

Te Whatu Ora - Health New Zealand
Aotearoa Immunisation Register (AIR) ISD
Reporting – Version 1.2
Privacy Impact Assessment

Date 3/07/2023

The Project

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Date PIA prepared:	20/02/2023
Last revision date: if applicable:	14/06/2023
Version number:	Version 1.2

Summary of Project / Change

Please describe the project (or change) clearly and simply. Be sure to set out:

- what the project (or change) will offer and whether it provides a solution to an existing problem
- what are the benefits and the outcomes?
- an overview of what personal information is handled by the project, how it will be collected, why is it needed, where it will be stored, who has access to it?

Write the Assessment as though the individuals about whom the information relates are your audience.

Privacy Impact Assessment- Aotearoa Immunisation Register

1. A Privacy Impact Assessment (**PIA**) for the Aotearoa Immunisation Register (**AIR**) was first approved on or around March 2022.
2. This PIA was updated on or around October 2022 for **Release 2**. At the time of writing this PIA for ISD reporting, the Release 2 PIA remains the most recent.
3. To accommodate complete publication of PIA related to the AIR, the previous main PIA release 2 has been updated as release 3, including of a statement linking this PIA to the main PIA release 3.

This Privacy Impact Assessment- ISD Reporting

1. This PIA specifically addresses the new AIR Immunisation Service Delivery (**ISD**) Reporting capability:

Existing Functionality (current Release 2 PIA)	<ul style="list-style-type: none"> • Record vaccination (MMR) • Record vaccination (additional vaccine types) • Onboarding of users • Immunisation history
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New functionality (this PIA)	<ul style="list-style-type: none"> • ISD Reporting - vaccinations administered report
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New functionality: ISD Reporting

- AIR has two portals:
 - Immunisation Service Delivery (**ISD**) portal – *also known as the AIR vaccinator portal*; and
 - Immunisation Service Management (**ISM**) portal- *also known as the AIR admin portal*.
- The ISD reporting capability addresses the needs of Pharmacy and Occupational Health providers whose reporting needs emerge from the AIR objective of ‘to capture all vaccinations delivered anywhere’ where previous registers either did not capture these vaccinations (in the case of privately funded vaccinations), or these vaccinations were able to be captured and reported from the CIR register. While the ISD reporting capability will report on all vaccinations captured in the AIR, the immediate need is to address the Influenza 2023 immunisation programme, commencing **1 April 2023**.
- The new ISD reporting will be made available on the ISD portal (vaccinator portal).
- This ISD reporting functionality **is an interim solution** and the intention is that it be used until around **September 2023**.

ISD Reporting Use Cases

- Pharmacies and Occupational Health providers require **vaccinations administered reports** (a report that lists all vaccinations administered at a facility).
- The vaccinations administered report will address the needs of two user groups:

Pharmacy Use Case

A pharmacy requires the vaccinations administered report to provide a list of vaccinations delivered within their facility or facilities for the following purposes:

- Reconcile Vaccinations given to Pharmacy Dispensary Records**
Reconciliation of vaccinations administered to the pharmacy’s record of vaccinations dispensed is a critical clinical requirement.
- Prepare Vaccination Payment Claims**
Vaccinations administered within the pharmacy context do not fall under PHO service contracts and therefore require additional tasks to be undertaken by the pharmacy to claim payment for the vaccination service provided.

Occupational Health provider Use Case

An occupational health provider may visit an organisation for the purpose of offering and administering privately funded vaccination to the employees and contractors of the organisation. An occupational health provider requires the vaccinations administered report to provide the organisation with a list of employees and contractors who have taken up the offer of privately funded vaccination.

3. The AIR team have responded to these user needs by delivering the ISD reporting capability.
4. A sample of the vaccination administered report can be found in **Appendix 3**. Please note this report has been made using **test data only**.

ISD Reporting Capability

5. To support the above use cases, the AIR ISD user will be able to login to ISD and use the ISD reporting capability to view, modify and export reports. Currently the only report to be provided in ISD is the vaccinations administered report.
6. Access to the reporting capability within ISD will be managed by the ISD user onboarding process and all ISD users will enjoy the same access to ISD reporting capability, irrespective of ISD user role.
7. Further information about ISD User access, and AIR’s “Sharing Rules Model” is outlined in IPP5 below.

ISD Vaccinations Administered Report

8. The vaccinations administered report provides a list of vaccinations administered at a facility and may include the following information:

Requirement	Data	Field Name	API name
Must have	Facility	Facility: Name	
Must have	Imm record number	Name	
Must have	Vaccination Date	Vaccination Date	VaccinationDate
Must have	First Name		NIS_PatientGivenName__c
Must have	Middle name		
Must have	Last name	Patient Family Name	NIS_PatientFamilyName__c
Must have	NHI		NIS_NHI__c
Must have	Date of Birth		NIS_DateTimeOfBirth__c
Must have		Age	
Must have	Parent Org	Parent Account: Account name	
Must have	Indicator	Reason Code	
Must have	Manufacturer	Manufacturer	Manufacturer
Must have	Target disease	Target disease	
Must have	Vaccine Name	Vaccine Name	Vaccine Code: Name
Optional	Vaccinator first name	Vaccinator	
Optional	Vaccinator middle name		
Must have	Vaccinator last name		
Source System (i.e. CIR so AIR users can clearly distinguish which vaccines were recorded in which system)			

9. The reports available to an ISD user will be limited to the facility, or facilities, in which the logged in ISD user works, governed by the ISD Sharing Rules Model within the developing AIR solution.

10. All vaccine types recorded within ISD will be included in the vaccinations administered report. The current antigens covered by the vaccinations administered report include:

Vaccine	Target Disease	Vaccine Product
Influenza	Influenza	- Alfuria Quad - Alfuria Quad Junior - Fluad Quad - FluQuardi
MEN ACWY-D	Meningococcal	Menactra
Men B	Meningococcal	Bexsero
MMR	Measles/Mumps/Rubella	Priorix
MPX	Mpox	JYNNEOS
TdaP	Tetanus/Diphtheria/Pertussis (Whooping cough)	Boostrix

11. The AIR is intending to add additional antigens to the reporting later in April/May 2023.

Personal Information within Vaccination Administered Report

12. The vaccinations administered report requires this level of personal information. It is not possible for the vaccinations administered reports to use de-identifiable data while meeting the requirements of the two use cases above.

13. The Pharmacy use case requires identifiable data including health consumer names, date of birth and NHI number in order to reconcile vaccination records to the Pharmacy dispensing system.

14. The Occupational Health Nurse use case required identifiable data including health consumer names and date of birth in order to identify the employee within the employer human resource system.

15. Health provider data sourced from Health Provider Index (HPI) constrains the AIR ISD solution from differentiating a provider, by provider type, as either a Pharmacy or an Occupational Health Nurse facility, and therefore the same identifiable data has been provided within the vaccinations administered report, to meet the need of both use cases.

