



PRIVACY MANAGEMENT PLAN AND PROCEDURE

Approved by:	Executive Director, Legal and Governance	Date:	11 April 2017
Date Effective:	1 May 2017	Date of Next Review:	1 May 2020
Document No:	PR-LGL-01.1	Revision:	5
Custodian:	Manager Regulatory Affairs and Policy		
Supporting Documents, Procedures & Forms:	Privacy Complaint Form Records Management Policy (staff) UOW Cyber Security Policy UOW IT Server Security Policy		
References & Legislation:	Australian Privacy Principles (APP) Government Information (Public Access) Act 2009 (NSW) (GIPA) Health Records and Information Privacy Act 2002 (NSW) (HRIPA) Independent Commission Against Corruption Act 1988 (NSW) Privacy and Personal Information Protection Act 1998 (NSW) (PPIPA) Privacy Act 1988 (Cth) Public Interest Disclosure Act 1994 (NSW) State Records Act 1998 (NSW)		



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1 Purpose

- 1.1 The purpose of this Privacy Management Plan and Procedure is to outline:
- a. UOW Enterprises compliance with legislative and regulatory requirements;
 - b. How UOW Enterprises disseminates its policies and practices regarding privacy within UOW Enterprises; and
 - c. The procedures UOW Enterprises follows for internal reviews or complaints about UOW's privacy practices.
- 1.2 UOW Enterprises has produced this Privacy Management Plan and Procedure to comply with s.33 of the [Privacy and Personal Information Protection Act, 1998 \(NSW\) \(PPIPA\)](#), and the [Australian Privacy Principles \(APP\)](#).
- 1.3 UOW Enterprises will provide a copy of this Privacy Management Plan and Procedure to the Privacy Commissioner as soon as practicable after it is prepared and whenever the plan is amended, in compliance with s.33(5) of PPIPA.

2 Scope

- 2.1 This Privacy Management Plan and Procedure operates as a procedure supporting UOW Enterprises' Privacy Policy
- 2.2 This Procedure applies to all UOW Enterprises on-shore operations.

3 General Principles

- 3.1 UOW Enterprises collects, uses, discloses and otherwise handles Information in accordance with:
- a. [Privacy and Personal Information Protection Act 1998 \(NSW\) \(PPIPA\)](#);
 - b. [Health Records and Information Privacy Act 2002 \(NSW\) \(HRIPA\)](#);
 - c. [Privacy Act 1988 \(Cth\)](#); and
 - d. [Australian Privacy Principles \(APP\)](#).

4 Access and Alterations to Information

- 3.1 At the request of the individual to whom the information relates, UOW Enterprises must:
- a. Provide the individual with access to the information;



- b. Make appropriate amendments (whether by way of corrections, deletions or additions) to ensure that:
 - i. The information is accurate; and
 - ii. Considering the purpose for which the information was collected, the information is relevant, up to date, complete and not misleading.
 - iii. If UOW Enterprises is not legally able to amend Information in accordance with a request by the individual to whom the Information relates, UOW Enterprises must take such steps as are reasonable, to attach a statement of the amendment sought by the individual to the Information.
 - iv. If Information is amended, UOW Enterprises will, where practicable, have recipients of that information notified of the amendment.

4 Retention and Security of Information

- 4.1 If UOW Enterprises holds Information it must ensure that:
 - a. The Information is kept for no longer than is necessary for the purposes for which the Information may lawfully be used;
 - b. The Information is disposed of securely and in accordance with any requirements for the retention and disposal of Information;
 - 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
 - d. If it is necessary for the Information to be given to a person in connection with the provision of a service to UOW Enterprises, everything reasonably within the power of UOW Enterprises is done to prevent unauthorised use or disclosure of the Information.

5 Internal Review

- 5.1 Individuals have the right to apply to UOW Enterprises for a formal internal review of conduct, which they believe, contravenes the Privacy Policy or relevant privacy legislation.



- 5.2 Before making an application for internal review, individuals are encouraged to first direct in writing to the UOW Enterprises Privacy Officer any questions or concerns which an individual has in relation to privacy, so that privacy related issues can be resolved in an effective and timely manner.

