

Privacy complaint checklist

The *Privacy and Personal Information Protection Act 1998* (the PPIP Act) and the *Health Records and Information Privacy Act 2002* (the HRIP Act) provide that public sector agencies deal with complaints by way of Internal Review. This process is the same under both Acts although you will be assessing the alleged conduct against different standards (the IPPs and the HPPs).

A privacy complaint may come under:

- the PPIP Act, section 53, if it relates to personal information, and the Information Protection Principles (IPPs), or
- the HRIP Act, section 21, if it relates to health information and the Health Privacy Principles (HPPs).

This checklist is to be followed by the reviewing officer assigned to handle a written privacy complaint.

	STEPS TO FOLLOW:	DATE COMPLETED
1)	Is the complaint about someone's <i>personal information?</i>	
	(Personal information means information or an opinion about an individual whose identity is apparent or can reasonably be ascertained from the information or opinion. There are some exemptions to the definition, so if in doubt check s.4 of the PPIP Act.)	
	Yes – We must treat their complaint as a request for an internal review under the PPIP Act. Go to Q.2	
	☐ No – The PPIP Act does not apply. Follow our normal complaint handling procedures. Refer the complaint to the relevant manager within the Library.	
2)	The Manager, Enterprise Information Services, must appoint one or more reviewing officers. (See the procedure 'Dealing with a privacy complaint' for the requirements.)	
	Insert the reviewing officer's name here:	
3)	According to the applicant, when did the alleged <i>conduct</i> occur?	
	(Conduct that can be complained about includes an <i>event, action, decision, or even inaction by the Library</i> . For example a decision to refuse a person access to their personal information, or the action of disclosing someone's personal information to another person, or the inaction of a failure to protect a person's personal information from being inappropriately accessed by someone else.) Insert the date here:	
4)	Is the complaint about conduct that occurred after 1 July 2000?	
	☐ Yes – Go to Q.5	
	☐ No – The PPIP Act does not apply. Follow the Library's normal complaint handling procedures.	
5)	Is the complaint about health information and conduct that occurred after 1 September 2004?	
	Yes, exclusively about health information – We will need to assess the conduct as against the HPPs.	
	Yes, but a mix of both health information and other kinds of personal information – We will need to assess the conduct as against the HPPs, <i>and</i> against the IPPs.	
	\square No – We will need to assess the conduct as against the IPPs only.	
6)	Record here which privacy principles we'll need to look at (based on your answers to Q's 4 and 5?	

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	☐ the IPPs only	
	☐ the HPPs only	
	both the IPPs and the HPPs	
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7)	According to the applicant, when did they first become aware of the alleged conduct?	
8)	When was this application / privacy complaint first lodged?	
	(Applicants don't need to use our <i>Privacy complaint – request for internal review</i> form. The first date on which we first received a written complaint about the conduct will count as the date on which an application for internal review was lodged, so long as there was some indication that the applicant was identifying privacy or the handling of personal information as part of their complaint.)	
9)	Has <i>more than six months</i> lapsed between the date on which the applicant first became aware of the alleged conduct (see the date at Q.7), and the date when they first made a formal privacy complaint (see the date at Q.8)?	
	☐ Yes – Go to Q.10	
10)	If more than six months lapsed, this is a late application. We have absolute discretion as to whether or not to accept a late application.	
	Will we accept this late application?	
	☐ Yes – Go to Q.11	
	☐ No – Explain our reasons to the applicant, then follow our normal complaint handling procedures. Refer the complaint to the relevant manager within the Library.	
11)	When will 60 days elapse from the date at Q.8?	
	(After this date the applicant may go to the NSW Civil and Administrative Tribunal without waiting for the results of this review.)	
12)	Tick all the following stages in the 'information life cycle' which the conduct may have affected:	
	☐ collection of personal information	
	\square security or storage of personal information	
	$\ \square$ refusal to let a person access or find out about their own personal information	
	accuracy or relevance of a person's personal information	
	use of a person's personal information	
	☐ disclosure of a person's personal information	
	☐ lack of anonymity in providing services	
	☐ use of a unique personal identifier☐ other / it's not clear	
	(Note: Check to see if the applicant has used our <i>Privacy complaint – request for internal review</i> form; they may have ticked which of these they believe apply to their complaint.)	
13)	Write to the applicant, stating:	
	\square your understanding of the <i>conduct</i> complained about	
	☐ your understanding of which privacy principle/s might be at issue (see Q.12)	
	\square that we are conducting an internal review under the PPIP Act	
	the name, title, and contact details of the reviewing officer	
	how the reviewing officer is independent of the person/s responsible for the alleged	