CIR Influenza Vaccination records

16. In addition to all ISD vaccination records, and to more appropriately support providers who administer influenza vaccinations until the end of September 2023, the AIR team have enabled a **functional link between Covid-19 Immunisation Register (CIR) influenza vaccination records and the ISD reporting functionality.**

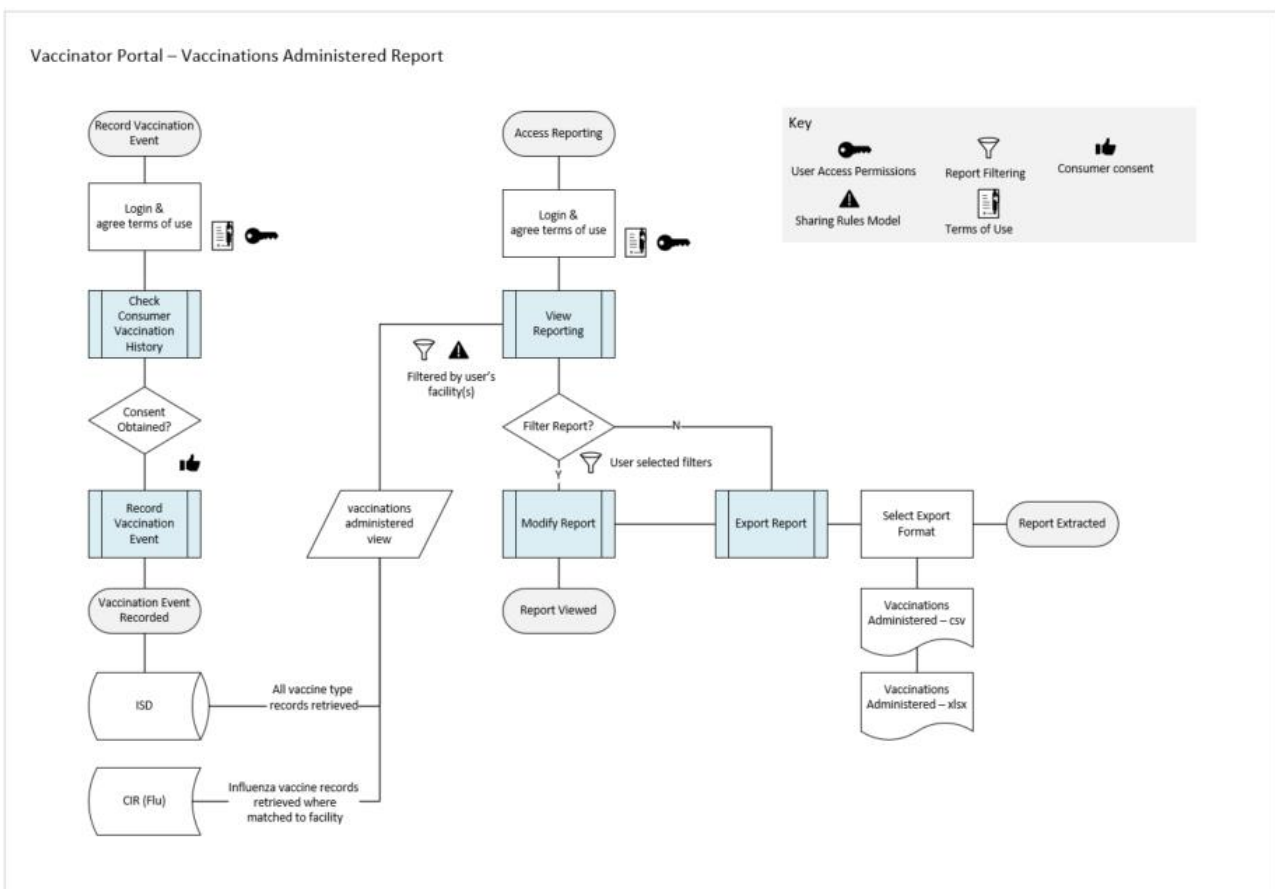
17. During this interim period the ISD vaccinations administered report, may be augmented with influenza vaccinations recorded within the CIR, where the facility in the CIR vaccination record is able to be positively identified using the facility’s HPI-F identifier. Not all CIR vaccinations are able to be linked in this manner, owing to the design constraints of the CIR.

Default Report and Filtering functions

18. The vaccinations administered report will, by default, limit the result set to the ISD user to vaccinations administered within the last 30 days.
19. The ISD user may further filter or reduce the result set to a desired smaller set of vaccination administered records, appropriate to the needs described for each use case above. *For example:*
 - Where an ISD user works for many facilities, they may use the facility filter to reduce the result set to only the facility, or facilities vaccination records to reconcile facility dispensing records.
 - Where an ISD user is generating a list of employees vaccinated in a workplace vaccination facility, they may reduce the result set to only those employees vaccinated on a specific date.

Information Flow Diagram

Please insert a diagram (if available from project documentation) showing the end-to-end information flows relevant to this project.



Scope of Assessment

Please describe what is in scope of this PIA

This PIA addresses the privacy impact of the new ISD reporting functionality within AIR.

Please describe what has been excluded from the scope of this PIA and why

As above, there is an existing PIA for AIR (Release 3). This PIA does not intend to revisit the privacy impacts for AIR generally.

This PIA will also not cover systems that AIR will connect with for the ISD reporting- such as NHI, CIR etc. These are all covered by their own PIAs.

Appendices

To finalise this PIA you may need to provide your privacy officer with supplementary documents (*e.g. a draft Privacy Statement, Information Sharing Agreement, Cloud Risk Assessment*). You can include these supplementary documents as **appendices** to this PIA.

If you have **added appendices** to this PIA, please list them here:

Appendices	Information
Appendix 1	Risk and Mitigation Table
Appendix 2	Glossary
Appendix 3	<i>Sample</i> Vaccinations Administered Report
Appendix 4	ISD Screen shot of Influenza Indication types

Assessment Questions

Does the project involve personal information?	YES	NO
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If you're unsure what personal information is, please see the guidance document for more information. For the purpose of this question, "*involve*" includes to collect, store, use, and/or disclose personal information.

- If the answer is 'No' then there is no need to continue with this PIA. As outlined in the guidance, you **must** still complete the Flowchart and email this to your Privacy Officer for approval.
- If the answer is 'Yes', please move on to the next section (Health Information).

Does the project involve health information?	YES	NO
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

The [Health Information Privacy Code 2020](#) applies when a project handles health information. The [Privacy Act 2020 applies](#) when the project handles any personal information that is not health information.

If your project does handle health information, as you work through the remaining sections in this PIA you should apply Rules 1 to 13 of the Health Information Privacy Code 2020 as they correspond to the 13 privacy principles.

Principle 1: Lawful purpose and necessary collection of personal information

Principle 1 of the Privacy Act 2020 states that personal information **should not** be collected by any agency **unless** the information is collected for a **lawful purpose** connected with a function or activity of the agency, **and** the collection is **necessary** for that purpose.



The project should only collect the minimum amount of personal information that is necessary for the relevant function or activity ("data minimisation"). If the project **does not** require identifying information, then we **should not** collect it.

Please complete the following table:

List all information collected by the project	Please state why this information is needed for the purposes of this project												
<p>This project does not change the personal information that is collected within AIR.</p> <p>The following information is shown in a vaccination administered report:</p> <table border="1"> <thead> <tr> <th>Requirement</th> <th>Data</th> <th>Field Name</th> <th>API name</th> </tr> </thead> <tbody> <tr> <td>Must have</td> <td>Facility</td> <td>Facility: Name</td> <td></td> </tr> <tr> <td>Must have</td> <td>Imm record number</td> <td>Name</td> <td></td> </tr> </tbody> </table>	Requirement	Data	Field Name	API name	Must have	Facility	Facility: Name		Must have	Imm record number	Name		<p>Pharmacy use case:</p> <p>Pharmacies require this information in a vaccination administered report for the purposes of:</p> <ul style="list-style-type: none"> • Reconciling vaccinations given to Pharmacy Dispensary Records
Requirement	Data	Field Name	API name										
Must have	Facility	Facility: Name											
Must have	Imm record number	Name											

Must have	Vaccination Date	Vaccination Date	VaccinationDate
Must have	First Name		NIS_PatientGivenName__c
Must have	Middle name		
Must have	Last name	Patient Family Name	NIS_PatientFamilyName__c
Must have	NHI		NIS_NHI__c
Must have	Date of Birth		NIS_DateTimeOfBirth__c
Must have		Age	
Must have	Parent Org	Parent Account: Account name	
Must have	Indicator	Reason Code	
Must have	Manufacturer	Manufacturer	Manufacturer
Must have	Target disease	Target disease	
Must have	Vaccine Name	Vaccine Name	Vaccine Code: Name
Optional	Vaccinator first name	Vaccinator	
Optional	Vaccinator middle name		
Must have	Vaccinator last name		
Source System (i.e. CIR so AIR users can clearly distinguish which vaccines were recorded in which system)			

- Prepare vaccination payment claims

This information is the minimum a pharmacy would require completing their vaccination administered reports. If the pharmacy ISD User requires more information after attempting reconciliation to dispensing, they will need to log in and view in the user interface, one record at a time.

