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| Notifiable data breach form |
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This form is used to notify the National Health Practitioner Privacy Commissioner (the Commissioner) of an eligible data breach when required by the *Privacy Act 1988* (Cwlth) (Privacy Act).

Nominated privacy officers are encouraged to contact our office by telephone prior to submitting this form as part of the assessment of whether a breach meets the threshold of being an eligible data breach.

Although notification is not formally required for breaches assessed to be unlikely to result in serious harm to affected individuals, the Commissioner welcomes voluntary disclosure of any data breaches.

Completed forms should be emailed to [privacy@nhpo.gov.au](mailto:privacy@nhpo.gov.au) as soon as is practicable after it has been assessed that an eligible data breach has occurred.

# The Notifiable Data Breaches Scheme

The Australian Health Practitioner Regulation Agency (Ahpra),the National Health Practitioner Boards (the Boards) and accreditation organisations, including specialist medical colleges, are subject to the Notifiable Data Breaches Scheme (the scheme) under Part IIIC of the Privacy Act.

This means that these organisations are required by law to notify any affected individual and the Commissioner of eligible data breaches. To meet the threshold of being an eligible data breach, the breach must be likely to result in serious harm to any individual. Further information about [identifying eligible data breaches](https://www.oaic.gov.au/identifying-eligible-data-breaches) is available on the Office of the Australian Information Commissioner (OAIC) website.

# What to expect once a notification is made

We will acknowledge receipt of an eligible data breach notification within two workings days.

We may choose to make further enquiries about the data breach if more information is required. We may also offer guidance and assistance in relation to possible remedial action or steps that can be taken to reduce the likelihood of a similar breach occurring in the future.

While it is possible for the Commissioner to take regulatory action, our preferred approach is to work collaboratively to ensure compliance with the Privacy Act.

# Personal information

We use information about eligible data breaches and voluntary disclosures in any review of data security and to address systemic issues as they arise.

We handle personal information collected in this form in accordance with the Australian Privacy Principles.

We collect this information to consider and respond to data breach notifications. More information about how we handle personal information is available in our [Privacy Policy](https://www.nhpo.gov.au/privacy-and-confidentiality).

# Part one – Statement about an eligible data breach

Part one is a statement about the data breach and is required by section 26WK of the Privacy Act.

Notifications to affected individuals must include the information provided in part one of this form.

For further information see the OAIC’s resource: [What to include in an eligible data breach statement](https://www.oaic.gov.au/privacy-law/privacy-act/notifiable-data-breaches-scheme/what-to-include-in-an-eligible-data-breach-statement).

## Agency or organisation information

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| --- | --- |
| Organisation |  |
| Mailing address |  |

## Description of the eligible data breach

Please provide a description of the eligible data breach. Please attach copies of relevant documents if needed.

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## Information involved in the eligible data breach

Please provide a description of the kind or kinds of personal information involved in the data breach. Please attach copies of relevant documents if needed.

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In addition, please select any categories that apply:

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| --- | --- |
| Contact information (e.g. home address, phone number, email address) |  |
| Identity information (e.g. passport number, driver license number) |  |
| Health information |  |
| Financial details |  |
| Other sensitive information (e.g. sexual orientation, political or religious views) |  |

## Recommended steps

Please outline the steps your organisation recommends that individuals take to reduce the risk that they experience serious harm because of this data breach. Please attach copies of relevant documents if needed.

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## Other entities affected

This section is optional.

If the data breach also involved another organisation, you may provide their identity and contact details to further assist individuals who have been affected by the breach.

Was another organisation/agency affected?

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| --- | --- | --- | --- |
| Yes |  | No |  |

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| --- | --- |
| If Yes, please specify |  |

# Part two – Additional information

We encourage organisations to provide additional information to assist us in understanding what has occurred.

Part two of this form is optional. Any information that you provide in part two of the form does not need to be included in your notification to individuals, and you may request that it be held in confidence by the Commissioner.

## Contact details

Please provide contact details for the officer responsible for handling the eligible data breach.

**Title:** (Mark with an ‘X’ or fill in as applicable)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Mr |  | Miss |  | Ms |  | Mrs |  | Dr |  | Professor |  | Mx |  | Other |  |

|  |  |
| --- | --- |
| If Other, please specify |  |

|  |  |
| --- | --- |
| Full name |  |
| Contact number |  |
| Email address |  |

## Breach details

You may provide your best estimate if the exact date is not known.

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| --- | --- |
| Date the breach occurred |  |

You may provide your best estimate if the exact date is not known.

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| --- | --- |
| Date the breach was discovered |  |

### Primary cause of the data breach

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| --- | --- |
| Malicious or criminal attack |  |
| System fault |  |
| Human error |  |

### Description of how the breach occurred

Please provide a description of how the breach occurred. Please attach copies of relevant documents if needed.

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### Individuals involved in the data breach

How many individuals’ personal information was involved in the data breach?

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| --- | --- |
| Please provide your best estimate |  |

### Assisting individuals involved in the data breach

Please outline any action your organisation has taken, or you are intending to take, to assist individuals whose personal information was involved in the data breach. Please attach copies of relevant documents if needed.

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### Preventing reoccurrence of a similar data breach

Please describe any action your organisation has taken, or you are intending to take, to prevent reoccurrence of a similar data breach in the future. Please attach copies of relevant documents if needed.

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### Notifying those affected

If you have not already done so, how do you intend to notify individuals who are likely to be at risk of serious harm because of the data breach? When will this occur?

If you do not intend to notify individuals because of an exception under s 26WN or s 26WP of the Privacy Act, please provide your reasons for relying on the relevant exception.

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### Reports to other authorities or bodies

Please list other data protection authorities, law enforcement bodies or regulatory bodies that you have reported this data breach to. Please attach copies of relevant documents if needed.

You may wish to separately report an incident to the [Australian Cyber Security Centre](https://www.acsc.gov.au/incident.html) if it raises cyber security concerns.

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## Additional information

Is there any other information you wish to provide at this stage, or any matters that you wish to draw to our attention?

You can provide additional information below or attach supporting documents when you submit the form.

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## Confidentiality

Please indicate whether you would like the Commissioner to hold in confidence the information provided in Part two of this form.

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| I request that the information provided in Part two of this form is held by the Commissioner in confidence |  |

The Commissioner will respect the confidence of commercially or operationally sensitive information provided voluntarily in support of a data breach notification and will only disclose this information after consulting with you, and with your agreement, or where required by law.

Please carefully review the information that you have provided about the data breach before emailing the form to [privacy@nhpo.gov.au](mailto:privacy@nhpo.gov.au).

To receive this document in another format phone 1300 795 265, using the National Relay Service 13 36 77 if required, or [email our complaints team at the National Health Practitioner Ombudsman](mailto:complaints@nhpo.gov.au) <complaints@nhpo.gov.au>.

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[Email National Health Practitioner Ombudsman](mailto:complaints@nhpo.gov.au) <complaints@nhpo.gov.au>

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