

Information Privacy and Camera Surveillance Survey 2015

Hospital and Health Service Sector Survey Report

Queensland Hospital and Health Service sector responses

All data and information in this document are believed to be accurate and have come from sources believed to be reliable. Upon completion of the survey, consistency checks, data cleaning and editing were carried out. Where the resolution of an issue was not immediately apparent, agencies were contacted to clarify their responses. While this process resolved nearly all of the data issues, some minor issues were still not able to be resolved. Accordingly, the Office of the Information Commissioner cannot guarantee or represent that the data and information are accurate, up to date or complete, and disclaims liability for all claims, losses, damages or costs of whatever nature and however occurring or arising as a result of relying on the data and information, regardless of the form of action, whether in contract, tort (including negligence), breach of statutory duty or otherwise.

The OIC wishes to thank all responding agencies for their co-operation.



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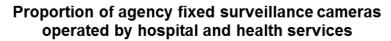
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Table of Contents

1	Overview	4
2	Surveillance camera deployment	5
3	Number of cameras	6
4	Placement of surveillance cameras	7
5	Reasons for implementing surveillance cameras	8
6	Making information on surveillance cameras publicly available	9
7	Data storage and security of footage	g
8	Disclosure of camera surveillance footage	10
9	Private sector contractors	11
10	Mobile surveillance cameras	11

1 Overview

Almost one tenth of the cameras operated by Queensland government agencies were operated by Hospital and Health Services. The Hospital and Health Services sector was new to the 2015 survey and thus comparisons to 2011-12 results are not available.



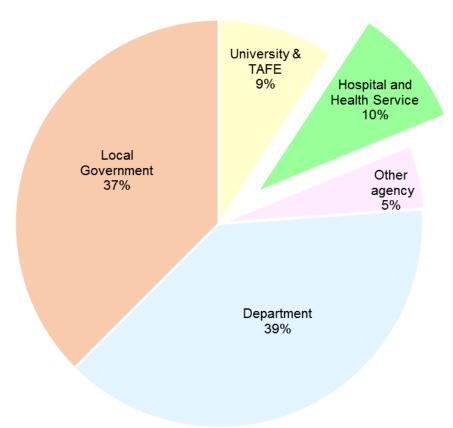


Chart HHS 1 Proportion of fixed surveillance cameras operated by Hospital and Health Services

The Hospital and Health Service sector reported slightly more inclusion of privacy elements in their policies and procedures governing the operation of surveillance camera systems than agencies overall.

The majority of Hospital and Health Services informed the community about the camera surveillance through a notice in the general area where cameras were used. Hospital and Health Services though were less likely than other agency sectors to use other methods of informing people about the surveillance and made little use of their websites to provide information about camera surveillance.

While the Hospital and Health Services sector overall performed well in many areas there was room for improvement in this sector. The Hospital and Health Services sector accounts for almost one in ten government fixed surveillance cameras, all responding Hospital and Health Services operate fixed camera installations, and there are a number of Hospital and Health Services with large fixed camera installations. In addition the homogeneity of purpose of cameras in the sector should make uniform guidance easier. Given the nature of the facilities managed by the sector, improvements in Hospital and Health Services practices regarding adoption of the privacy principles are important for the community in ensuring the operation of camera surveillance respects and protects individual privacy.

2 Surveillance camera deployment

15 Queensland Hospital and Health Services responded to the survey in 2015 out of 16 Hospital and Health Services in total (93.8%). All responding Hospital and Health Services reported operating fixed surveillance cameras in 2015.¹



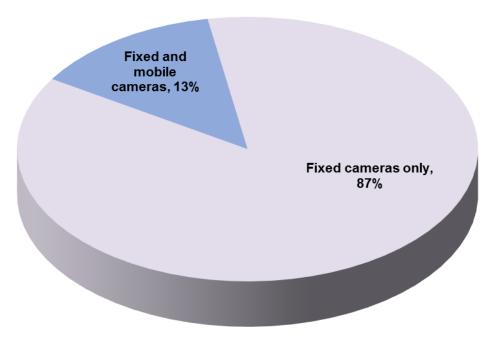


Chart HHS 2 Proportion of responding Hospital and Health Services which operated fixed and mobile surveillance cameras

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Note that Hospital and Health Services reported that operating fixed surveillance cameras was mandatory for this sector.

3 Number of cameras

Queensland Government Hospital and Health Services reported operating over 3,000 fixed surveillance cameras in 2015, which was almost one in ten of all fixed surveillance cameras operated by Queensland government agencies in 2015.