Occupational health use case:

Occupation health nurses require this information to report to the organisation the employees and contractors who have chosen to receive a privately funded organisation

For this use case, we note that Indicator will read "Privately funded" in all cases. (See **Appendix 5**)

A *sample* vaccination administered report can be found in Appendix 3. **Please note** this sample report uses **test data only**.

As above, the following antigens will be covered in the vaccination administered report when the ISD functionality goes live on 29 March 2023:

Vaccine	Target Disease	Vaccine Product
Influenza	Influenza	- Alfuria Quad - Alfuria Quad Junior - Fluad Quad - FluGuardi
MEN ACWY-D	Meningococcal	Menactra
Men B	Meningococcal	Bexsero
MMR	Measles/Mumps/Rubella	Priorix
MPX	Mpox	JYNNEOS

TdaP	Tetanus/Diphtheria/Pertussis (Whooping cough)	Boostrix	
<p>AIR project is intending to add additional antigens to the reporting later in April/May 2023.</p>			

Please state the lawful purpose for the collection of this personal information

The project **will not** be collecting **additional** personal information for the purpose of the ISD reporting.

The personal information that is collected when someone is vaccinated (or pre-populated from the source systems), and is used in the vaccinator administered report, is necessary to meet clinical requirements and is consistent with the overall purpose of AIR.

- Pharmacy dispensary reconciliation to vaccinations administered is a clinical safety measure, consistent with managing the consumer health.
- Occupational Health Nurse provision of vaccinations administered report to consumer's employee is consistent with keeping the consumer and others well, and is reinforced within the employee consent process stating *'to enable the employer to plan initiatives that support the wellbeing of staff'*

	YES	NO
Could the project use aggregated or anonymised data and still satisfy the project's purpose?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is the project collecting the minimum amount of personal information required for the purpose of the project?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Please provide further information here if you're not using the minimum amount of personal information, or you could use aggregated or anonymised data

Not Applicable

Compliance check with Principle 1

Does the project comply with Principle 1?	YES	NO	UNSURE
The information is collected for a lawful purpose and the collection is necessary for that purpose	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered **"Yes"**, please move on to the next section (Principle 2).
- If you have answered **"No"** or **"unsure"**, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 1. Once completed, please move on to the next section (Principle 2).

Principle 2: Collection directly from the individual concerned

Principle 2 of the Privacy Act 2020 requires an agency to collect information **directly** from the individual concerned unless an exception applies.

	YES	NO
Are you only collecting personal information directly from the individual?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 3).
- If you have answered “No”, please answer the remaining questions in this section before moving on to the next section

Please state why you’re not collecting information directly from the individual
The ISD reporting functionality does not change how personal information is collected by Te Whatu Ora. Not all information within AIR is collected directly from the individual concerned. Further information about this can be found in the AIR Release 2 PIA.
Please state what legislative exception applies <i>The legislative exceptions can be found in <u>Principle 2</u> of the Privacy Act and <u>Rule 2</u> of the Health Information Privacy Code. If you’re unsure if an exception applies, please contact your Privacy Officer.</i>
The legislation exception is set out in the AIR Release 2 PIA. For completeness: <i>Compliance with the requirement for the AIR to source information directly from Consumers would prejudice the purposes of collection (Rule 2(2)(c)(ii)) as it would not be possible to obtain a comprehensive list as the AIR could not identify those individuals to request the supply of relevant information. It is also not reasonably practicable in these circumstances to source the information directly from the individual (Rule 2(2)(d)).</i>

Compliance check with Principle 2

Does the project comply with Principle 2?	YES	NO	UNSURE
Are you collecting directly from the individual concerned (or an exception applies)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 3).
- If you have answered “No” or “unsure”, please complete the Risk and Mitigation Table (Appendix 1) in respect of this Principle 2. Once completed, please move on to the next section (Principle 3).

**Principle 3:
Telling the individual what we are doing**

Under Principle 3 of the Privacy Act 2020, when an agency collects personal information directly from individuals, there are certain things they **must do before** they collect the information or **as soon as practicable** after the information is collected. This includes making sure the individual is aware of:

- (a) the **fact** that the agency is collecting personal information
- (b) the **purpose** for which the agency is collecting the information
- (c) the **intended recipients** of the information
- (d) The name and address of the agency that holds the information
- (e) the **consequences** (if any) if that individual does not provide that information
- (f) whether the collection is **mandatory** or **voluntary**
- (g) the **rights of access to, and request correction of,** the information.

There are only **limited circumstances** where we do not need to tell the individual the matters in (a) to (g) above

	YES	NO
Will the project be telling an individual all the matters in Principle 3?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- If the answer is “**Yes**”, please answer the questions in part A to C below only prior to completing the Principle 3 compliance check.
- If the answer is “**No**”, please answer the questions in part D below only prior to completing the Principle 3 compliance check.

A. How you’re going to tell the individual

Please describe how will you tell the individual how the project will manage their information.
For example, will you have a consent form, information leaflet, privacy statement etc?

AIR Privacy Statement

The AIR Privacy Statement and AIR Privacy Impact Assessment are published [here](#). (MoH website).
The AIR privacy statement is also published [here](#) (HNZ website).

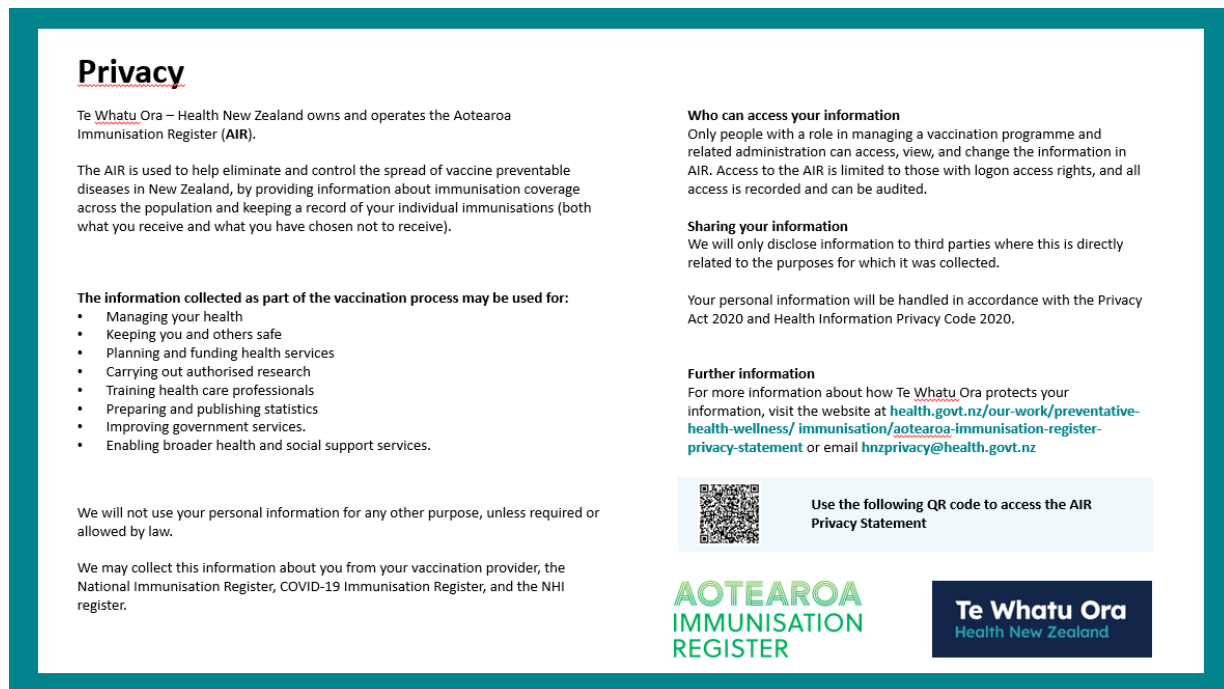
The AIR project team is in the process of reviewing and updating the privacy statement generally.

