



Australian Government

Office of the Australian Information Commissioner

Privacy Case Management – Quarterly case management review



6 June 2025

Contents

Change history	1
Overview	2
Quality Framework	2
Review process	3
Attachment A	4
Review checklist – Privacy complaints in Intake and Eligibility and Privacy Case Management - PCM	4

Change history

Version	Changes	Approver role	Date approved
1.0	Original	Executive General Manager, Information Rights Division, Ashleigh McDonald	11 August 2025

Overview

This process documents the quarterly review process to be undertaken in Privacy Case Management (PCM) branch and Intake and Eligibility branch in relation to privacy complaints.

The purpose of the review is to undertake quality assurance of closed privacy complaints to ensure that staff in the Privacy Case Management exercising the OAIC's functions in relation to privacy complaints are complying with the legislative requirements in Part V of the *Privacy Act 1988* (Cth) as well as policies and procedures to support effective and lawful decision making. The review will not examine the merits of the decision under review; but rather will be centred on determining whether procedural steps have been completed in accordance with the statutory framework and internal operational guidance.

Quality means for us that we are:

- fair and impartial in the way we deal with individual privacy complaints, adhering to the procedural requirements of administrative law including observing procedural fairness and ensuring our decisions are supported by appropriate evidence,
- exercising regulatory powers appropriately and proportionately,
- consistent in our responses and decisions and ensuring accuracy,
- efficient and undertaking our work in a timely way,
- responsive and courteous in our communication.

Quality Framework

The following measures support consistent and quality complaint handling:

- in relation open complaints and investigations, quality checks which are processes that improve the quality of decision making in real time for example:
 - clearance process, file reviews, delegated officer approval
 - strategic assessments of all complaints in Early Resolution
 - case management meetings including the fortnightly Complaint Continuum Committee
 - monitoring of high risk or legacy cases.
- In relation to closed complaints, quality assurance which are processes that help us improve quality for future complaints and investigations after a decision has been made.
 - this quality assurance review process: Privacy Case Management – Quarterly case management review
 - independent case reviews
 - escalated complaint reviews.

Review process

EL staff in each of the Early Resolution and Investigations & Conciliations teams in the PCM branch as well as Intake and Eligibility will undertake the review of privacy complaints closed in the previous quarter on a quarterly basis.

The EL staff member will not review matters closed within their own team.

Completed review checklists are to be saved into the following container / sub container in Content Manager: [24/000233-013](#)

The Complaints Continuum Committee will review completed review checklists and make recommendations for actions for implementation.

Each quarter 10% of complaints closed in Intake and Eligibility, Privacy Early Resolution and Privacy Investigations and Conciliations (individual privacy complaints) will undergo review.

Each individual privacy complaint closed in the quarter undergoing review will be provided with a unique number from 1 to the total number of complaints closed. A computer based random number generator or book of random numbers will be used to generate the cohort of closed complaints to be reviewed which will then be assigned to an EL staff not in the team that close the complaint.

A decision is not to be rejected as part of the sample simply because documentation is incomplete. These decisions are to be reviewed even though they may fail.

We note a limitation in the methodology, that is, that the EL reviewer reviews individual privacy complaints within the parameters of the relevant Resolve file. This means, for example, that if a document such as correspondence is not filed on Resolve, such an omission may not be evident to the reviewer. However, we note that this review process is one of multiple quality check and quality assurance processes (as described above) undertaken by ELs.

Determinations made under s 52 of the Privacy Act will be monitored according to the following methodology:

- percentage / number of determinations that are appealed and then the outcome
- set aside
- varied
 - favourable
 - unfavourable
- affirmed.

This process will be reviewed annually.

Attachment A

Review checklist – Privacy complaints in Intake and Eligibility and Privacy Case Management – PCM

Please save a copy of this completed checklist to the following Content Manager location: [24/000233-013](#)

Include the Resolve individual privacy complaint number in the filename for example CP25/12345 Case Review

Function	Privacy complaints
OAIC ref no	[insert reference]
Completed by	[insert name]
Team	[insert for person completing form]
Date	[insert date]

Threshold Checks	Evidence on file (Y/N)	Some evidence on file (Y/N)	No Evidence on file (Y/N)	Comments / recommendations (optional)
Complete for all complaints				
<input type="checkbox"/> Complaint is valid (jurisdiction, complainant has standing, respondent is APP entity).				
<input type="checkbox"/> Where there is a representative for a complainant, appropriate authority is recorded and assessed as valid.				

<input type="checkbox"/>	'Main' tab is completed with key information including, complainant and respondent with contact information and respondent sector is identified correctly				
<input type="checkbox"/>	'Issues' tab accurately reflects complaint issues.				
<input type="checkbox"/>	'Xrefs' tab has been appropriately completed where the matter is related to other complaints, legal files or FOI requests (if relevant).				

File Management	Evidence on file (Y/N)	Some evidence on file (Y/N)	No Evidence on file (Y/N)	Comments / recommendations (optional)
Complete for complaints closed in Intake and Eligibility, Early Resolution and Investigations and Conciliations (noting that all teams undertake surge / early stage decline work)				
<input type="checkbox"/>	Documents appropriately numbered and dated.			
<input type="checkbox"/>	There are records of engagement with the complainant and respondent where required for example actions, file notes completed in Resolve and correspondence saved to the 'Documents' tab on Resolve.			
<input type="checkbox"/>	There is a documented assessment of the complaint, which identifies any relevant decline reason.			