Proportion of all fixed surveillance cameras operated by Hospital and Health Services

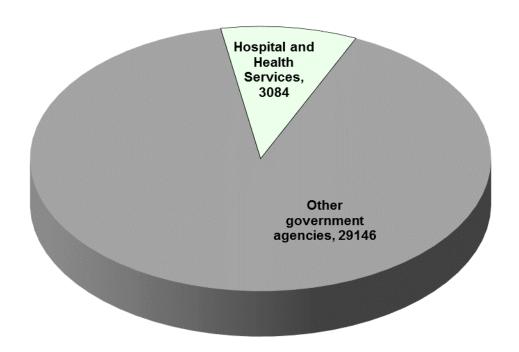


Chart HHS 3 Proportion of all fixed surveillance cameras operated by Hospital and Health Services

Hospital and Health Services were more likely than Queensland government agencies overall to operate large fixed surveillance camera deployments (seven Hospital and Health Services operated more than 100 cameras).

The Hospital and Health Service sector could be split into two clear groups based on fixed surveillance camera deployment size. Five Hospital and Health Services, which was under half of the number of Hospital and Health Services, accounted for the vast majority of the fixed surveillance cameras (86.0%) operated by the sector. These five Hospital and Health Services operated over 450 fixed surveillance cameras each. Seven Hospital and Health Services operated between 20 and 140 fixed surveillance cameras each, and operated 14.0% of the fixed surveillance cameras in the sector. Three Hospital and Health Services, while reporting operating fixed surveillance cameras, did not report the total number of fixed cameras operated.

4 Placement of surveillance cameras

Hospital and Health Services reported that around a third of all the fixed surveillance cameras were used within administrative buildings and a third were used to monitor pedestrian traffic. Around 400 cameras each were used to monitor the exterior of buildings or other property asset and 'other areas'. The comments on the survey indicated that these 'other areas' included car parks, entrances, and public areas around the hospital campus.

Hospital and Health Services on average used more cameras to monitor within administration buildings than other government agencies but fewer cameras for other location types except for pedestrian traffic which was around the same.

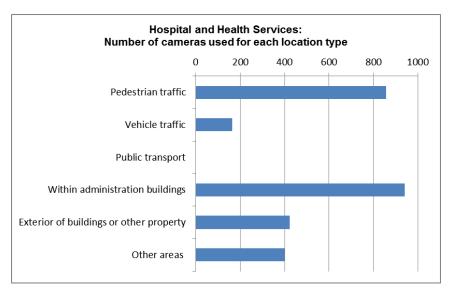


Chart HHS 4 Number of cameras used by Hospital and Health Services for each location type.

Note some cameras monitored multiple location types.

Implementation of policies and procedures

Hospital and Health Services overall reported slightly more inclusion of privacy elements in their policies and procedures governing the operation of surveillance camera systems than agencies overall. Half of the Hospital and Health Services had implemented 13 or more of the identified privacy elements in policies and procedures out of the 16 specified. Three Hospital and Health Services had implemented less than seven of the identified privacy elements in their policies and procedures.

Hospital and Health Services were more likely to provide at least some training to staff in surveillance camera system policies and procedures than agencies overall. Only three Hospital and Health Services though reported full implementation of training for staff in surveillance camera system policies and procedures across the agency.

The survey identified that there was still significant room for improvement in this area.

5 Reasons for implementing surveillance cameras

Hospital and Health Services uniformly identified public and/or staff safety as one of the reasons for installing fixed camera surveillance systems. In common with agencies overall, Hospital and Health Services also identified property protection; crime prevention, investigation and enforcement; increasing the public perception of safety; and improving the capacity to respond to issues as the common purposes for installing fixed camera surveillance systems. Hospital and Health Services were more likely to identify improving the capacity to respond to issues; increase public perception of safety; public and/or staff safety; crime investigation and enforcement; and traffic management as reasons for implementing camera surveillance than government agencies overall.

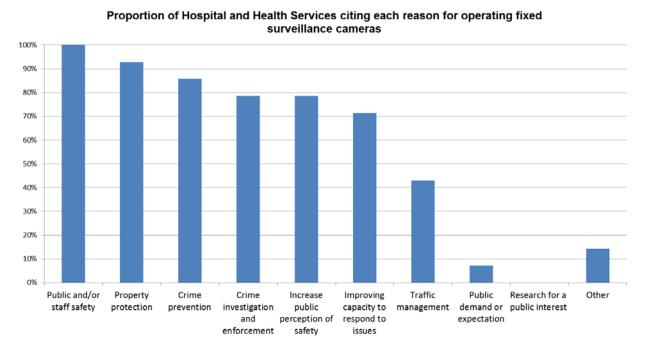


Chart HHS 5 Proportion of Hospital and Health Services citing each reason for operating fixed surveillance cameras

The majority² of Hospital and Health Services reported relying on at least one item of information or evidence to support the introduction of surveillance camera systems, which was most commonly described as 'other information or evidence' or research into the effectiveness of surveillance cameras.³ The comments suggested that the other evidence used to support the introduction of camera surveillance included mandatory requirements, a security review or safety considerations. Two Hospital and Health Services had completed a privacy impact assessment to support the introduction of camera surveillance.

One Hospital and Health Service with multiple fixed camera surveillance systems reported evidence to support the introduction of at least one of their camera surveillance systems but that they didn't know what evidence had supported the introduction at least one of their other camera surveillance systems.