CIR privacy statement

The CIR privacy statement can be found here: <https://www.health.govt.nz/covid-19-novel-coronavirus/covid-19-vaccines/covid-19-vaccine-and-your-privacy/covid-immunisation-register-cir-privacy-statement>

Posters at Vaccination Facilities

The AIR Privacy Poster displayed at vaccination facilities is shown here:



Vaccinating facilities are provided with, and trained to display, the AIR Privacy Poster at all places where consumers are offered and administered vaccinations.

Vaccinators (Pharmacies)

In the **pharmacy** use case, consumer consent is obtained directly from the consumer, by the vaccinator having a relationship with the pharmacy (the facility in the vaccination record), prior to vaccination being administered and recorded. Consumer vaccination consent forms include terms that describe the basis upon which identifiable data may be used typically described in terms similar to ‘... to assist in your treatment, for quality assurance purposes and to fulfil legislative requirements.’

Vaccinators (Occupational Health providers)

In the **occupational health provider** use case, consumer consent is obtained directly from the consumer, by the vaccinator prior to the vaccination being administered and records. Consumer vaccination consent forms used in this context describe the basis upon which identifiable data may be used, typically including terms similar to ‘...in addition, with your consent, (Facility) may use your information, to generate reports for your employer. This will enable your employer to plan initiatives that support the wellbeing of staff.’

Where will the document be made accessible?

For example, will it be published online? Link in an email? Hard copy?

Privacy Documents are published on Ministry of Health and HNZ website.

Privacy Poster is displayed at places where vaccinations are offered and administered.

Please include as an **appendix** a copy of any draft document that outlines how you will manage an individual’s personal information.

B. When you’re going to tell the individual

Will you tell individuals before or after you have collected their information?
If you’re telling the individuals after you have collected their information, how long after?
Consumers are advised at the time of vaccination.
As above, the privacy statements for CIR and AIR are available on the MoH and HNZ website.

C. Mandatory or voluntary collection

Please state whether the collection of information is voluntary or mandatory?
The mandatory nature of our requirement, by law, to maintain complete and accurate records is advised within the published privacy documents on the ministry website.
Information is also published on the HNZ website- <https://www.tewhatauora.govt.nz/our-health-system/digital-health/the-aotearoa-immunisation-register-air/key/>
Mandatory reporting:
An individual cannot opt out of the pharmacy/occupational health reporting once the vaccination has been administered.
An individual can opt out of the vaccination, or more specifically choose to be vaccinated at another (independent) facility.
AIR project team is in the process of drafting FAQs to be added to the following HNZ website: <https://www.tewhatauora.govt.nz/our-health-system/digital-health/the-aotearoa-immunisation-register-air/flu-2023/> The intention is to include a section on occupational health providers sharing vaccination details with employers. This is listed in the mitigation table at the end of this PIA.

Please state to what extent, if any, the individual can opt out of providing some or all of their information
The mandatory nature of our requirement, by law, to maintain complete and accurate records is advised within the published privacy documents on the ministry website.

Please state what happens if the individual does not want to disclose their information?
A consumer must be positively identified, using NHI data, in order to receive a vaccination. Information previously provided that results in the creation of their NHI identity will be shared with the AIR.

D. Why you’re not going to tell the individual

Please state why you’re not telling the individual how the project will handle their personal information?
Not applicable
Please state what legislative exception applies?

The legislative exceptions can be found in [Principle 3, Privacy Act 2020](#) and [Rule 3, Health Information Privacy Code 2020](#)

Not applicable

Compliance check with Principle 3

Does the project comply with Principle 3?	YES	NO	UNSURE
Are you telling the individual how the project will handle their personal information (either before or as soon as practicable after the information is collected) or an exception applies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 4).
- If you have answered “No” or “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 3. Once completed, please move on to the next section (Principle 4).

Principle 4: Fair and lawful collection of information

Principle 4 requires that when an agency collects information they must do so by lawful means **and** by means that, in the circumstances of the case are fair and not intrusive.



Your method of collection may be unfair if it involves threatening, coercive, or misleading behaviour. What is fair also depends on the circumstances. You **need** to take particular care when collecting information from children and young people or other vulnerable groups. It may not be fair to collect information from children in the same manner as you would from an adult.

Please describe the current proposed method of information collection

If the information is not being collected fairly or lawfully, consider how the collection method could be adapted or modified to meet this Principle 4

The new ISD reporting functionality does not change how personal information is collected on the consumer at the time they are vaccinated.

Fair and lawful collection is addressed in the AIR Release 3 PIA.

If you’re collecting information from children or young people, **please state** what steps are you taking to address any power imbalance, and to obtain genuine consent for the collection (or authorisation) of their family/whānau?

If there are any cultural considerations, how you have assessed this, and, as appropriate, with whom you have consulted about how to ensure you collect the information in a culturally appropriate way

Compliance check with Principle 4

Does the project comply with Principle 4?	YES	NO	UNSURE
Are you collecting information in a lawful manner and by means that are fair and not intrusive?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 5).
- If you have answered “No” and “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 4. Once completed, please move on to the next section (Principle 5).

**Principle 5:
Storage and security**

Principle 5 of the Privacy Act 2020 requires an agency that holds personal information to ensure that the information is protected by such **security safeguards that are reasonable** in the circumstances to take against loss, access, use, modification, disclosure, or other misuse

A. Cloud Computing Services

	YES	NO
Does your project utilise cloud computing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- If you have answered “No”, please move on to “User Controls”.
- If you have answered “Yes”, please answer the remaining questions in this part “A” before moving on to “User Controls”:

Please describe the system and location where is the information stored?
<p>AWS Tenancy</p> <p>All data collected from all sources (other systems and people) will be hosted on the MoH Amazon Web Services (AWS) tenancy, hosted in Sydney.</p> <p>The sources of information include:</p> <ul style="list-style-type: none"> • All information collected for ISD (will be stored in the [ISM or ImmSOT]). • Immunisation History Cache (IHC). • Population Salesforce Org data related to immunisations. <p>The information held via AWS is personal information being held by AWS as agent for the Ministry in accordance with section 11 of the Privacy Act 2020. Data stored within AWS is encrypted. The Ministry controls access to the encryption keys and the data. The information is not to be used or disclosed for any purposes other than those directly permitted by the ISM and ISD.</p> <p>NSS Data Policy</p> <p>Information stored in AIR will be covered by the NSS Data Policy. This aligns with the relevant HISO standards, including HISO 10029:2015 Health Information Security Framework, and the New Zealand Information Security Manual.</p>

	YES	NO
Has a Cloud Risk Assessment been completed by your relevant data security team?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Has your relevant data security team said that a Cloud Risk Assessment is not required for your project?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has a Security Risk Assessment been completed by your relevant data security team?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Has your relevant data security team said that a Security Risk Assessment is not required for your project?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Comments: <i>if you are working with information security but CRA/SRA have not yet been completed, please add relevant detail here</i>		

Please contact your data security team for more information and support. Note that Cloud Risk Assessment and Security Risk Assessment may be completed concurrently with the PIA.

B. Access to Information

Please describe the roles that will have access to the personal information

ISD User access

- The vaccinations administered report is only available to existing AIR ISD users.

ISD User Terms and Conditions of Use and Privacy Statement

- Before a person is granted access to the AIR ISD portal, they are required to read and agree to the AIR Terms of Use. The Terms of Use can be found here: [Terms of Use - ISD 20230307.docx](#)
- The Terms of Use set clear requirements on AIR ISD portal users on accessing and handling personal information contained within AIR. The review of the Terms of Use is underway but may not be finalised in time for the ISD reporting go-live.
- Like with the privacy statement, the AIR project is also intending to review and update the Terms of Use generally.

ISD User in Facility Access

- Every ISD user is “linked” to a specific facility or facilities.
- The mechanism referred to as the ‘Sharing Rules Model’ uses the AIR access functionality is designed to capture the relationship, or relationships, between an AIR ISD user and the specific facility or facilities in which they have approved access.
- This timebound relationship is created and maintained by the facility manager established for each facility.

8. Using this relationship, the AIR can determine the ISD users, as health workers within a facility or facilities at any given time and enable an ISD user access vaccination reports for a facility.

