

Subject: Privacy Policy	Staff
Policy Number: 4..08	Pages: 16
Implementation: February 2010	Review: January 2014, December 2014, 2018, December 2022 Next Review: December 2026
Cross Reference: PHIPA, Privacy Statement; Privacy Breach; Privacy Impact Assessment; Release of Information and Access to Records; Confidentiality of Client Records and Safeguards for Client Information; Lockbox; Duty to Warn; Posted Privacy Policy Statement	Approved By: Executive Director

POLICY:

Vaughan Community Health Centre (VCHC) works with its diverse communities to promote health and well-being, facilitates access to services for the most vulnerable and collaborates with partners to address community priorities. As part of our mission, we are committed to promoting client¹ privacy and protecting the confidentiality of the health information we hold.

VCHC is a health information custodian under the *Personal Health Information Protection Act, 2004* (PHIPA). We are accountable for compliance with PHIPA and the protection of health records.

All VCHC staff and those who act on our behalf must abide by PHIPA, this policy and other VCHC privacy-related policies and any applicable rules of professional conduct and standards of their college.

¹We have used the term “client” throughout the policy. It is possible that we hold personal health information about individuals who are not officially VCHC clients or who are former clients, and this policy would apply equally to those individuals.

Principle 1 – Accountability for Personal Health Information

VCHC is responsible for any personal health information we hold. We have designated our Executive Director as our Privacy Officer. This position is accountable for our compliance with this Privacy Policy and compliance with PHIPA.

VCHC demonstrates our commitment to privacy by implementing privacy policies and procedures to protect the personal health information we hold and by educating our staff and any others who collect, use or disclose personal health information on our behalf about their privacy responsibilities.

Principle 2 – Identifying Purposes for Collecting Personal Health Information

VCHC collects personal health information for purposes related to direct client care, administration and management of our programs and services, client billing, administration and management of the health care system, research, teaching, accreditation review, statistical reporting, fundraising, meeting legal obligations and as otherwise permitted or required by law. Our Privacy Statement sets out how we collect, use and disclose personal health information.

When personal health information that has been collected by VCHC is to be used for a purpose not previously identified, the new purpose will be identified prior to use. Unless the new purpose is permitted or required by law, consent will be required before the information can be used for that purpose.

Principle 3 – Consent for the Collection, Use and Disclosure of Personal Health Information

In general, VCHC requires consent² in order to collect, use, or disclose personal health information. However, there are some cases where VCHC may collect, use or disclose personal health information without consent as permitted or required by law.

Clients are informed of the reasons for the collection, use and disclosure of their personal health information and their express consent will be obtained if required. (See Informed Consent Policy)

Personal information will not be used or disclosed - either by staff or by external agents with whom VCHC has contracts - for purposes other than those for which it was collected

²Consent may be from a client or from his/her substitute decision-maker as appropriate.

except with the client's consent or as required by law. Personal information will be retained only as long as necessary for the fulfillment of those purposes, and will be stored and disposed of in a secure manner. (See Confidentiality - Client Records Policy)

Implied consent (Disclosures to other health care providers for health care purposes) – Circle of Care

Client information may be released to a client's other health care providers for health care purposes (within the "circle of care") relying on implied consent and without requiring the express written or verbal consent of the client as long as it is reasonable in the circumstances to believe that the client wants the information shared with the other health care providers. No client information will be released to other health care providers if a client has stated they do not want the information shared (for instance, by way of the placement of a "lockbox" or "consent directive" on their health records).

A client's request for treatment constitutes implied consent to use and disclose their personal health information for health care purposes, unless the client expressly instructs otherwise.

Who can be in the "circle of care" includes (among others providing direct client care if authorized by PHIPA):

Within VCHC:

- Interprofessional health providers (Physician, Nurse Practitioner, Registered Nurse, Registered Practical Nurse, Mental Health and Addiction Staff, Dietician, Psychologist, Social Worker, Kinesiologist, Physiotherapist, Chiropodist, Respiratory Therapist, and other clinical staff)
- Medical students and residents or nursing or other allied health care students

Outside of VCHC: (among others)

- Regulated health professionals or social workers in solo practice or group
- Hospitals
- Community Health Centres
- Long-term care homes
- Ambulance
- Pharmacists
- Laboratories

- A centre, program or service for community health or mental health whose primary purpose is the provision of health care

For clarity – the following groups are NOT in the circle of care and we do not share personal health information about our clients with them relying on implied consent. That does not mean we never disclose to these individuals and groups - but we only do so if we have express consent or if we are otherwise permitted or required by law to disclose:

- Teachers and schools (however, psychologists, social workers, nurses, psychiatrists, speech-language pathologists, occupational therapists, physiotherapists, or audiologists affiliated with schools may be in the circle of care if they are providing health care)
- Children's Aid Society
- Police
- Landlords
- Employers
- External unregulated care providers
- Spiritual leaders/healers
- Insurance companies

Express consent

Clients may also provide a verbal or written consent if they wish for VCHC to release their information to their external health care providers. See our policy: "*Release of Information and Access to Health Records*".

Should a client wish their lawyer, insurance company, family, employer, landlord or other third party individuals or agencies (non-health care providers) to have access to their health record, the client must provide verbal or written consent to this effect, which will be communicated in accordance with our policy: "*Release of Information and Access to Health Records*".