	conduct	
	\square the estimated completion date for the review process	
	that if our review is not complete by the date at Q.11, they can go to the NSW Civil and Administrative Tribunal for an external review of the alleged conduct	
	that a copy of this letter will be provided to the NSW Privacy Commissioner for their oversight role	
14)	Send a copy of your letter (from Q.13) to the NSW Privacy Commissioner, GPO Box 7011, SYDNEY NSW 2001; or email ipcinfo@ipc.nsw.gov.au . Include a copy of the original application.	
15)	Diarise critical dates for this review process, including:	
	$\ \square$ the date on which the applicant can appeal to the NSW Civil and Administrative Tribunal if our review report is late (the date at Q.11), and	
	the date 4 weeks from now, when you should send a progress report to the applicant and the Privacy Commissioner (see Q.17 below)	
	INVESTIGATION (FACT-FINDING)	
16)	Conduct the fact-finding aspect of the review first. You need to determine whether or not the alleged conduct occurred, and if it did, exactly what happened.	
	If this investigation stage will require particular forensic skills not possessed by the reviewing officer, you may need to consider either (i) involving a second reviewing officer for this stage in the process, and/or (ii) seeking the assistance of an external investigative specialist. (For example if the conduct complained of involves an alleged 'hacking' into a database, specialist forensic computer skills may be required.) The Manager, Enterprise Information Services will determine whether one or both of these measures is required.	
	At the conclusion of this stage, write a report outlining whether or not there was sufficient evidence to establish that the alleged conduct occurred.	
	Was there sufficient evidence to establish that the alleged conduct occurred?	
	☐ Yes – Go to Q.17	
	□ No – Go to Q.19	
17)	Four weeks after sending the letter at Q.13, send a progress report to the applicant, and the Privacy Commissioner. Include:	
	$\ \square$ an estimated completion date for the review process	
	\square an explanation of any reasons for delay	
	a reminder that if the review is not complete by the date at Q.11, the applicant can go to the NSW Civil and Administrative Tribunal for an external review of the alleged conduct	
	ANALYSE CONDUCT AS AGAINST THE PRIVACY PRINCIPLES	
18)	Once you are satisfied as to what conduct occurred, you need to analyse whether or not that conduct complied with the relevant privacy principles.	
	See Q.12 for the starting point, for the most likely privacy principles that will need to be reviewed. However you should actually look at all the privacy principles along the 'information life cycle', as they can be inter-related. For example a complaint about disclosure might also raise issues about data security, or what notification was given at the time of collection.	
	Check the answer written at Q.6 (above) to see which <i>set</i> of privacy principles you need to consider: the IPPs, HPPs, or both.	
	In many cases, the IPPs and HPPs use the same wording and have the same or similar exemptions. Use our <i>Guide to our privacy obligations</i> as a starting point, but always check the exact wording of the principles and any exemptions before concluding your analysis. Case law from the NSW Civil and Administrative Tribunal can provide some assistance in interpreting and applying the law.	

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	If this investigation stage will require particular legal or analytical skills not possessed by the reviewing officer, you may need to consider either (i) involving a second reviewing officer for this stage in the process, and/or (ii) seeking the assistance of an external specialist. The Manager, Enterprise Information Services will determine whether one or both of these measures is required.	
	At the conclusion of this stage, write a report outlining:	
	\square whether the conduct complied with the relevant privacy principle/s (i.e. the relevant IPPs, and/or HPPs) and	
	if the conduct did not comply with the relevant privacy principle/s, whether the non-compliance was authorised by an exemption	
	RECOMMENDATIONS AND ACTION	
19)	Write up the review's findings about the facts, the law, and your interpretation of the law.	
	Set out your preliminary determination about:	
	 whether or not there was sufficient evidence to establish that the alleged conduct occurred 	
	\square which of the privacy principles you examined and why	
	\square whether the conduct complied with the relevant privacy principle/s	
	if the conduct did not comply with the relevant privacy principle/s, whether the non-compliance was authorised by an exemption	
	\square a recommended action for the Library by way of response or remedy	
20)	Before completing the review, check whether the Privacy Commissioner wishes to make a submission. Provide a draft copy of your preliminary determination to the Privacy Commissioner for comment.	
21)	Finalise your determination of the internal review, by making one of the following findings:	
	\square there was insufficient evidence to suggest alleged conduct occurred	
	\square the alleged conduct occurred but complied with the relevant privacy principle/s	
	\square the alleged conduct occurred, did not comply with the relevant privacy principle/s, but the non-compliance was authorised by an exemption	
	the alleged conduct occurred, did not comply with the relevant privacy principle/s, and the non-compliance was not authorised ("a breach")	
22)	Did the Library breach one or more privacy principles without authorisation?	
	☐ Yes – Go to Q.24	
	□ No – Go to Q.23	
23)	Even though the Library did not breach any privacy principles, have you identified any need for improvement in policies, procedures, communication with our clients, etc?	
	☐ Yes – Go to Q.24	
	☐ No – Go to Q.25	
24)	Consider what might be appropriate recommendations for action as a result of this review. In doing so, consider what might match the expectations of the applicant (see what they wrote at Q.vi on the <i>Privacy complaint – request for internal review</i> form), as well as how to minimise risks of similar complaints for the Library.	
	What recommendations do you make for action as a result of this review? (You can have more than one.)	
	☐ apology to applicant	
	rectification to applicant (e.g. access to, or amendment of, their personal information)	
	expenses or compensatory damages paid to applicant	

	\square other remedy to applicant	
	\square change in (or review of) policies, practices or systems	
	\square training (or further training) for staff	
	\square other action	
	☐ no action	
25)	Provide your report, with both its findings (as per Q.21), and your recommendations (as per Q.24), to the NSW State Librarian and Chief Executive. (If the NSW State Librarian and Chief Executive is unavailable or has a conflict of interest, this role will be undertaken by one of the Directors or the Mitchell Librarian instead.)	
	The NSW State Librarian and Chief Executive (or Director/Mitchell Librarian) will determine whether or not to accept the report and its recommendations for action. Once this is settled, go to Q.26	
26)	Notify the applicant and the Privacy Commissioner in writing:	
	☐ that you have completed the internal review	
	☐ what the review's findings are	
	\square what the reasons for the findings are	
	 a plain language explanation of the law behind your findings, but also including extracts of any sections of the law relied on 	
	☐ what action the Library is going to take as a result	
	 that the applicant has the right to apply to the NSW Civil and Administrative Tribunal (within 28 days of the date of this letter) for a review of the conduct complained about 	
	☐ the contact details for the Tribunal	
27)	The review is now complete	

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