Facility Manager Training

9. As the 'Sharing Rules Model' relies upon the facility manager for a facility, to define the relationship between an ISD user, as a health worker working within that facility, from time to time, we advise the substantial facility manager onboarding and training process advised by the AIR Engagement team, including the following steps:

- STEP 1** Appoint an AIR facility manager and contact AIR.engagement@health.govt.nz. (tell us you are the facility manager for your organisation)
- STEP 2** Facility managers are emailed a sign-up link. During the sign-up process they select 'Facility Manager' as their role. The facility manager commences training.
- STEP 3** The facility manager notifies the rest of their workforce and sends them sign up details, including the site's HPI-F code.
- STEP 4** Workforce signs up and commences training.
- STEP 5** The facility manager approves the workforce, giving access to AIR at their site.

10. Te Whatu Ora offers continuous ISD User training.

It must be noted that, while the user terms of use defines all users must satisfactorily complete all offered user training, the satisfaction of User training is not monitored by Te Whatu Ora.

Access to Personal Information as an ISD User

11. An ISD User who has access to the vaccinations administered report does not have access to any more personal information than they do now as an ISD user, using the user interfaces. The material difference in functionality being provided and assessed here is, the ISD users can export a report into their internal facility domain for the vaccinations administered at their facility. An ISD user can already 'see' a vaccination administered, to support clinical requirement.
12. All ISD Users have access to the same level of personal information for their facility/ the facilities they are approved to work.

History Recording

13. The AIR includes a user history that records user logins to support access auditability.
14. The AIR includes a user history that records user agreement of terms of use for ISD.
15. There is no current ability to log the user action of exporting a report from ISD.

Viewing, Modifying and Exporting ISD Reports

16. An ISD User can view a vaccination administered report within the ISD Portal. Once a report is viewed, the ISD user can modify the report through the application of report filters including facility, where they have access to more than one facility or date range, from within the ISD Portal.
17. An ISD User can further reduce the data exported from the ISD Portal, to a lesser set when compared to that which was exported, within the facilities internal IT environment.
18. Once downloaded to their ISD User’s internal IT environment, there is a risk the report will be used and/or disclosed for ulterior purposes and retained for longer than is necessary for its purposes of use-
19. AIR relies on the Terms of Use and applicability of the Privacy Act 2020 and HIPC 2020 to ensure that ISD Users to not use, disclose or retain the reports (and personal information) in any way that is inconsistent with this project.
20. The Terms of Use will be revised and set clear expectations around the use, disclosure and retention of information once taken out of the AIR portal environment. The review of the Terms of Use is underway but may not be finalised in time for the ISD reporting go-live.
21. Prior to go-live the AIR project team are exploring what privacy labels can be added to the vaccinations administered reports when they are downloaded by an ISD User. It is proposed that “Medical in Confidence” is added to each page of the report.

HNZ ISD User Access

22. If a HNZ team member is also an ISD user working at a Facility that has been established on ISD as a vaccination facility, then they will be able to view and modify the vaccinations administered report and 'see' vaccinations administered at that facility.
23. As above, the HNZ ISD User can already see a vaccination administered at HNZ as the ISD User is linked to HNZ as a facility. The reporting functionality does not change this. The project relies on the Terms of Use, training and internal HNZ policies and Code of Conduct to ensure the HNZ ISD User does not use the personal information on other HNZ employees and contractors in the ISD portal for any ulterior purpose.
24. Furthermore, a consumer working in a HNZ environment and being offered a vaccination by employer (HNZ) is not able to be compelled to be vaccinated AT that facility. The choice remains with the Consumer.

Please describe why these roles need access to the personal information

Vaccinators require access to identify consumers before receiving vaccinations, check vaccination history and validate the appropriateness of vaccinating.

Immunisation Administrators require access to monitor and support immunisation operations, including referral to vaccination providers.

Please describe how access will be controlled or monitored?

For example, will there be role-based or other access controls? Will there be multi-factor authentication? How will you monitor and manage access for people who change roles or leave the agency?

C. Any other Information

Please state any other steps the project has taken/ will take to prevent loss, misuse, unauthorised access, modification, or disclosure of personal information

For example:

- *Is there a need for additional privacy training, new policies, processes or contracts?*
- *How will you keep physical copies of documents secure?*
- *How will you ensure conversations are not overheard?*
- *What checks will be done to ensure you're talking to, and sharing information with, the right person?*
- *Does the project involve interaction with other agencies (eg sector partners, providers, other government agencies)? What agreements are in place to ensure all parties understand their privacy obligations (eg MoUs, supply agreements)?*
- *What are the security classification and any endorsements the information will have (eg IN-CONFIDENCE, STAFF IN-CONFIDENCE, MEDICAL IN-CONFIDENCE, SENSITIVE)*
- *what backup processes is the project putting in place? Do they include backups of metadata (eg audit logs)?*

Please see detail provided above

Compliance check with Principle 5

Does the project comply with Principle 5?	YES	NO	UNSURE
When the project holds personal information, is it using security safeguards that are reasonable to protect against loss, access, use, modification, disclosure, or other misuse?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 6).
- If you have answered “No” or “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 5. Once completed, please move on to the next section (Principle 6).

**Principle 6:
Access to personal information**

Under **Principle 6** of the Privacy Act 2020 an individual has the right to confirm **if an agency holds personal information** about them, **and** if it exists, to have **access** to that information.

Access to personal information includes the right to ask who has accessed it (i.e., information from audit logs). If an individual is given access to their information, the individual must be advised that they may request correction of their information.

Please outline how individuals will be able to access their information information.

For example, will it be through existing information request processes (e.g. requests for clinical records), or will a new process need to be put in place?

AIR has existing processes in place to enable individuals to request access to their personal information.

This new ISD reporting functionality will not change those existing processes.

This is addressed in the AIR Release 3 PIA.

Please outline how you intend to ensure that it is possible to find the information about a specific individual?

Click here to enter text.

Please state:

- if, and to what extent, the project can *audit* user access to the personal information
- what will be audited, who will conduct the audit, how regularly the audit will occur etc

The identity of members of staff who have accessed an individual's information is personal information about that individual. This means this is something that individuals are entitled to request under the Privacy Act.

Click here to enter text.

Compliance with Principle 6

Does the project comply with Principle 6?	YES	NO	UNSURE
Is there a process in place to ensure an individual can ask Te Whatu Ora if it holds personal information about them and the individual can access that information?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “**Yes**”, please move on to the next section (Principle 7).
- If you have answered “**No**” or “**unsure**”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 6. Once completed, please move on to the next section (Principle 7).

Principle 7: Request to ask for correction of information

Under **Principle 7** of the Privacy Act 2020, where an agency holds information, the individual concerned is entitled to request correction of the information.

Please describe how an individual can ask to have their information corrected?

For example, will it be through existing processes, or will a new process need to be put in place?

AIR has existing processes in place to enable individuals to request to change their personal information.

This new ISD reporting functionality will not change those existing processes.

This is addressed in the AIR Release 3 PIA.

Please outline how you intend to ensure that it is possible to find the information about a specific individual and to correct it (or add a statement of correction) if required?

Click here to enter text.

Please outline how a statement of correction provided by that individual will be managed so that it is always able to be viewed together with the disputed information.
For example, does your proposed system have the capacity to link or attach a statement of correction to a person’s file?

Click here to enter text.

Compliance check with Principle 7

Does the project comply with Principle 7?	YES	NO	UNSURE
Is there a process in place to enable an individual to request the correction of their personal information?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “**Yes**”, please move on to the next section (Principle 8).
- If you have answered “**No**” or “**unsure**”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 7. Once completed, please move on to the next section (Principle 8).

Principle 8: Accuracy of personal information before it is used or disclosed

Principle 8 of the Privacy Act 2020 states that an agency must not use or disclose information without taking reasonable steps to ensure that the information is accurate, up to date, complete, relevant and not misleading.



If you’re not collecting information directly from the individual, or are relying on old records, (as examples) there is a risk that the information will not be accurate or up to date. Carefully consider the consequences for individuals if the personal information is not accurate or up to date.

