletions or additions) to ensure that the health information:	18
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(a)	is accurate, and	22
(b)	having regard to the purpose for which the information was collected (or is to be used) and to any purpose that is directly related to that purpose, is relevant, up to date, complete and not misleading.	23
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(2)	If an organisation is not prepared to amend health information under subclause (1) in accordance with a request by the individual to whom the information relates, the organisation must, if so requested by the individual concerned, take such steps as are reasonable to attach to the information, in such a manner as is capable of being read with the information, any statement provided by that individual of the amendment sought.	27
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(3)	If health information is amended in accordance with this clause, the individual to whom the information relates is entitled, if it is reasonably practicable, to have recipients of that information notified of the amendments made by the organisation.	1 2 3 4
	Note. Division 4 (Amendment of health information) of Part 4 contains provisions applicable to private sector persons in connection with the matters dealt with in this clause.	5 6 7
	Amendment of health information held by public sector agencies may also be able to be sought under the <i>Freedom of Information Act 1989</i> .	8 9
(4)	An organisation is not required to comply with a provision of this clause if:	10 11
(a)	the organisation is lawfully authorised or required not to comply with the provision concerned, or	12 13
(b)	non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law (including the <i>State Records Act 1998</i>).	14 15 16
9	Accuracy	17
	An organisation that holds health information must not use the information without taking such steps as are reasonable in the circumstances to ensure that, having regard to the purpose for which the information is proposed to be used, the information is relevant, accurate, up to date, complete and not misleading.	18 19 20 21 22
10	Limits on use of health information	23
(1)	An organisation that holds health information must not use the information for a purpose (a <i>secondary purpose</i>) other than the purpose (the <i>primary purpose</i>) for which it was collected unless:	24 25 26
(a)	Consent the individual to whom the information relates has consented to the use of the information for that secondary purpose, or	27 28 29
(b)	Direct relation the secondary purpose is directly related to the primary purpose and the individual would reasonably expect the organisation to use the information for the secondary purpose, or	30 31 32 33
	Note. For example, if information is collected in order to provide a health service to the individual, the use of the information to provide a further health service to the individual is a secondary purpose directly related to the primary purpose.	34 35 36 37

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| (c) | Serious threat to health or welfare | 1 |
| | the use of the information for the secondary purpose is | 2 |
| | reasonably believed by the organisation to be necessary to | 3 |
| | lessen or prevent: | 4 |
| | (i) a serious and imminent threat to the life, health or safety | 5 |
| | of the individual or another person, or | 6 |
| | (ii) a serious threat to public health or public safety, or | 7 |
| (d) | Management of health services | 8 |
| | the use of the information for the secondary purpose is | 9 |
| | reasonably necessary for the funding, management, planning or | 10 |
| | evaluation of health services and: | 11 |
| | (i) either: | 12 |
| | (A) that purpose cannot be served by the use of | 13 |
| | information that does not identify the individual | 14 |
| | or from which the individual's identity cannot | 15 |
| | reasonably be ascertained and it is impracticable | 16 |
| | for the organisation to seek the consent of the | 17 |
| | individual for the use, or | 18 |
| | (B) reasonable steps are taken to de-identify the | 19 |
| | information, and | 20 |
| | (ii) if the information is in a form that could reasonably be | 21 |
| | expected to identify individuals, the information is not | 22 |
| | published in a generally available publication, and | 23 |
| | (iii) the use of the information is in accordance with | 24 |
| | guidelines, if any, issued by the Privacy Commissioner | 25 |
| | for the purposes of this paragraph, or | 26 |
| (e) | Training | 27 |
| | the use of the information for the secondary purpose is | 28 |
| | reasonably necessary for the training of employees of the | 29 |
| | organisation or persons working with the organisation and: | 30 |
| | (i) either: | 31 |
| | (A) that purpose cannot be served by the use of | 32 |
| | information that does not identify the individual | 33 |
| | or from which the individual's identity cannot | 34 |
| | reasonably be ascertained and it is impracticable | 35 |
| | for the organisation to seek the consent of the | 36 |
| | individual for the use, or | 37 |
| | (B) reasonable steps are taken to de-identify the | 38 |
| | information, and | 39 |

