

Information sharing compliance checklist

If you or your organisation wish to share information under Part 13A of the *Crimes (Domestic and Personal Violence) Act 2007* (Part 13A), you must comply with the Domestic Violence Information Sharing Protocol (Protocol). Compliance with the Protocol must be determined using this Compliance Checklist. The checklist should be read in conjunction with chapter 18 Compliance located in the Protocol.

Service providers must use the checklist to:

- Assess their state of readiness to share information under the Protocol
- Conduct annual compliance self-assessments
- Report on compliance to their funding body if applicable, and
- Report on any remedial action.

Funding bodies must use the checklist to:

- Assess and monitor a service provider’s state of readiness to share information under the Protocol
- Monitor a service provider’s ongoing compliance with the Protocol
- Determine and monitor any remedial actions necessary to ensure future compliance with the Protocol, and
- Conduct formal audits.

Instructions

State of readiness to share information under the Protocol:

- You must be compliant or partially compliant in each section in Part A, and if partially compliant, set out the steps and time frames for full compliance. Where the section is not relevant at the time of completion of the checklist, select N/A and provide a brief explanation.

Self-assessment by service providers:

- Rate your level of compliance against each of the sections in Part A (compliant, partially compliant or non-compliant), and
- Provide any relevant additional information in Part B.

If compliant	If partially compliant or non-compliant
<ul style="list-style-type: none"> • Submit for review and endorsement by senior staff • Maintain on a compliance file • Submit copy to the funding body as requested 	<ul style="list-style-type: none"> • Describe how you or your organisation are not fully compliant • Explain the reason(s) why you are not fully compliant (if you are subject to a compliance improvement plan, indicate any progress since the last completion of the checklist) • Describe remedial action(s) that will be taken to prevent future non-compliance • Submit for review and endorsement by senior staff • Maintain on a compliance file • Submit copy to the funding body • Submit copy to the NSW Department of Justice as required • Participate in the development of a compliance improvement plan and any other actions as required under the Protocol

Desktop review by funding body:

- Review self-assessment ratings and any explanation/remedial action listed in Part A
- Seek further information/clarification if required
- If the checklist indicates partially compliant or non-compliant, provide guidance and corrective feedback or develop a compliance improvement plan with the service provider
- Monitor the compliance improvement plan until full compliance is achieved
- Undertake any other actions as required under the Protocol
- Complete Part C, and
- Provide any feedback from Part B to the Department of Justice (cpd_unit@adg.nsw.gov.au) as required.

Compliance checklist

Name of service provider	
Address/contact details	
Checklist completed by (name, position)	
Assessment date (start, finish)	
Endorsed by (name, position)	Signature
Submitted to monitoring body (date, details)	

Part A – Organisation Compliance

Legend: C: Compliant; PC: Partially compliant; NC: Non-compliant

Requirements	Evidence	Rating	Explanation/remedial action required
Organisational practice	<p>The service provider can demonstrate that:</p> <ul style="list-style-type: none"> organisational policies and procedures comply with the Protocol quality assurance processes include a review of internal information sharing policies and procedures staff training manuals incorporate information sharing procedures under the Protocol 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC	
Policies, procedures and processes	<p>The service provider can demonstrate policies and procedures that set out:</p> <ul style="list-style-type: none"> how to identify and manage a conflict of interest when and how client consent to share information must be sought decision pathways for approval of information sharing without consent or overriding a refusal of consent client complaint handling procedures management of breaches and non-compliance of information sharing under the Protocol 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC	

Requirements	Evidence	Rating	Explanation/remedial action required
Staff	<p>The service provider can demonstrate that:</p> <ul style="list-style-type: none"> all relevant staff have received induction and/or training on the Protocol senior staff with responsibility for supporting and approving information sharing decisions are identified and have received appropriate training information is available to direct staff to the Protocol 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC	
Record management	<p>The service provider can demonstrate safe and secure methods for:</p> <ul style="list-style-type: none"> collection, use and sharing of personal and health information recording the collection, use and sharing of personal and health information storage and disposal of personal and health information 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC	
Monitoring and compliance	<p>The service provider can demonstrate:</p> <ul style="list-style-type: none"> completion of annual self-assessments processes to monitor/review information flows timely completion of any compliance improvement plan systems to monitor access to electronic client information database 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC	
Complaints	<p>The service provider can demonstrate in relation to any complaint:</p> <ul style="list-style-type: none"> timeliness in dealing with the complaint documentation of the complaint and the resolution evidence of notification of the complaint to the funding body 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC <input type="checkbox"/> NA	
Breaches and non-compliance	<p>The service provider can demonstrate in relation to any breach or non-compliance:</p> <ul style="list-style-type: none"> that the non-compliance and/or breach of the Protocol and/or the Act was identified rapidly and appropriate actions taken as specified in the Protocol remedial action was commenced immediately to meet full compliance appropriate action was taken to reduce any threat to the victim or any other persons victims are informed of the breach or non-compliance as required by the Protocol 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC <input type="checkbox"/> NA	

Requirements	Evidence	Rating	Explanation/remedial action required
Breaches and non-compliance	<p>The service provider can demonstrate in relation to any breach or non-compliance:</p> <ul style="list-style-type: none"> that the non-compliance and/or breach of the Protocol and/or the Act was identified rapidly and appropriate actions taken as specified in the Protocol remedial action was commenced immediately to meet full compliance appropriate action was taken to reduce any threat to the victim or any other persons victims are informed of the breach or non-compliance as required by the Protocol 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC <input type="checkbox"/> N/A	
Victim's rights	<p>There is evidence that:</p> <ul style="list-style-type: none"> victims are informed of their right to give or refuse consent to share their information victims are informed of their right to access their information and amend any inaccuracies victims are informed of their right to make a complaint and how to do so if they believe their information has been inappropriately disclosed 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC <input type="checkbox"/> N/A	
Victim consent	<p>There is evidence of:</p> <ul style="list-style-type: none"> documenting consent (when and how it is sought) decisions to share information without consent safe and secure disposal of information if a referral is refused or consent is refused 	<input type="checkbox"/> C <input type="checkbox"/> PC <input type="checkbox"/> NC <input type="checkbox"/> N/A	

Part B – General feedback

List any comments about the compliance checklist or about any aspects of the Protocol that may help improve the compliance monitoring process.

Part C – Desktop review

To be completed by the funding body

Name of funding body		Region	
Name of person completing the review		Contact details	
<p>Examples:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Request prior/new self-assessment compliance checklist(s) <input type="checkbox"/> Develop compliance improvement plan with service provider <input type="checkbox"/> Review compliance improvement plan <input type="checkbox"/> Finalise compliance improvement plan <input type="checkbox"/> Advise service provider to cease sharing information under the Protocol <input type="checkbox"/> Notify the NSW Department of Justice <input type="checkbox"/> Notify the NSW Privacy Commissioner <input type="checkbox"/> Other (list) <p>Actions required</p>			Due date
	<p>Endorsement (name, position, signature, date)</p>		