How will you ensure that only **accurate, up to date, complete and relevant** information is acted on?

The Consumer’s data held in AIR will be checked with the Consumer at each vaccination event to ensure that their name and address details align with the Consumer presenting for their vaccination.

If the information contained within the AIR is found to be inaccurate at this point, the vaccinator will initiate the process for that information to be updated in a separate application (Health UI) connected to the NHI system.

The NHI System is the Source of Truth for Health Identity information.

Compliance check with Principle 8

Does the project comply with Principle 8?	YES	NO	UNSURE
Does the project ensure that information is accurate, up to date, complete and relevant before the information is used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 9).
- If you have answered “No” or “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 8. Once completed, please move on to the next section (Principle 9).

Principle 9: Do not keep information longer than necessary

Principle 9 of the Privacy Act 2020 states that an agency that holds personal information must not keep that information for longer than is required for the purposes for which the information may lawfully be used.



Principle 9 (and rule 9 of the Health Information Privacy Code) does not apply in a vacuum. There may be other rules and regulations that will specify how long certain information must be kept for (e.g. *Public Records Act 2005*). Once those other legislative requirements for retention have been met, then under Principle 9 (or Rule 9) the information should be disposed of when it is no longer needed for the project. We strongly recommend that you engage your Records Manager to ensure records are managed consistently with the relevant disposal authority.

Please state:

- how long the information will be held by Te Whatu Ora
- the applicable legal requirements for retention of information (if any). *For example, Health (Retention of Health Information) Regulations 1996, Public Records Act 2005, General Disposal Authority 6.*

Reports also default to ‘last 30 days’ to reduce the instance of large volumes of data being retained.

Reports do include identifiable personal data, necessary for the described usages.

Once reports are extracted from ISD, and downloaded into the internal facility environment, we acknowledge the risk of them being retained beyond their useful purpose. In this instance we have applied an additional mitigation within the ISD user training, with specific reference to privacy, aimed to develop understanding appropriate retention.

Please state:

- whether all the personal information needs to be retained by the project
- Whether the information needs to be retained in a form that identifies the individual (*can it be retained in a de-identified manner*)

Please state:

- how the information will be disposed of
- who is responsible for ensuring disposal occurs

As above.

The AIR programme for AIR data.

The facility manager for data extracted into internal facility environment.

Note: We also recommend:

1. **prior** to disposing of any the information, that you engage your Records Manager,

- subject to the advice of your Records Manager, you keep a list of what has been disposed of and under what disposal authority.

Compliance check with Principle 9

Does the project comply with Principle 9?	YES	NO	UNSURE
Subject to satisfying any records management requirements, personal information is only retained for as long as it is required for the purposes of the project	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 10).
- If you have answered “No” or “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 9. Once completed, please move on to the next section (Principle 10).

Principle 10: Limits on use of personal information

Principle 10 of the Privacy Act 2020 requires that an agency which obtains personal information for one purpose **must not** use the information for any other purpose **unless** the agency believes on reasonable grounds that an exception applies.



The Office of the Privacy Commissioner recommends keeping in mind the “no surprises test”- would the way in which you’re planning to use the personal information come as a surprise to the person you collected it from?

Please describe how the information will be used in this project?

For example, if we are using information to assess an individual’s eligibility to deliver a service, outline what information is being used for assessing the eligibility and what is required to deliver the service.

AIR

Use of personal information within the ISD vaccinations administered report aligns with the defined purposes within the AIR privacy statements.

The uses in the AIR privacy statement include:

- managing your health**
- keeping you and others safe**
- planning and funding health services**
- carrying out authorised research
- training health care professionals
- preparing and publishing statistics
- improving government services
- enabling broader health and social support services.

Points [1] to [3] above outlines the basis for use of information for ISD reporting.

For example:

- Pharmacy dispensary reconciliation to vaccinations administered is a clinical safety measure, consistent with managing the consumer health.
- Occupational Health Nurse provision of vaccinations administered report to consumer’s employee is consistent with keeping the consumer and others well, and is reinforced within the employee consent process stating ‘to enable the employer to plan initiatives that support the wellbeing of staff’

The Governance Group established to govern the operation of the AIR will provide oversight of the use of the data to ensure that use matches the purpose.

CIR

The CIR privacy statement includes:

The information collected as part of the vaccination process may be used for:

1. **managing your health**
2. **keeping you and others safe**
3. **planning and funding health services**
4. carrying out authorised research
5. training health care professionals
6. preparing and publishing statistics
7. improving government services.

Some information, such as information about reactions to the vaccine, will be shared with other organisations who provide health services.

Again, the two use cases for the reports are consistent with the proposed uses.

The points [1] to [3] above outlines the basis for use of information for ISD reporting.

	YES	NO
Are the uses listed above consistent with the purposes of collection you have outlined in Principle 1?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>If the answer is “No”, please state what legislative exception applies. <i>The legislative exceptions can be found in <u>Principle 10</u> of the Privacy Act or <u>Rule 10</u> of the Health Information Privacy Code. If you’re unsure if an exception applies, please contact your Privacy Officer.</i></p> <p><i>Click here to enter text.</i></p>		

	YES	NO
Does the use of information by the project involve information matching or sharing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If the answer is “yes”, please provide more information here.

Please consider any additional issues that may arise (e.g. the need for agreements to enable and regulate matching and sharing). Please annex any relevant documents to this PIA.

Compliance check with Principle 10

Does the project comply with Principle 10?	YES	NO	UNSURE
Will the personal information only be used for the purpose it was obtained or an exception applies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 11).
- If you have answered “No” or “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 10. Once completed, please move on to the next section (Principle 11).

Principle 11: Limits on disclosure of personal information

Principle 11 of the Privacy Act 2020 states that an agency must not disclose the information unless the agency believes on reasonable grounds that an exception applies.



The Office of the Privacy Commissioner recommends keeping in mind the “no surprises test”- would the way in which you’re planning to disclose the personal information come as a surprise to the person you collected it from? Please note that **principle 11 does not limit** storing personal information in “the cloud” or sharing information with a service provider that stores or processes information on our behalf.

	YES	NO
Will the project disclose personal information to the individual concerned?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Will the project disclose personal information to individuals or agencies outside of Te Whatu Ora?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- If you have answered “No”, please move on to the next section (Principle 12).
- If you have answered “Yes”, please answer the following questions before moving to the next section.

Please state the basis for disclosing personal information

The grounds can be found in [Principle 11](#) of the Privacy Act or [Rule 11](#) of the Health Information Privacy Code. If you’re unsure if an exception applies, please contact your Privacy Officer.

Personal information is shared as:

- The disclosure of the information is for one of the purposes in connection with which the information was obtained.

- The disclosure is directly related to the purposes in connected which the information was obtained

If there is a disclosure to someone **other than the individual concerned, please:**

- list all parties that you will disclose the information to
- explain why those third parties need the information
- outline what safeguards will be put in place to ensure that the information is secure once it has been shared with the third party

Pharmacy Use Case

The Pharmacy are using the report internally, to undertake the duties of the pharmaceutical role - reconcile dispensed vaccines to administered AND send the data back to Te Whatu Ora's vaccination payments team. (ONLY)

Occupational Health Nurse Use Case

The vaccination administered reports are shared by the ISD User with the consumers' employer.

The Occupational Health Nurse is sharing the report with the Consumer's employer, who contracted the nurse to offer and administer vaccinations to their employees.

Compliance with Principle 11

Does the project comply with Principle 11?	YES	NO	UNSURE
Personal information is not disclosed to an individual or agency outside of Te Whatu Ora or an exception applies	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 12).
- If you have answered “No” or “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 11. Once completed, please move on to the next section (Principle 12).

**Principle 12:
Disclosure of information outside of New Zealand**

Principle 12 of the Privacy Act provides that an agency may only disclose personal information to a foreign person or entity (B), if:

- The individual authorises it in situations where B may not be able to protect the information to the same degree as a NZ entity would; or
- B carries on business in NZ and is therefore subject to the Privacy Act 2020; or
- B's privacy laws offer comparable safeguards to the NZ Privacy Act 2020; or
- B is bound by contract or agreement to protect the information with similar safeguards to NZ standards.