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| (ii) | if the information could reasonably be expected to identify individuals, the information is not published in a generally available publication, and | 1
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| (iii) | the use of the information is in accordance with guidelines, if any, issued by the Privacy Commissioner for the purposes of this paragraph, or | 4
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| (f) | Research
the use of the information for the secondary purpose is reasonably necessary for research, or the compilation or analysis of statistics, in the public interest and: | 7
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| (i) | either: | 11 |
| (A) | that purpose cannot be served by the use of information that does not identify the individual or from which the individual's identity cannot reasonably be ascertained and it is impracticable for the organisation to seek the consent of the individual for the use, or | 12
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| (B) | reasonable steps are taken to de-identify the information, and | 18
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| (ii) | if the information could reasonably be expected to identify individuals, the information is not published in a generally available publication, and | 20
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| (iii) | the use of the information is in accordance with guidelines, if any, issued by the Privacy Commissioner for the purposes of this paragraph, or | 23
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| (g) | Find missing person
the use of the information for the secondary purpose is by a law enforcement agency (or such other person or organisation as may be prescribed by the regulations) for the purposes of ascertaining the whereabouts of an individual who has been reported to a police officer as a missing person, or | 26
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| (h) | Suspected unlawful activity, unsatisfactory professional conduct or breach of discipline
the organisation: | 32
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| (i) | has reasonable grounds to suspect that: | 35 |
| (A) | unlawful activity has been or may be engaged in, or | 36
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| (B) | a person has or may have engaged in conduct that may be unsatisfactory professional conduct or professional misconduct under a health registration Act, or | 38
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| <p>(C) an employee of the organisation has or may have engaged in conduct that may be grounds for disciplinary action, and</p> <p>(ii) uses the health information as a necessary part of its investigation of the matter or in reporting its concerns to relevant persons or authorities, or</p> <p>(i) Law enforcement
the use of the information for the secondary purpose is reasonably necessary for the exercise of law enforcement functions by law enforcement agencies in circumstances where there are reasonable grounds to believe that an offence may have been, or may be, committed, or</p> <p>(j) Investigative agencies
the use of the information for the secondary purpose is reasonably necessary for the exercise of complaint handling functions or investigative functions by investigative agencies, or</p> <p>(k) Prescribed circumstances
the use of the information for the secondary purpose is in the circumstances prescribed by the regulations for the purposes of this paragraph.</p> <p>(2) An organisation is not required to comply with a provision of this clause if:</p> <p>(a) the organisation is lawfully authorised or required not to comply with the provision concerned, or</p> <p>(b) non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law (including the <i>State Records Act 1998</i>).</p> <p>(3) The Ombudsman's Office, Health Care Complaints Commission, Anti-Discrimination Board and Community Services Commission are not required to comply with a provision of this clause in relation to their complaint handling functions and their investigative, review and reporting functions.</p> <p>(4) Nothing in this clause prevents or restricts the disclosure of health information by a public sector agency:</p> <p>(a) to another public sector agency under the administration of the same Minister if the disclosure is for the purposes of informing that Minister about any matter within that administration, or</p> | <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p> <p>26</p> <p>27</p> <p>28</p> <p>29</p> <p>30</p> <p>31</p> <p>32</p> <p>33</p> <p>34</p> <p>35</p> <p>36</p> <p>37</p> <p>38</p> |
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(b)	to any public sector agency under the administration of the Premier, if the disclosure is for the purposes of informing the Premier about any matter.	1 2 3
(5)	The exemption provided by subclause (1) (j) extends to any public sector agency, or public sector official, who is investigating or otherwise handling a complaint or other matter that could be referred or made to an investigative agency, or that has been referred from or made by an investigative agency.	4 5 6 7 8
11	Limits on disclosure of health information	9
(1)	An organisation that holds health information must not disclose the information for a purpose (a <i>secondary purpose</i>) other than the purpose (the <i>primary purpose</i>) for which it was collected unless:	10 11 12
(a)	Consent the individual to whom the information relates has consented to the disclosure of the information for that secondary purpose, or	13 14 15 16
(b)	Direct relation the secondary purpose is directly related to the primary purpose and the individual would reasonably expect the organisation to disclose the information for the secondary purpose, or	17 18 19 20
	Note. For example, if information is collected in order to provide a health service to the individual, the disclosure of the information to provide a further health service to the individual is a secondary purpose directly related to the primary purpose.	21 22 23 24
(c)	Serious threat to health or welfare the disclosure of the information for the secondary purpose is reasonably believed by the organisation to be necessary to lessen or prevent:	25 26 27 28
(i)	a serious and imminent threat to the life, health or safety of the individual or another person, or	29 30
(ii)	a serious threat to public health or public safety, or	31
(d)	Management of health services the disclosure of the information for the secondary purpose is reasonably necessary for the funding, management, planning or evaluation of health services and:	32 33 34 35
(i)	either:	36
(A)	that purpose cannot be served by the disclosure of information that does not identify the individual or from which the individual's	37 38 39