File Management	Evidence on file (Y/N)	Some evidence on file (Y/N)	No Evidence on file (Y/N)	Comments / recommendations (optional)
<input type="checkbox"/> s 36 decline has been sent to the complainant.				
<input type="checkbox"/> s 41 intention to decline (ITD) has been sent and affording procedural fairness on the proposed decision and inviting submissions from the complainant.				
<input type="checkbox"/> Correspondence is labelled and key documents identified on the 'Documents' tab on Resolve.				
<input type="checkbox"/> The decision was sent to the parties and a copy of the correspondence is saved to the 'Documents' tab on Resolve.				
<input type="checkbox"/> S 40A(3) conciliation notice sent to parties and saved to the file				
Complete for complaints closed in investigation				
<input type="checkbox"/> Investigation plan has been completed and saved to the file				
<input type="checkbox"/> S 43(1) intention to investigate notice sent to parties and saved to the file				
<input type="checkbox"/> S 40 commencement of investigation notice sent to parties and saved to the file				

File Management	Evidence on file (Y/N)	Some evidence on file (Y/N)	No Evidence on file (Y/N)	Comments / recommendations (optional)
<input type="checkbox"/> Where the respondent is an agency s 43(7) has been issued and saved to the file, where a hearing or s 44 notice applies				
<input type="checkbox"/> S 44 RTB memo is approved by the General Manager and saved to the 'Documents' tab on Resolve.				
<input type="checkbox"/> S 44 notice and cover letter issued to the respondent and saved to the 'Documents' tab on Resolve.				
<input type="checkbox"/> Copies of all primary evidence saved to the 'Documents' tab on Resolve and labelled				
<input type="checkbox"/> Evidence matrix has been completed and saved to the 'Documents' tab on Resolve.				
<input type="checkbox"/> Investigation report has been completed saved to the 'Documents' tab on Resolve.				
<input type="checkbox"/> If the matter is referred to Determination, complaints continuum paper documenting the recommendations is saved to the 'Documents' tab on Resolve.				

File Management	Evidence on file (Y/N)	Some evidence on file (Y/N)	No Evidence on file (Y/N)	Comments / recommendations (optional)
<input type="checkbox"/> S 43A hearing request has been assessed and a decision has been provided (to all interested parties) and saved to the 'Documents' tab on Resolve.				
<input type="checkbox"/> Complaint outcome in Resolve is correctly recorded.				
<input type="checkbox"/> Post close correspondence has been responded to, or if not, a file note is included on the file explaining it has been considered, and no response is required in the circumstances.				

Best Practice	Good Practice	Substandard
Documents appropriately numbered and dated. No drafts or personal notes / incomplete notes left in the file. No unnecessary duplication or irrelevant / unrelated documents on file	All relevant documents are on file or clearly linked directly from the file. No drafts or personal notes / incomplete notes left in the file	Limited documentation on file or referred to. Drafts or personal notes left on file and / or file contains information relating to other (unconnected) matters

OVERALL RATING

Annexure A

Template – Strategic Assessment Tool

Summary of complaint

Reference	
Date received	
Complainant	
Respondent	
Sector	
APP/s	
EDR attempted	
Summary of the facts / matters alleged by the complainant	
Jurisdiction confirmed	
Authority to act current	

Strategic assessment – s 41	Considered
s 41(1)(a) - the act or practice is not an interference with the privacy of an individual	
s 41(1)(c) - the complaint was made more than 12 months after the complainant became aware of the act or practice	
s 41(1)(d) - the complaint is frivolous, vexatious, misconceived, lacking in substance or not made in good faith	
s 41(1)(da) - an investigation, or further investigation, of the act or practice is not warranted having regard to all the circumstances	
s 41(1)(db) - the complainant has not responded, within the period specified by the Commissioner, to a request for information in relation to the complaint	
s 41(1)(dc) - the act or practice is being dealt with, or has been dealt with, by a recognised external dispute resolution scheme	
s 41(1)(dd) - the act or practice would be more effectively or appropriately dealt with by a recognised external dispute resolution scheme	
s 41(1)(e) - the act or practice is the subject of an application under another Commonwealth law, or a	

State or Territory law, and the subject-matter of the complaint has been, or is being, dealt with adequately under that law	
s 41(1)(f) - another Commonwealth law, or a State or Territory law, provides a more appropriate remedy for the act or practice that is the subject of the complaint	
S 41(2)(a) – the respondent has dealt with, or is dealing, adequately with the complaint	
S 41(2)(b) – the respondent has not yet had an adequate opportunity to deal with the complaint	

NB - If the matter relates to an act regulated by other legislation (ie TFN Rule, doxxing) the pathway should be to decline under s 41(1)(f).

After considering all s 41 grounds, move to consider the secondary factors as set out in full in Annexure C:

Strategic assessment – secondary factors	Considered
The substance and seriousness of the complaint	
The merit of the complaint	
Persistence or quantity of complaints	
Alignment of the issue with regulatory priorities	
Proportionality of investigating, taking into account resourcing	
Actual harm suffered by the complainant	
Likelihood that an investigation will resolve the complainant’s primary grievance	
Likelihood that the outcome of any investigation will be more beneficial to the complainant than what has already been offered	
Whether the matter would be better dealt with by other means	
Media or other public interest in the actions being complained about	

Having considered all s 41 grounds and the secondary factors, I recommend the following action:

- Pathway 1: intend to decline.
- Pathway 2: Matters should be taken forward to investigation. For matters recommended for Pathway 2, the case officer may form the view that the complainant may be conciliated successfully (s40A(1)). It is also open to the case officer to recommend that early resolution be attempted prior to an investigation commencing.
- Pathway 3: Preliminary inquiries should be undertaken to advance a matter to either Pathway 1 or Pathway 2.

RECOMMENDATION DRAFTING NOTES

Decision maker