Please note that **principle 12 does not limit** storing personal information in “the cloud” or sharing information with a service provider that stores or processes information on our behalf

	YES	NO
Will Te Whatu Ora – Health New Zealand disclose personal information to a foreign person or entity?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

- If you have answered “No”, please move on to the next section (Principle 13).
- If you have answered “Yes”, please answer the following questions before moving to the next section.

Please state:

- The foreign entities or persons that we will be disclosing personal information to
- Where the foreign entities or persons are based (i.e., which jurisdiction)
- Why the foreign entity or person needs to have the personal information
- what evidence you have that the foreign entity receiving information has the same safeguards available to protect the information as are provided under the Privacy Act 2020.
 - If the foreign entity cannot provide the same safeguards, indicate whether that has been explained to the individual, what has been explained and whether the individual consents to the sharing of their information with the foreign entity. Please provide evidence of that consent.
- Provide details on what safeguards have been put in place to protect the individual’s information (such as a contract or an agreement with the foreign entity).
- Has an ethics or research committee, such as Health and Disability Ethics Committee, approved overseas disclosure?

Compliance check with Principle 12

Does the project comply with Principle 12?	YES	NO	UNSURE
Personal information is not disclosed outside of New Zealand, or it is authorised under Principle 12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Principle 13).
- If you have answered “No” or “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 12. Once completed, please move on to the next section (Principle 13).

Principle 13: Creation or use of unique identifiers

Principle 13 of the Privacy Act 2020 says an agency may only **assign** a unique identifier to an individual if that identifier is necessary to enable the agency to carry out 1 or more of its functions effectively.

To avoid doubt, Te Whatu Ora – Health New Zealand does not **assign** unique identifiers when it records and uses a unique identifier so that we can communicate with another agency about the individual.

Unique identifiers are individual numbers, references, or other forms of identification allocated to people by organisations as a way to uniquely identify the person to the organisation assigning the identifier.

Examples include driver’s licence numbers, passport numbers, IRD numbers, employee ID numbers, or National Health Index (NHI) numbers.

	YES	NO
Will the project assign unique identifiers?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Will the project use unique identifiers?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- If you have answered “No” to these questions, please move on to the next section (Principle 13).
- If you have answered “Yes” to any one of these questions, please answer the following questions before moving to the next section.

Please explain:

- What unique identifiers will be assigned or used for this project
- How will the unique identifiers be created?
- If you’re proposing to use NHIs, can the project’s purpose be achieved by using an alternative unique identifier
- Are you intending to use a unique identifier that has been assigned by another agency? *If so, please consult your privacy officer.*

Unique identifiers applied by the NHI are used to identify the consumer and maintain a complete and accurate record of health.

The ISD reporting capability does not assign or create or assign additional unique identifiers to the individual.

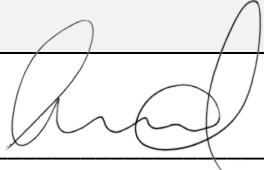

Compliance check with Principle 13

Does the project comply with Principle 13?	YES	NO	UNSURE
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- If you have answered “Yes”, please move on to the next section (Review and sign off).
- If you have answered “No” or “unsure”, please complete the [Risk and Mitigation Table \(Appendix 1\)](#) in respect of this Principle 13. Once completed, please move on to the next section (Review and sign off).

Review and sign off

Privacy Officer / Privacy Committee/ Privacy & Security Governance Group review	
Name: Viv Kerr Interim Privacy Officer Signature: <u>Viv Kerr</u>	Date: <u>24/07/2023</u>

Business Owner	
Name: Loren Shand Signature: _____ 	Date: <u>21/07/23</u>
Project Manager	
Name: Matt Hannant Signature: _____ 	Date: 21 / 07 / 23

Appendix 1: Risk and Mitigation Table

- This risk and mitigation table aims to help you identify, describe, and mitigate actual and potential privacy risks involved in your project.
- For “**privacy risk description**”, please identify each vulnerability associated to the Privacy Principle you are assessing. There may be more than one actual or potential risk for each Privacy Principle.

Risk Reference Number	Privacy Principle or Rule	Privacy Risk Description	Existing Controls (preventative or detective)	Assessment of current privacy residual risk	Recommended mitigations or privacy enhancements	Revised privacy risk rating	Risk and mitigation owner	Date of implementation
	<i>Please state the Privacy Principle (under the Privacy Act 2020) or the Rule (under the Health Information Privacy Code 2020) that you are assessing the risks for</i>	<i>Please provide a description of the potential and actual privacy risk identified</i>	<i>Document the existing systems and safeguards in place that act to minimise the privacy risk identified</i>	<i>Assess the risk with the existing safeguards and systems in place</i>	<i>Specify recommendations for how the residual risks can be removed, managed to ensure the individual is protected</i>	<i>Assess the risk when the new safeguards to be implemented</i>	<i>Please specify who is responsible for implementing the privacy mitigations or enhancements</i>	<i>Please specify the date by which the privacy mitigations or enhancements are to be implemented</i>