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- identity cannot reasonably be ascertained and it is impracticable for the organisation to seek the consent of the individual for the disclosure, or
 - (B) reasonable steps are taken to de-identify the information, and
 - (ii) if the information could reasonably be expected to identify individuals, the information is not published in a generally available publication, and
 - (iii) the disclosure of the information is in accordance with guidelines, if any, issued by the Privacy Commissioner for the purposes of this paragraph, or
 - (e) **Training**
 - the disclosure of the information for the secondary purpose is reasonably necessary for the training of employees of the organisation or persons working with the organisation and:
 - (i) either:
 - (A) that purpose cannot be served by the disclosure of information that does not identify the individual or from which the individual's identity cannot reasonably be ascertained and it is impracticable for the organisation to seek the consent of the individual for the disclosure, or
 - (B) reasonable steps are taken to de-identify the information, and
 - (ii) if the information could reasonably be expected to identify the individual, the information is not made publicly available, and
 - (iii) the disclosure of the information is in accordance with guidelines, if any, issued by the Privacy Commissioner for the purposes of this paragraph, or
 - (f) **Research**
 - the disclosure of the information for the secondary purpose is reasonably necessary for research, or the compilation or analysis of statistics, in the public interest and:
 - (i) either:
 - (A) that purpose cannot be served by the disclosure of information that does not identify the individual or from which the individual's identity cannot reasonably be ascertained and it is impracticable for the organisation to seek the consent of the individual for the disclosure, or

