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23 February 2014

Mr Timothy Pilgrim
Privacy Commissioner
Office of the Australian Information Commissioner
GPO Box 2999
Canberra ACT 2601
enquiries@oaic.gov.au

Dear Commissioner Pilgrim,

Re: Privacy and the electronic health records: Victorian healthcare service

The Australian Privacy Foundation (APF) is the country's leading privacy advocacy organisation. I am writing in my capacity as Chair of the Health Committee of the APF.

APF has received communications from clinicians, patients (some now deceased) and information technology specialists who are anxious about the security and privacy of ehealth records. In particular, serious concern has been expressed about records that are curated by a regional health care service in Victoria. This would of course be in violation of privacy law and guidelines.

On the basis of the information APF has received, it appears that private e-health records at the regional health care service are accessible via a web browser after authentication - that is the provision of eligible user names and passwords. These are often transmitted in clear text without encryption over the Internet. Of two access portals shown to some of these concerned individuals, one permitted access using a plain http connection, that is no security, while another appeared to use SSL, a more secure http connection (https).

Further, specific security and privacy concerns expressed by the individuals are that:

- 1. Authorised user names and passwords can be intercepted.
- 2. Private data is revealed; the scope of the data includes most present and past patient details, including full name and contact information, test results and diagnoses.
- 3. These individuals claim that security protocols around user names and passwords are virtually non-existent or not enforced.

The Foundation is aware from comments by health practitioners and consumers outside the health care service (e.g. elsewhere in Victoria, in the Australian Capital Territory and New South Wales) that there is considerable concern among practitioners and consumers regarding day by day implementation of e-health, the PCEHR and systemic problems. That concern includes disquiet regarding the provision of incorrect advice within health centres to privacy aware individuals.

APF is concerned that leaving unresolved credible concerns going to trust and confidence may risk inhibiting national uptake of the PCEHR. Evidently several credible complaints have been expressed to your Office and there has been no effective response yet. In that respect your attention is drawn to experience in the United Kingdom, where a failure to anticipate and effectively address the concerns of health practitioners and consumers regarding that nation's e-health regime has resulted in non-engagement by many practitioners, and the deferral by six months of the care.data initiative.

A failure on the part of the Office of the Information Commissioner (OAIC) to be seen to acknowledging and effectively addressing Australian concerns regarding e-health and the PCEHR will erode the public profile the OAIC and inhibit national uptake of the PCEHR.

Therefore the Foundation writes to request a formal investigation by your office of these concerns. Given the significance of the concerns in relation to the PCEHR and the OAIC the Foundation hopes that you announce, in the immediate future, that you will be conducting an investigation and that it be covered through a detailed public report.

The Foundation would appreciate early acknowledgement of this letter.

Yours sincerely

Chair, Health Sub Committee Australian Privacy Foundation

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