

Privacy, Confidentiality Policy and Pledge

Signing Authority: President and Chief Executive Officer

Approval Date: 28-06-2018 Effective Date: 28-06-2018

SCOPE:

This Privacy/Confidentiality policy and procedure applies to “Authorized Users” granted access to any Royal Victoria Regional Health Centre (“RVH”) records system, and more generally, to information in any form (verbal, written or electronic) maintained by or for RVH. Regardless of their relationship with RVH, authorized users may include employees, professional staff members (i.e. medical, dental, midwifery and extended class nurses), students, volunteers including Board of Directors and other committee members, affiliates, contractors and their staff. The requirements apply whether working on RVH property or working on behalf of or representing RVH elsewhere.

POLICY STATEMENT:

RVH is committed to safeguarding privacy and the confidentiality of information under its control. Information will be protected in accordance with the *Personal Health Information Protection Act, 2004 (PHIPA)*, the *Freedom of Information and Protection of Privacy Act (FIPPA)*, and other legislation as applicable from time to time.

All authorized users are required to read and acknowledge their agreement to comply with the terms and conditions of the attached *Privacy/Confidentiality Pledge* (“Pledge”) by signing the Pledge upon beginning their relationship with RVH, and re-sign annually thereafter.

RVH may amend the Pledge in response to changes in the law or findings of the Information and Privacy Commissioner or Ontario (“IPC”) or the courts. Authorized users will be notified of any changes to the Pledge.

Authorized users will be given access to Personal Information, Personal Health Information and Confidential Information (as defined below and collectively referred to hereinafter as “Confidential Information”). Access to Confidential Information is a privilege that is granted on a need-to-know basis as defined or required by the authorized users’ relationships with RVH.

Authorized users may see, hear or have access to sensitive information about RVH personnel, patients, and/or the operations of RVH. All such information is Confidential Information of RVH and must be held in strict confidence, which means that it may not be discussed or otherwise disclosed or provided to anyone other than those authorized to receive the information for the purpose of performing their work for RVH, unless authorized by the CEO or designate.

DEFINITIONS:

Business Information: Information collected or created for RVH administration and operations, including but not limited to:

- Financial information - such as information about salaries, fees, costs and expenses (e.g., of personnel, consultants, suppliers, debtors) that is not made public by RVH;
- Human resources information – information collected or created for the purpose of creating, maintaining and/or terminating an employment or other relationship with RVH (e.g., performance-related information, compensation, benefits, WSIB, or occupational health and safety information);

Privacy/Confidentiality Policy and Pledge

- Human rights information – information associated with an informal or formal human rights complaint, including an abuse or harassment complaint;
- Legal information – information prepared by RVH or its lawyers in connection with a transaction, proceeding, or opinion (e.g., purchase orders, agreements, disputes, complaints, questions about the application of the law);
- Administrative information - information used for administrative purposes (e.g., schedules, patient census, employee lists, patient lists, donor lists, etc.);
- Business planning information - information relating to ongoing, future or proposed initiatives or strategies (e.g., organizational restructuring, mergers, outsourcing of services).

Confidential Information: All information that is not made public by RVH, and which by its nature merits protection, including collectively, Business Information, Personal Information and Personal Health Information under the control of RVH.

Confidentiality: The obligation of an individual, organization or custodian to protect the Personal Health Information (PHI)/Personal Information (PI), business information entrusted to it and not to misuse or wrongfully disclose it.

Personal Health Information: Information defined in PHIPA as identifying information collected about an individual in oral or recorded form. It is information about an individual's health or health care history in relation to:

- The individual's physical or mental condition/status, including family medical history;
- The provision of health care to the individual;
- Long-term health care services;
- The individual's health card number;
- Blood or body-part donations;
- Payment or eligibility for health care;
- The identity of a health care provider or a substitute decision maker for the individual.