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| | (B) reasonable steps are taken to de-identify the information, and | 1 |
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| (ii) | the disclosure will not be published in a form that identifies particular individuals or from which an individual's identity can reasonably be ascertained, and | 3 |
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| (iii) | the disclosure of the information is in accordance with guidelines, if any, issued by the Privacy Commissioner for the purposes of this paragraph, or | 6 |
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| (g) | Compassionate reasons | 9 |
| | the disclosure of the information for the secondary purpose is to provide the information to an immediate family member of the individual for compassionate reasons and: | 10 |
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| | | 12 |
| (i) | the disclosure is limited to the extent reasonable for those compassionate reasons, and | 13 |
| | | 14 |
| (ii) | the individual is incapable of giving consent to the disclosure of the information, and | 15 |
| | | 16 |
| (iii) | the disclosure is not contrary to any wish expressed by the individual (and not withdrawn) of which the organisation was aware or could make itself aware by taking reasonable steps, and | 17 |
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| (iv) | if the immediate family member is under the age of 18 years, the organisation reasonably believes that the family member has sufficient maturity in the circumstances to receive the information, or | 21 |
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| (h) | Find missing person | 25 |
| | the disclosure of the information for the secondary purpose is to a law enforcement agency (or such other person or organisation as may be prescribed by the regulations) for the purposes of ascertaining the whereabouts of an individual who has been reported to a police officer as a missing person, or | 26 |
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| (i) | Suspected unlawful activity, unsatisfactory professional conduct or breach of discipline | 31 |
| | the organisation: | 32 |
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| (i) | has reasonable grounds to suspect that: | 34 |
| | (A) unlawful activity has been or may be engaged in, or | 35 |
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| | (B) a person has or may have engaged in conduct that may be unsatisfactory professional conduct or professional misconduct under a health registration Act, or | 37 |
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| <p>(C) an employee of the organisation has or may have engaged in conduct that may be grounds for disciplinary action, and</p> <p>(ii) discloses the health information as a necessary part of its investigation of the matter or in reporting its concerns to relevant persons or authorities, or</p> <p>(j) Law enforcement
the disclosure of the information for the secondary purpose is reasonably necessary for the exercise of law enforcement functions by law enforcement agencies in circumstances where there are reasonable grounds to believe that an offence may have been, or may be, committed, or</p> <p>(k) Investigative agencies
the use of the information for the secondary purpose is reasonably necessary for the exercise of complaint handling functions or investigative functions by investigative agencies, or</p> <p>(l) Prescribed circumstances
the disclosure of the information for the secondary purpose is in the circumstances prescribed by the regulations for the purposes of this paragraph.</p> <p>(2) An organisation is not required to comply with a provision of this clause if:</p> <p style="padding-left: 20px;">(a) the organisation is lawfully authorised or required not to comply with the provision concerned, or</p> <p style="padding-left: 20px;">(b) non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law (including the <i>State Records Act 1998</i>), or</p> <p style="padding-left: 20px;">(c) the organisation is an investigative agency disclosing information to another investigative agency.</p> <p>(3) The Ombudsman's Office, Health Care Complaints Commission, Anti-Discrimination Board and Community Services Commission are not required to comply with a provision of this clause in relation to their complaint handling functions and their investigative, review and reporting functions.</p> <p>(4) Nothing in this clause prevents or restricts the disclosure of health information by a public sector agency:</p> | <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p> <p>26</p> <p>27</p> <p>28</p> <p>29</p> <p>30</p> <p>31</p> <p>32</p> <p>33</p> <p>34</p> <p>35</p> <p>36</p> <p>37</p> |
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| <ul style="list-style-type: none"> (a) to another public sector agency under the administration of the same Minister if the disclosure is for the purposes of informing that Minister about any matter within that administration, or (b) to any public sector agency under the administration of the Premier, if the disclosure is for the purposes of informing the Premier about any matter. <p>(5) If health information is disclosed in accordance with subclause (1), the person, body or organisation to whom it was disclosed must not use or disclose the information for a purpose other than the purpose for which the information was given to it.</p> <p>(6) The exemptions provided by subclauses (1) (k) and (2) extend to any public sector agency, or public sector official, who is investigating or otherwise handling a complaint or other matter that could be referred or made to an investigative agency, or that has been referred from or made by an investigative agency.</p> <p>12 Identifiers</p> <p>(1) An organisation may only assign identifiers to individuals if the assignment of identifiers is reasonably necessary to enable the organisation to carry out any of its functions efficiently.</p> <p>(2) Subject to subclause (4), a private sector person may only adopt as its own identifier of an individual an identifier of an individual that has been assigned by a public sector agency (or by an agent of, or contractor to, a public sector agency acting in its capacity as agent or contractor) if:</p> <ul style="list-style-type: none"> (a) the individual has consented to the adoption of the same identifier, or (b) the use or disclosure of the identifier is required or authorised by or under law. <p>(3) Subject to subclause (4), a private sector person may only use or disclose an identifier assigned to an individual by a public sector agency (or by an agent of, or contractor to, a public sector agency acting in its capacity as agent or contractor) if:</p> <ul style="list-style-type: none"> (a) the use or disclosure is required for the purpose for which it was assigned or for a secondary purpose referred to in one or more paragraphs of HPP 10 (1) (c)–(k) or 11 (1) (c)–(l), or (b) the individual has consented to the use or disclosure, or | <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p> <p>26</p> <p>27</p> <p>28</p> <p>29</p> <p>30</p> <p>31</p> <p>32</p> <p>33</p> <p>34</p> <p>35</p> <p>36</p> |
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(c)	the disclosure is to the public sector agency that assigned the identifier to enable the public sector agency to identify the individual for its own purposes.	1 2 3
(4)	If the use or disclosure of an identifier assigned to an individual by a public sector agency is necessary for a private sector person to fulfil its obligations to, or the requirements of, the public sector agency, a private sector person may either:	4 5 6 7
(a)	adopt as its own identifier of an individual an identifier of the individual that has been assigned by the public sector agency, or	8 9 10
(b)	use or disclose an identifier of the individual that has been assigned by the public sector agency.	11 12
13	Anonymity	13
	Wherever it is lawful and practicable, individuals must be given the opportunity to not identify themselves when entering into transactions with or receiving health services from an organisation.	14 15 16
14	Transborder data flows and data flow to Commonwealth agencies	17
	An organisation must not transfer health information about an individual to any person or body who is in a jurisdiction outside New South Wales or to a Commonwealth agency unless:	18 19 20
(a)	the organisation reasonably believes that the recipient of the information is subject to a law, binding scheme or contract that effectively upholds principles for fair handling of the information that are substantially similar to the Health Privacy Principles, or	21 22 23 24 25
(b)	the individual consents to the transfer, or	26
(c)	the transfer is necessary for the performance of a contract between the individual and the organisation, or for the implementation of pre-contractual measures taken in response to the individual's request, or	27 28 29 30
(d)	the transfer is necessary for the conclusion or performance of a contract concluded in the interest of the individual between the organisation and a third party, or	31 32 33
(e)	all of the following apply:	34
(i)	the transfer is for the benefit of the individual,	35