R.02	IPP3, 9, 10, 11	<p>Use, disclosure and retention</p> <p>When an ISD User runs a report personal information is exported to Excel or CSV. Once exported, the report is taken out of AIR into the ISD User's internal environment. There is then a risk that personal information may be used and disclosed other than as outlined in this PIA. There is also a risk the reports containing personal information are retained by the ISD User for longer than required.</p>	<p>Terms of Use</p> <p>ISD users are required to read and agree to a Terms of Use prior to having access to AIR. The Terms of Use set out expectations around access to and disclosure of personal information etc. As seen in mitigation M1, the Terms of Use will be reviewed to strengthen controls re taking personal information out of AIR.</p> <p>Training</p> <p>Training is offered to ISD Users on AIR.</p> <p>However, there are some limitations to the extent that training can mitigate these risks including:</p> <ul style="list-style-type: none"> • It is voluntary and not mandatory • Privacy is just one component of the training. • Pharmacies and occupational health providers also have a responsibility for ensuring their team members are aware of their responsibilities under the Privacy Act and Health Information Privacy Code etc. <p>Auditability</p> <p>Logins within AIR are currently audited. Again, this function is limited in mitigating this privacy risk as it is only log ins that is audited- not exporting of reports etc.</p>	<p>Probability: Possible Consequence: Significant Risk rating: High</p>	<p>M1. Terms of Use</p> <ul style="list-style-type: none"> • Review the Terms of Use with relevant stakeholders (privacy and legal) and look to strengthen regarding information taken out of the AIR environment and into the ISD Users environment. <p>This may include:</p> <ul style="list-style-type: none"> • requirements to immediately delete information downloaded to an internal environment once used for the use case. • requirements to only use the information contained in reports for the specific purposes of the use case. • Requirements not to share with any other individual or agency unless approval given <p>M2. FAQs to occupational health providers</p> <p>An FAQ will be published on the HNZ 2023 flu reporting website that addresses occupational health providers sharing personal information with employers. HNZ encourages occupational health providers to periodically review their privacy statements, ensure they're accurate and up to date and have the necessary consents for information sharing. https://www.tewhatauora.govt.nz/our-health-system/digital-health/the-aotearoa-immunisation-register-air/flu-2023/</p> <p>M3. Medical in Confidence labelling</p> <p>As personal information will be exported to Excel or CSV for the above use cases, it is recommended that a Medical in Confidence watermark be added:</p> <ul style="list-style-type: none"> • on each page of the report. • to the Report Title • Medical in Confidence sensitivity meta-data label added to the Report. <p>The AIR project team have considered the recommendation and have been unable to apply a Watermark or meta data label owing to the technical constraints of the Salesforce Community reporting functionality.</p> <p>A requirement has been raised to include 'medical in confidence' within the report title of each vaccinations administered report.</p>	<p>Probability: Possible Consequence: Significant Risk rating: High</p>	<p>M1: Lisa Sheppard</p> <p>M2: Andrew Jones</p> <p>M3: Loren Shand</p> <p>M4: Loren Shand</p> <p>M5: Tanya Hawthorne</p>	<p>M1: As soon as possible and prior to go-live</p> <p>M2: Prior to go-live</p> <p>M3: Prior to go live</p> <p>M5: Prior to go live</p>
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					<p>This requirement has been taken in to the ISD delivery team and should be present within the released functionality on 29th March 2023.</p> <p>M4. Reporting Permissions</p> <p>All ISD users have access to the reporting functionality. It is recommended that permissions/grants for reporting functionality be explored. I.e. can a Facility Manager designate ISD users within their facility to run reports.</p> <p>AIR Project team consider developing user access model that enables user access to Export report to be by express permission grants.</p> <p>M5: Check box prior to running a report</p> <p>It is recommended that AIR explore whether a checkbox with a privacy reminder can be added prior to an ISD user running a report.</p>			
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R.02	IPP2 and 3	<p>Level of personal information contained within the reports</p> <p>The reporting functionality creates a single report for both use cases- it doesn't change the level of personal information pulled through into a report between the two use cases.</p> <p>There is a risk that personal information will be pulled through into a report that is not needed for the use case.</p>	<p>Pharmacies and occupational health providers</p> <p>It is the responsibility of the pharmacies and occupational health providers to be transparent and honest with the consumer about the collection and handling of personal information at the time a vaccine is administered. This will include, as applicable, sharing of personal information with someone's employer.</p>	<p>Probability: Possible Consequence: Significant Risk rating: High</p>	<p>As above at M2: M2. FAQs to occupational health providers</p> <p>An FAQ will be published on the HNZ 2023 flu reporting website that addresses occupational health providers sharing personal information with employers. HNZ encourages occupational health providers to periodically review their privacy statements, ensure they're accurate and up to date and have the necessary consents for information sharing. https://www.tewhatauora.govt.nz/our-health-system/digital-health/the-aotearoa-immunisation-register-air/flu-2023/</p> <p>M6: Controls on level of PI pulled into a report</p> <p>It has been recommended that AIR consider what controls it can implement to ensure only the relevant personal information required for the use case is pulled into the report. This may include:</p> <ul style="list-style-type: none"> • Limit the vaccine types included in the report to only those required by the facility user to meet the specific use case. For example; on Occupational Health provider, administering privately funded vaccinations, may only require the Influenza vaccination within any vaccinations administered report. • 'Target Disease' filter on the vaccinations administered report, to enable an ISD user to efficiently reduce the included vaccines in the vaccination administered report, prior to export, thus providing additional mitigation against inappropriate disclosure of data. • Exclusion of Monkey Pox vaccination from the vaccinations administered report as an especially sensitive vaccination that is not administered by the Pharmacy, nor provided within the stated use case for the Occupational Health provider. • Obfuscate or omit the NHI on the vaccinations administered report, where not required in the stated use case for the Occupational Health provider. <p>This action item may be further supported by the development of user access model (M4</p>	<p>Probability: Possible Consequence: Minor Risk rating: Medium</p>	M6: Loren Shand	M6: Prior to the go live
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					above) that enables a facility manager to expressly grant permission to the Export Report functionality, to only those users who require that functionality to undertake the duties of their position.			
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Appendix 2: Glossary

Please complete the following table with terms, abbreviations, and acronyms you have used in this PIA.

Term	Definition, description, relationship, and business rules
AIR	Aotearoa Immunisation Register (AIR) formerly known as NIS
AWS	Amazon Web Services (AWS)
CIR	COVID-19 Immunisation Register (CIR)
Health UI	A web based user interface for the NHI
HISO	Health Information Standards Organisation
HNZ	Te Whatu Ora – Health New Zealand
HPI	Health Practitioner Index (HPI). See also subtypes for. <ul style="list-style-type: none"> • HPI-O – Health Practitioner Index – Organisation • HPI-F – Health Practitioner Index - Facility
ISD	Immunisation Service Delivery (ISD). A user interface for the AIR providing access to vaccinators. Also referred to as the ‘Vaccinator Portal’
ISM	Immunisation Service Management (ISM). A user interface for the AIR providing access to immunization administrators. Also referred to as the ‘Administrator Portal’
MoH	Manau Hauora – Ministry of Health
NIS	National Immunisation Solution (now referred to as AIR)

Appendix 3

Sample Vaccination Administered Report

*This sample report uses **test data only**.

All vaccinations at my facilities

As of 2023-03-10 13:09:22 Japan Standard Time/JST • Generated by Stewart McDiarmid • Sorted by Vaccination Date (Ascending)

Filtered By

Show: All healthcare facilities
Status equals Completed

Facility 1	Target Disease 1	Facility Type	Organisation	Imm Record #	Source	Vaccination 1	Consumer First Name	Middle Name	Last Name	NHI	Date of Birth	Age	Indicator	Manufacturer	Vaccine Name
Community Pharmacy	Monkeypox	Community pharmacy	Community Pharmacy	PIM-615832	ISD	2/03/2023	SEAN JOHN	SEAN		JOHNSO ZBT60	5/03/1984	39 Years		Bavarian Nordic Inc	JYNNEOS
	Subtotal	Coun	1												
	Tetanus/Diphtheria/Pertussis (Whooping Cough)	Community pharmacy	Community Pharmacy	PIM-615831	ISD	2/03/2023	SEAN JOHN	SEAN		JOHNSO ZBT60	5/03/1984	39 Years	Maori/Pacific 55-6	GlaxoSmithKline NZ Limited	Boostrix
	Subtotal	Coun	1												
Subtotal		Coun	2												
Live Facility	Meningococcal	General practitioner practice site	Live Facility	PIM-615888	ISD	28/02/2023	SEAN JOHN	SEAN		JOHNSO ZBT60	5/03/1984	39 Years		Sanofi-Aventis New Zealand Limi	Menactra
	Subtotal	Coun	1												
Subtotal		Coun	1												
Palmerston North Hospital Pharmacy	Measles/Mumps/Rubella	DHB Hospital Pharmacy	Palmerston North Hospital Pharmac	PIM-615886	ISD	28/02/2023	SEAN JOHN	SEAN		JOHNSO ZBT60	5/03/1984	39 Years	Over 65 Years	GlaxoSmithKline NZ Limited	Priorix
	Subtotal	Coun	1												
	Meningococcal	DHB Hospital Pharmacy	Palmerston North Hospital Pharmac	PIM-615887	ISD	28/02/2023	SEAN JOHN	SEAN		JOHNSO ZBT60	5/03/1984	39 Years	Privately Funded	GlaxoSmithKline NZ Limited	Bevzero
	Subtotal	Coun	1												
Subtotal		Coun	2												
Yellow Cross Intergrated Health Centre- Central Auck	Measles/Mumps/Rubella	Health Centre	Yellow Cross Intergrated Health Cent	PIM-615834	ISD	2/03/2023	SEAN JOHN	SEAN		JOHNSO ZBT60	5/03/1984	39 Years		GlaxoSmithKline NZ Limited	Priorix
	Subtotal	Coun	1												
	Meningococcal	Health Centre	Yellow Cross Intergrated Health Cent	PIM-615833	ISD	2/03/2023	SEAN JOHN	SEAN		JOHNSO ZBT60	5/03/1984	39 Years	Privately Funded	Sanofi-Aventis New Zealand Limi	Menactra
	Subtotal	Coun	1												
Subtotal		Coun	2												
Total		Coun	7												

Appendix 4

Screen image of ISD Indication types for Influenza Vaccine (Reason Codes)

Vaccine details

* Vaccine
Influenza ▼

To edit the vaccine, please contact an AIR administrator.

* Product name
Fluad Quad ▼

Target disease(s)
Influenza

Administered volume
0.5 mL

* Indication

- 4 years and under who have had a history of hospitalisation with a respiratory condition
- Child aged 6 months to 12 years
- Eligible Medical Condition
- Māori/Pacific 55-64
- Over 65 Years
- Pregnant
- Privately Funded
- Serious mental health or addiction

Privately funded indicates the consumer is paying for the vaccination themselves or their employer is.