Personal Information: Information defined in FIPPA as recorded information about an identifiable individual, including:

- Information relating to the race, national or ethnic origin, colour, religion, age, sex, sexual orientation, or marital or family status of the individual,
- Information relating to the education or the medical, psychiatric, psychological, criminal, or employment history of the individual or information relating to financial transactions in which the individual has been involved,
- Any identifying number, symbol or other particular assigned to the individual,
- The address, telephone number, fingerprints, or blood type of the individual,
- The personal opinions or views of the individual except where they relate to another individual,
- Correspondence sent to an institution by the individual that is implicitly or explicitly of a private or confidential nature, and replies to that correspondence that would reveal the contents of the original correspondence,
- The views or opinions of another individual about the individual, and
- The individual's name where it appears with other personal information relating to the individual or where the disclosure of the name would reveal other personal information about the individual.

Privacy/Confidentiality Policy and Pledge

Privacy: The right of individuals to decide how and for what purposes their Personal Information/Personal Health Information will be collected, used and disclosed.

PROCEDURE:

Authorized users must read and sign the Privacy/Confidentiality Policy and Pledge before being granted access to Confidential Information and annually thereafter.

Users with access to the Learning Management System (LMS) will review and sign the Privacy/Confidentiality Policy and Pledge via the LMS on or before the day of their annual Performance Evaluation. Those without access to the LMS (students, vendors, contractors etc.) will review and sign a hard copy of the Privacy/Confidentiality Policy and Pledge which will then be filed with the appropriate RVH department/liaison (i.e. Interprofessional Practice, Procurement etc.).

Authorized users will report any breach or suspected breach of this or any other RVH privacy or security-related policy, at the first reasonable opportunity, to their immediate supervisor or contact, who will then notify the RVH Privacy Office who will initiate a confidential investigation (see Whistle Blowing Protection Policy).

RVH audits user access to Confidential Information and investigates reports of violations of its privacy and security-related policies and Pledges. Such violations may result in disciplinary action, up to and including termination of employment, privileges, affiliation and/or contract, a report to the applicable professional College, licensing body, educational institution regardless of the status of their practicum, the IPC and/or the police, prosecution and/or civil action (lawsuit), as well as the disclosure of the identity of those responsible to affected individual(s) including patient(s) and/or their representatives.

Any questions about compliance with RVH privacy and confidentiality related policies and procedures, the Pledge or applicable law should be directed to the RVH Chief Privacy Officer.

CROSS REFERENCES

RVH Discipline for a Patient Health Information Privacy Breach, 2018

RVH Whistle Blowing Protection Policy, 2018

REFERENCES:

Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sched. A. s.2-4. (2004). Retrieved from <https://www.ontario.ca/laws/statute/04p03?search=personal+health#top>

Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sched. A. s.10-12. (2004). Retrieved from <https://www.ontario.ca/laws/statute/04p03?search=personal+health#top>

Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sched. A. s.17. (2004). Retrieved from <https://www.ontario.ca/laws/statute/04p03?search=personal+health#top>

Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sched. A. s.17.1. (2004). Retrieved from <https://www.ontario.ca/laws/statute/04p03?search=personal+health#top>

Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sched. A. s.37. (2004). Retrieved from <https://www.ontario.ca/laws/statute/04p03?search=personal+health#top>

Privacy/Confidentiality Policy and Pledge

Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sched. A. s.38-50. (2004). Retrieved from <https://www.ontario.ca/laws/statute/04p03?search=personal+health#top>

Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sched. A. s.65. (2004). Retrieved from <https://www.ontario.ca/laws/statute/04p03?search=personal+health#top>

Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. F.31. s. 2. (2012). Retrieved from <https://www.ontario.ca/laws/statute/90f31?search=freedom+of+information>

Freedom of Information and Privacy Protection Act

Confidentiality. Horizon Health Network, 2011.

Confidentiality Agreement. St. Joseph's Health Centre, 2004.

"Detecting and Deterring Unauthorized Access to Personal Health Information". Information and Privacy Commissioner of Ontario, 2015.