	(ii)	it is impracticable to obtain the consent of the individual to that transfer,	1
	(iii)	if it were practicable to obtain such consent, the individual would be likely to give it, or	2
	(f)	the transfer is reasonably believed by the organisation to be necessary to lessen or prevent:	3
	(i)	a serious and imminent threat to the life, health or safety of the individual or another person, or	4
	(ii)	a serious threat to public health or public safety, or	5
	(g)	the organisation has taken reasonable steps to ensure that the information that it has transferred will not be held, used or disclosed by the recipient of the information inconsistently with the Health Privacy Principles, or	6
	(h)	the transfer is permitted or required by an Act (including an Act of the Commonwealth) or any other law.	7
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15	Linkage of health records		16
	(1)	An organisation must not:	17
	(a)	include health information about an individual in a health records linkage system unless the individual has expressly consented to the information being so included, or	18
			19
			20
	(b)	disclose an identifier of an individual to any person if the purpose of the disclosure is to include health information about the individual in a health records linkage system, unless the individual has expressly consented to the identifier being disclosed for that purpose.	21
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	(2)	An organisation is not required to comply with a provision of this clause if:	26
			27
	(a)	the organisation is lawfully authorised or required not to comply with the provision concerned, or	28
			29
	(b)	non-compliance is otherwise permitted (or is necessarily implied or reasonably contemplated) under an Act or any other law (including the <i>State Records Act 1998</i>), or	30
			31
			32
	(c)	the inclusion of the health information about the individual in the health records information system (including an inclusion for which an identifier of the individual is to be disclosed) is a use of the information that complies with HPP 10 (1) (f) or a disclosure of the information that complies with HPP 11 (1) (f).	33
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- (3) In this clause: 1
- health record*** means an ongoing record of health care for an 2
individual. 3
- health records linkage system*** means a computerised system that is 4
designed to link health records for an individual held by different 5
organisations for the purpose of facilitating access to health records, 6
and includes a system or class of systems prescribed by the regulations 7
as being a health records linkage system, but does not include a system 8
or class of systems prescribed by the regulations as not being a health 9
records linkage system. 10

Schedule 2 Savings and transitional provisions

(Section 76)

1 Regulations

- (1) The regulations may contain provisions of a savings or transitional nature consequent on the enactment of the following Acts:
this Act
- (2) Without limiting subclause (1), the regulations may make provision for or with respect to the following matters:
 - (a) exempting organisations or classes of organisations from the operation of this Act in connection with the performance of contracts entered into before the date of assent to this Act,
 - (b) providing that a privacy code of practice dealing with health information in force under the *Privacy and Personal Information Protection Act 1998* is taken to be a health privacy code of practice in force under this Act.
- (3) Any provision referred to in subclause (1) may, if the regulations so provide, take effect from the date of assent to the Act concerned or a later date.
- (4) To the extent to which any such provision takes effect from a date that is earlier than the date of its publication in the Gazette, the provision does not operate so as:
 - (a) to affect, in a manner prejudicial to any person (other than the State or an authority of the State), the rights of that person existing before the date of its publication, or
 - (b) to impose liabilities on any person (other than the State or an authority of the State) in respect of anything done or omitted to be done before the date of its publication.

