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| Privacy incident report form |
| Electronic accessible version |

# Instructions

Complete this form to record details of a privacy incident prior to submitting details via the online form.

[Email your divisional Privacy Officer or the central Privacy Unit](mailto:Email%20your%20divisional%20Privacy%20Officer%20or%20the%20central%20Privacy%20Unit) the completed form.

An email with the privacy incident number will be sent to the reporter’s specified email address once the form is submitted successfully online. Refer to the Privacy Incident Report Form User Guide (FMS) for further instructions.

# Service delivery

Details of the organisation delivering the service at the time of the privacy incident.

|  |  |
| --- | --- |
| Organisation |  |
| Address |  |
| DHHS service areas |  |
| Funding DHHS program |  |
| Services provided |  |

# Reporter details

Details of the staff member reporting the privacy incident.

|  |  |
| --- | --- |
| Reporting officer’s name: |  |
| Reporter’s job title: |  |
| Telephone number: |  |
| Email address: |  |
| Line Manager’s name: |  |

# Incident date and time

The date and time can be either:

* exact
* estimated, or
* when the reporter became aware of the privacy incident.

|  |  |
| --- | --- |
| Date of incident |  |
| Date Accuracy  (Choose one) | Exact OR Estimate OR When made aware |
| Time of incident |  |
| Time accuracy  (Choose one) | Exact OR Estimate OR When made aware |
| Date incident disclosed |  |
| Time incident disclosed |  |

# Incident description

The description of the privacy incident should include; **where** the incident took place **how** the incident occurred and **cause** of the possible breach.

| Describe the privacy incident |
| --- |
|  |

# Persons involved

Complete a new line for each person involved in the incident. If there are more than 10 people involved, complete a separate attachment.

| # | Given name | Surname | Gender | Aboriginal or Torres Strait Islander? | Date of birth | Address | Client (C), Staff (S) or Member of Public (P)  Insert C, S or P | Client Unique Identifier and Client system | Relevant privacy principles | Immediate safety needs met?  Insert Yes or No |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |

# Containment

Details of information disclosed, who has been consulted and actions taken to respond to the incident.

## Information disclosed

| Type of information | Mark all relevant with X |
| --- | --- |
| Name |  |
| Photograph |  |
| Bank account |  |
| Education or education activities |  |
| Religious beliefs |  |
| Staff opinion |  |
| A video recording (CCTV or other) |  |
| Racial or ethnic origin |  |
| Address |  |
| Social media |  |
| Offences committed |  |
| Medical details |  |
| Sexual preferences |  |
| Court papers |  |
| Print media |  |
| Other |  |

| If other, please specify |
| --- |
|  |

## Consultation undertaken

Select as many options as relevant

| Branch or area consulted | Mark all relevant with X |
| --- | --- |
| Line manager |  |
| Privacy officer |  |
| Another DHHS area |  |
| Another service stream |  |
| Another division |  |
| Legal Services branch |  |
| Information security team |  |
| Media team |  |
| Victoria Police |  |
| Office of the Victorian Information Commissioner |  |
| Other external agency |  |
| Other |  |

| If other, please specify |
| --- |
|  |

## Status of information

| Status of containment | Mark with X |
| --- | --- |
| Contained |  |
| Not contained |  |
| Not applicable |  |

## Actions taken to respond to the incident

| Actions taken |
| --- |
|  |

## Assessment

|  |  |
| --- | --- |
| Questions | Insert Yes or No |
| Is there further risk of disclosure? |  |
| Has a privacy breach occurred? |  |

## Additional Information

| Any relevant additional information |
| --- |
|  |

To receive this publication in an accessible [email the Privacy Unit](mailto:privacy@dhhs.vic.gov.au) <privacy@dhhs.vic.gov.au>

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Available on the [Privacy](https://intranet.dhhs.vic.gov.au/privacy) intranet page <https://intranet.dhhs.vic.gov.au/privacy>