² 12 out of 14 agencies responding to this question.

6 Making information on surveillance cameras publicly available

Over four fifths of Hospital and Health Services operating camera surveillance systems stated they actively informed the community about the surveillance, similar to agencies overall.

All Hospital and Health Services which actively informed the community about the surveillance used a notice in the general area where cameras were used. Hospital and Health Services though were less likely than other agency sectors to use any of the other identified methods of informing people about the surveillance. The next most common method used by Hospital and Health Services was a third of the responding Hospital and Health Services providing a notice in the immediate vicinity of each camera. Only two Hospital and Health Services reported that they provided information to the public about how people can access footage, but the website scan could not confirm this as no information was provided on accessing camera surveillance footage on Hospital and Health Service websites.

No Hospital and Health Services had information about the Hospital and Health Service's management of camera surveillance on their website. No Hospital and Health Service included camera surveillance footage in their lists of personal information holdings on their website.

One Hospital and Health Service stated that they provided information on their camera surveillance system in a publicly available document. No Hospital and Health Service had an identified policy or procedure published on their website for managing camera surveillance.

7 Data storage and security of footage

The majority of Hospital and Health Services stored at least some camera surveillance footage themselves. Hospital and Health Services had implemented a range of security measures to protect their camera surveillance footage but this was not implemented by all Hospital and Health Services.

The majority of Hospital and Health Services reported storing at least some of their camera surveillance footage on their own facilities. One Hospital and Health Service stored camera surveillance footage in a private contractor's facility. One Hospital and Health Service stored the footage directly on the surveillance camera hard drive and one did not store the footage – it was overwritten daily. In two cases, some of the footage was not retained anywhere or the Hospital and Health Service did not know where it was stored.

Hospital and Health Services reported being most likely to manage access to surveillance camera footage through limiting authorised access to specific individuals, physical security measures such as locked storage, password protection for stored footage and documented security procedures for access by external entities. Hospital and Health Services were more likely to report implementing these measures than government agencies overall, except for password protection. Hospital and Health Services were also the most likely agency sector to ensure access to footage is documented (over half).

Two Hospital and Health Services subjected footage to data encryption and one adopted a different method to manage access.⁴ Two Hospital and Health Services either did not manage footage formally or didn't know how access to footage was managed.

8 Disclosure of camera surveillance footage

All Hospital and Health Services which operated surveillance cameras had received a request for access to the footage.

Hospital and Health Services received over 300 requests to access camera surveillance footage in the previous 12 months. Hospital and Health Services received around the same proportion of requests to access footage as to the number of fixed surveillance cameras operated by the sector. Over half of these requests were directed to only two Hospital and Health Services.

Half of the Hospital and Health Services reported having documented policies and procedures as to how an individual could seek access to footage containing images of them, and over two thirds had documented policies and procedures for staff as to how to review footage and extract relevant material in response to a request for footage.

Two Hospital and Health Services reported having publicly available information as to the process whereby people could seek access to footage. The website scan could not find this information on the website of any Hospital and Health Service.

Ten Hospital and Health Services had an administrative arrangement with another entity concerning access to camera surveillance footage. All of these Hospital and Health Services reported having an administrative arrangement with another government agency, most commonly the Queensland Police Service, and one had an administrative arrangement with another organisation. All Hospital and Health Services with an administrative arrangement had access occur according to a formal written agreement or procedure and all but one used a standardised request form.

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⁴ A method of restricting access was adopted in circumstances specific to that Hospital and Health Service.

9 Private sector contractors

Just over a quarter of Hospital and Health Services reported that their camera surveillance system was operated in full or part by a private sector contractor (four Hospital and Health Services). Two Hospital and Health Services reported that the contract for operating the surveillance camera system was entered into from 1 July 2009. Both of these had bound the contractor to compliance with the privacy principles and included all of the identified privacy items explicitly in the contract, except for the secondary use of footage.

10 Mobile surveillance cameras

Due to the small number of agencies in the Hospital and Health Services, university and TAFE and other agency sectors which reported operating mobile surveillance cameras in 2015 these sectors were analysed and reported together with regards to mobile surveillance cameras.

These three sectors were the least likely to operate mobile surveillance cameras. Less than one in twelve of these agencies reported operating mobile surveillance cameras.

These sectors operated a combined 45 mobile surveillance cameras, which was only 3.1 % of all mobile cameras reported by Queensland government agencies. Six agencies, including two Hospital and Health Services, operated a mix of body-worn cameras, temporary cameras, vehicle mounted cameras and mobile cameras in other areas. Almost two thirds of these mobile cameras were operated as temporary cameras, such as short-term fixed cameras or cameras operated from parked vehicles (29 cameras).

Four of the six agencies with mobile camera systems reported having separate or specific policies and procedures for mobile camera operations.

These agencies reported public and/or staff safety was the most common reason for having mobile camera surveillance systems with other agencies reporting multiple other additional reasons.

Only one of these agencies reported making information on the agency's use of mobile cameras publicly available.