2 Privacy Commissioner may exempt

The Privacy Commissioner may, on application by an organisation, grant the organisation an exemption from the operation of HPP 10 or 11 in relation to specified information (or information of a specified class for a specified period) collected by the organisation before the commencement of this clause if:

Health Records and Information Privacy Bill 2002

Schedule 2 Savings and transitional provisions

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| (a) | the Privacy Commissioner is of the opinion that, in the particular circumstances, it is in the public interest for the use or disclosure to continue otherwise than in accordance with HPP 10 or 11, and | 1
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| (b) | the period of any exemption expires before the second anniversary of the commencement of this clause. | 5
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Schedule 3 Amendment of Privacy and Personal Information Protection Act 1998

(Section 77)

[1] Section 3 Definitions

Insert in alphabetical order:

Commonwealth agency means an entity referred to in paragraph (a)–(h) of the definition of *agency* in the *Privacy Act 1988* of the Commonwealth.

[2] Section 3

Insert at the end of the section:

- (2) Notes included in this Act are explanatory notes and do not form part of this Act.

[3] Section 4A

Insert after section 4:

4A Exclusion of health information from definition of “personal information”

Except as provided by this Act or the *Health Records and Information Privacy Act 2002*, the definition of *personal information* in section 4 does not include health information within the meaning of the *Health Records and Information Privacy Act 2002*.

[4] Section 15 Alteration of personal information

Insert after section 15 (3):

- (4) This section, and any provision of a privacy code of practice that relates to the requirements set out in this section, apply to public sector agencies despite section 25 of this Act and section 21 of the *State Records Act 1998*.

[5] Section 19 Special restrictions on disclosure of personal information	1
Omit “membership, health or sexual” from section 19 (1).	2
Insert instead “membership or sexual”.	3
[6] Section 19 (1)	4
Omit “serious or imminent threat”.	5
Insert instead “serious and imminent threat”.	6
[7] Section 19 (2)	7
Insert “or to a Commonwealth agency” after “New South Wales”.	8
[8] Section 19 (2) (a)	9
Insert “or applies to that Commonwealth agency” after “in force in that jurisdiction”.	10
	11
[9] Section 19 (4)	12
Omit “, within the year following the commencement of this section,”.	13
[10] Section 19 (4)	14
Insert “and to Commonwealth agencies” after “outside New South Wales”.	15
[11] Section 20 General application of information protection principles to public sector agencies	16
	17
Omit section 20 (4).	18
[12] Section 28 Other exemptions	19
Omit section 28 (2).	20

[13] Section 33 Preparation and implementation of privacy management plans	1 2
Insert “or the <i>Health Records and Information Privacy Act 2002</i> , if applicable” after “this Act” in section 33 (2) (a).	3 4
[14] Section 43 Requirement to disclose exempt documents	5
Insert “or the <i>Health Records and Information Privacy Act 2002</i> ” after “Nothing in this Act” in section 43 (1).	6 7
[15] Section 43 (2) (b)	8
Insert “or the <i>Health Records and Information Privacy Act 2002</i> ” after “this Act”.	9 10
[16] Section 44 Delegation of functions	11
Insert “under this or any other Act” after “any of the functions of the Privacy Commissioner” in section 44 (1).	12 13
[17] Section 45 Making of privacy related complaints	14
Insert after section 45 (2):	15
Note. Section 21 of the <i>Health Records and Information Privacy Act 2002</i> provides that certain conduct under that Act by public sector agencies is conduct to which Part 5 of this Act applies.	16 17 18
[18] Section 45 (2A)	19
Insert after section 45 (2):	20
(2A) A complaint about a matter referred to in section 42 of the <i>Health Records and Information Privacy Act 2002</i> is not to be dealt with under this Division but is to be dealt with by the Privacy Commissioner as a complaint under Part 6 of that Act.	21 22 23 24
Note. Section 42 of that <i>Health Records and Information Privacy Act 1998</i> provides that a complaint may be made to the Privacy Commissioner about the alleged contravention by a private sector person of a Health Privacy Principle, a provision of Part 4 (Provisions for private sector persons) of that Act or a health privacy code of practice.	25 26 27 28 29