Internal Review Application

- 5.3 An application for internal review should:
- a. Be in writing, using the Privacy Complaint Form;
 - b. Set out in detail the conduct which the applicant believes contravenes the Privacy Policy or relevant legislation;
 - c. Be addressed to the Privacy Officer (details set out in the Privacy Complaint Form);
 - d. Specify a return address in Australia; and
 - e. Be lodged with the Privacy Officer within six (6) months of the date the applicant first became aware of the alleged contravening conduct.

Internal Review Process

- 5.4 Any Internal Review with UOW Enterprises will be conducted by the UOW Enterprises Privacy Officer, providing there is no conflict of interest.
- 5.5 On receiving an application for an internal review, the Privacy Officer must inform the NSW Privacy Commissioner as soon as practicable.
- 5.6 The Privacy Officer must consider any relevant material submitted by the applicant or by the NSW Privacy Commissioner.
- 5.7 The Privacy Officer will complete the internal review within 60 days of receipt of the internal review application, failing which the applicant may apply to the NSW Civil and Administrative Tribunal (NCAT).
- 5.8 Once the internal review has been completed, the Privacy officer may do one or more of the following:
- a. Make no further action on the matter; or
 - b. Make a formal apology; or
 - c. Take such remedial action as it thinks appropriate; or



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- d. Provide undertakings that the conduct will not occur again; or
 - e. Implement administrative measures to ensure that the conduct will not occur again.
- 5.9 Within 14 days of the completion of the internal review, the Privacy Officer will notify the applicant in writing of:
- a. The findings of the internal review (and the reasons for those findings);
 - b. The action proposed to be taken by UOW Enterprises (and the reasons for taking them); and
 - c. The right of the person to have those findings, and the proposed action, reviewed by NCAT.

6 Roles and Responsibilities

Legal and Governance Division

- 6.1 The Executive Director, Legal and Governance is the Primary Privacy Officer and is responsible for UOW Enterprises' overall compliance with its privacy obligations.
- 6.2 UOW Enterprises Legal and Governance Staff are responsible for:
- a. Providing privacy advice and education to UOW Enterprises;
 - b. Implementing and maintaining the Privacy Policy and the Privacy Management Plan and Procedure;
 - c. Where delegated by the Principle Privacy Officer, respond to enquiries or complaints from individuals on privacy matters;
 - d. Manage any required external privacy obligations.
- 6.3 The Privacy Officer can be contacted at the following address:

Attention: Privacy Officer

UOW Enterprises

Building 39A

University of Wollongong NSW 2522

Email: uowe-privacy@uow.edu.au



Human Resources Business Unit

- 6.4 UOW Enterprises Human Resources Business Unit are responsible for the central management of staff information.
- 6.5 Human Resources will provide information about staff member's privacy obligations during their induction.
- 6.6 Further ongoing training will be provided by Human Resources, in conjunction with Legal and Governance where necessary to increase staff awareness of their privacy obligations.

Quality and Compliance Committee

- 6.7 Current privacy obligations are to be included in the Compliance Matrix.
- 6.8 The Quality and Compliance Committee will consider any situations of non-compliance with privacy obligations and monitor remedial action.
- 6.9 High risk instances of non-compliance are to be reported to the Principle Privacy Officer and the Group CEO.

All Staff

- 6.10 All UOW Enterprises staff are responsible for complying with privacy obligations outlined in this Policy, the Privacy Management Plan and Procedure, and the UOW Enterprises Code of Conduct when managing information provided to, or collected by UOW Enterprises.

7 Version Control Table

Version Control	Approved By	Date Approved	Amendment
1	Vince Lendrum	02/05/11	New Plan and Procedure
2	ITC Quality Manager	08/06/11	Address in section 5 updated
3	Director Legal and Governance	10/3/14	Changes to reflect branding and legislative requirements.
4	Compliance Officer	21/07/2016	Minor change only – College branding, position title and document formatting.



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5	Executive Director, Legal and Governance	11/04/2017	Policy refresh in line with legislative changes to privacy laws. Move to UOWE wide policy
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