ROYAL VICTORIA REGIONAL HEALTH CENTRE PRIVACY/CONFIDENTIALITY PLEDGE (“Pledge”)

GUIDING PRINCIPLES:

Royal Victoria Regional Health Centre (RVH) is committed to protecting Personal Information, Personal Health Information and other Confidential information (collectively referred to as “Confidential Information”), as those terms are defined in the RVH Privacy/Confidentiality Policy and Pledge, including information about:

- patients and their families;
- employees and students;
- physicians and allied professional staff;
- volunteers;
- vendors and other service providers;
- RVH operations and administration.

Access to Confidential Information is permitted on a need to know basis for the operations of RVH and provision of its services, including to deliver and assist in the delivery of health care. It is prohibited to collect, use, modify, disclose, transfer or destroy Confidential Information except as authorized by RVH.

CONDITIONS OF PRIVACY PLEDGE

I will not collect, create, use, modify, copy, disclose, transfer or destroy Confidential Information except to the extent required for the purpose of and in the course of my duties/services to RVH and in accordance with any directions I receive from RVH.

I will not collect, create, use, modify, copy, disclose or destroy Confidential Information for my personal use or the use of someone else or an organization other than RVH, whether out of curiosity or concern and regardless of whether for financial gain.

I will not attempt to access any information about myself, my family members, friends, colleagues, or any other person whose information is not required to perform my duties to RVH. When authorized, I will access this information through appropriate channels including completion of a Release of Information form.

I will comply with all RVH privacy and security-related policies and procedures made available to me.

I will inform my immediate supervisor/contact at RVH of any situation that may affect my ability to do my work for RVH objectively, that could be perceived to put me in a conflict of interest (between my duties for RVH and personal or non-RVH business interests), or may affect my ability to fulfill this Pledge.

I will not attempt to gain access to any system, facility, or Confidential Information that I am not authorized to access or that is not required for the performance of my job functions at/services to RVH.

I will not download or otherwise copy, or remove from RVH Confidential Information except in a manner and to the extent that I am authorized to do so and without limiting the generality of this obligation, I will not use any portable devices to transport or store Confidential Information unless encrypted.

I understand that keys, badges, electronic devices, and records provided or to which I am given access by RVH are the property of RVH and I will return them immediately on the termination of my relationship with RVH or earlier at RVH's request.

My user IDs and passwords (herein referred to as “Credentials”) used to access RVH electronic record systems are the equivalent of my written signature and as such I will:

- be held responsible for all activity done under my Credentials
- not share my Credentials with anyone under any circumstances
- will log out of systems as required to prevent anyone else from using the systems under my Credentials
- immediately advise the Informatics and Technology department if I think that my Credentials have been compromised, so that they can deactivate them and issue me new Credentials

I am responsible for data, including its accuracy, which I enter in any RVH record and/or report.

I understand that RVH will conduct random audits on access to, use, modification, disclosure and destruction of Confidential Information to monitor compliance with this Pledge, RVH policies and procedures, and applicable law.

I will report to my immediate supervisor/RVH contact, at the first reasonable opportunity, if I believe there may have been a breach of a Pledge, an RVH privacy or security-related policy or procedure, or privacy law.

I understand that breach of this Pledge may be grounds for disciplinary action, up to and including termination of employment, privileges, affiliation and/or contract with RVH, mandatory report to my professional College, licensing body, educational institution (as applicable), the Information and Privacy Commissioner of Ontario (IPC) and/or the police, prosecution and/or civil action, as well as the disclosure of my identity to affected individual(s), including patient(s) and their representatives.

I understand that under the *Personal Health Information and Protection Act 2004*, an individual can face fines up to \$100,000 and a corporation can face fines up to \$500,000 in the event of a breach.

I understand that it is my responsibility to request clarification and/or direction, at any time, if I do not fully understand the terms and conditions of this Pledge, any privacy or security-related policies or procedures, or whether I am authorized to collect, create, use, disclose, transfer or destroy Confidential Information.

I understand that I will be asked to renew my Pledge to RVH annually and I understand and agree that my obligations under this Pledge continue after my relationship with RVH has terminated.

I, (print name and position), _____, have read, been given the opportunity to ask for clarification of, understand and agree to the terms and conditions of this Privacy/Confidentiality Pledge.

Signature: _____

Date: _____