[19] Section 56A	1
Insert before section 57:	2
56A Personal information includes health information	3
In this Part:	4
<i>personal information</i> includes health information within the	5
meaning of the <i>Health Records and Information Privacy</i>	6
<i>Act 2002</i> .	7
[20] Section 66 Personal liability of Privacy Commissioner and others	8
Insert “or any other Act” after “this Act”.	9
[21] Sections 66A and 66B	10
Insert after section 66:	11
66A Protection from liability	12
(1) Civil proceedings do not lie against a person in respect of loss,	13
damage or injury of any kind suffered by another person by	14
reason only of any of the following acts done in good faith:	15
(a) the making of a complaint or application under this Act,	16
(b) the making of a statement to, or the giving of a	17
document or information to, the Privacy Commissioner,	18
whether or not pursuant to a requirement under	19
section 37.	20
(2) If a public sector agency provides an individual with access to	21
personal information under this Act, and the access was	22
required by section 14 (Access to personal information held by	23
agencies), or an employee, officer or agent of the public sector	24
agency believed in good faith that the access was required by	25
section 14:	26
(a) no action for defamation or breach of confidence lies	27
against the public sector agency, any employee, officer	28
or agent of the agency or the Crown by reason of the	29
provision of access, and	30

- ## 66B Fees

- [22] Section 67 Disclosure by Privacy Commissioner or staff member**

Insert “or any other Act” after “this Act” in section 67 (2). 30

[23] Section 68 Offences relating to dealings with Privacy Commissioner	1
Insert “or the <i>Health Records and Information Privacy Act 2002</i> ” after “this Act” in section 68 (2) (c).	2 3
[24] Schedule 4 Savings, transitional and other provisions	4
Omit “this Act.” from clause 1 (1) of Schedule 4.	5
Insert instead “the following Acts:	6
this Act	7
the <i>Health Records and Information Privacy Act 2002</i> , but only to the extent that it amends this Act”	8 9
[25] Schedule 4	10
Insert after clause 5:	11
6 Provisions consequential on enactment of Health Records and Information Privacy Act 2002	12 13
(1) In this clause:	14
<i>health information</i> has the same meaning as in the HRIP Act.	15
<i>HRIP Act</i> means the <i>Health Records and Information Privacy Act 2002</i> .	16 17
(2) A request made under this Act before the commencement of section 4A for access to, or alteration of, health information is to continue to be dealt with by the public sector agency under this Act as if the amendments to this Act by the HRIP Act had not been made.	18 19 20 21 22
(3) A complaint concerning health information made to the Privacy Commissioner under Division 3 of Part 4 before the commencement of section 4A and pending immediately before that commencement is to continue to be dealt with under this Act as if the amendments to this Act by the HRIP Act had not been made. This Act (as in force immediately before the commencement of those amendments) continues to apply for that purpose.	23 24 25 26 27 28 29 30
(4) An application concerning health information made under section 53 (Internal review by public sector agencies) or section 55 (Review of conduct by Tribunal) before the	31 32 33

commencement of section 4A and pending immediately before
that commencement is to continue to be dealt with by the
public sector agency or the Tribunal under this Act as if the
amendments to this Act by the HRIP Act had not been made.
This Act (as in force immediately before the commencement of
those amendments) continues to apply for that purpose.

- (5) For the purpose of allowing a complaint or application to be
made in respect of conduct concerning health information that
was engaged in before the commencement of section 4A, but
in respect of which a complaint or application was not pending
immediately before that commencement, this Act (as in force
immediately before the commencement of the amendments
made by the HRIP Act) continues to apply to conduct engaged
in before the commencement of section 4A.