No Consent

There are certain activities for which consent is not required to collect, use or disclose personal health information. These activities are permitted or required by law. For example, we do not need consent from clients to (this is not an exhaustive list):

- Plan, administer and manage our internal operations, programs and services
- Do financial reporting and process for compensation
- Engage in quality improvement, error management, and risk management activities
- Participate in the analysis, administration and management of the health care system
- Engage in some research projects (subject to certain rules, such as obtaining research ethics board approval and having research contracts) – Please note: much of our research activities require express consent of our clients
- Teach, train and educate our Team Members and others
- Compile statistics for internal or mandatory external reporting
- Respond to legal proceedings
- Comply with mandatory reporting obligations

If Team Members have questions about using and disclosing personal health information without consent, they can ask the Privacy Officer.

Withholding or Withdrawal of Consent

If consent is sought by VCHC, a client may choose not to give consent (“withholding consent”). If consent is given, a client may withdraw consent at any time, but the withdrawal cannot be retrospective. The withdrawal may also be subject to legal or contractual restrictions and reasonable notice.

Lockbox – Consent Directive

PHIPA gives clients the opportunity to restrict access to any personal health information or their entire health record by their health care providers within VCHC or by external health care providers. Although the term “lockbox” is not found in the privacy legislation, lockbox is commonly used to refer to a client's ability to withdraw or withhold consent for the use or disclosure of their personal health information for health care purposes. See the “*Lockbox Policy*” for details of how the lockbox works.

Principle 4 – Limiting Collection of Personal Health Information

VCHC limits the amount and type of personal health information we collect to that which is necessary to fulfill the purposes identified. Information is collected directly from the client, unless the law permits or requires collection from third parties. For example, from time to time we may need to collect information from clients' family members or other health care providers to get timely or accurate information.

All clients registered at VCHC are asked to provide identifying information and the demographic information required by the CHC Evaluation Framework. A health record is created on an Electronic Medical Record system for each client receiving individual care.

Staff should not initiate their own projects to collect new personal health information from any source without being authorized by VCHC.

Principle 5 – Limiting Use, Disclosure and Retention of Personal Health Information

VCHC works within a team model where a variety of skilled staff are part of providing high quality services to clients and the community. Clients are informed that this means information may be shared among staff involved in their care in order to provide the best service possible. At intake, clients sign a Service Agreement, indicating they understand this model of care.

The VCHC participates in accreditation reviews every 4 years. The accreditation review process involves a mandatory client journey component. This component requires an accreditation reviewer to access clients' personal health information to learn about clients' experience in navigating services at the VCHC. To this end, some clients are invited to participate in the client journey process. Those interested clients are asked to sign a consent form to share their personal health information with the accreditation reviewer.

Use

Personal health information is not used by VCHC for purposes other than those for which it was collected, except with the consent of the client or as permitted or required by law.

Personal health information may only be used within the limits of each VCHC staff member's role. Staff members may not read, look at, receive or otherwise use personal health information unless they have a legitimate "need to know" as part of their position. If a staff member is in doubt whether an activity to use personal health information is part of their position – they should ask the Privacy Officer. For example, looking at health records out of personal curiosity or a self-initiated education project without being assigned to those clients and without specific authorization for an approved educational exercise is not permitted.

Disclosure

Personal health information is not disclosed for purposes other than those for which it was collected, except with the consent of the client or as permitted or required by law.

Personal health information may only be disclosed within the limits of each staff member's role. Staff members may not share, talk about, send to or otherwise disclose personal health information to anyone else unless that activity is an authorized part of their position. If a staff member is in doubt whether an activity to disclose personal health information is part of their position – they should ask the Privacy Officer.

Retention

Health records are retained as required by law and professional regulations and to fulfill our own purposes for collecting personal health information.

We retain health records for at least 10 years from the date of last entry or, in the case of minors, 10 years from the time the client would have reached the age of majority (age 18). In some cases, we keep records for longer than this minimum period.

Personal health information that is no longer required to fulfill the identified purposes is destroyed, erased, or made anonymous safely and securely. Please see our policy: "*Confidentiality of Client Records and Safeguards*".

Principle 6 – Accuracy of Personal Health Information VCHC will take reasonable steps to ensure that information we hold is as accurate, complete, and up to date as is

necessary to minimize the possibility that inappropriate information may be used to make a decision about a client.

Principle 7 – Safeguards for Personal Health Information

VCHC has put in place safeguards for the personal health information we hold, which include:

- Physical safeguards (such as confidential shredding bins, locked filing cabinets and rooms, clean desks);
- Organizational safeguards (such as permitting access to personal health information by staff on a "need-to-know" basis only); and
- Technological safeguards (such as the use of passwords, encryption, audits, back-up, secure disposal).

VCHC requires anyone who collects, uses or discloses personal health information on our behalf to be aware of the importance of maintaining the confidentiality of personal health information. This is done through the signing of confidentiality agreements, privacy training, and contractual means.

VCHC takes steps to ensure that the personal health information we hold is protected against theft, loss and unauthorized use or disclosure. The details of these safeguards are set out in the policy: *"Confidentiality of Client Records and Safeguards for Client Information."*

Care is used in the disposal or destruction of personal health information to prevent unauthorized parties from gaining access to the information. We take care if we transfer files to a medical storage company.

No client care information is shared with family members, employers or any other third part/external agencies or practitioners unless an authorized release of information has been obtained. (A client who has agreed to be seen by a specialist will have implied consent to have their relevant medical information transferred to the specialist.) Upon receipt of an authorized release of information, staff must ensure that the client (or guardian) has signed and dated the request, and that the signature has been witnessed. *Only the specific information requested is forwarded.*

Principle 8 – Openness about Personal Health Information

Information about VCHC’s policies and practices relating to the management of personal health information is available to the public, including:

- Contact information for our Privacy Officer, to whom complaints or inquiries can be made;
- The process for obtaining access to personal health information we hold, and making requests for its correction;
- A description of the type of personal health information we hold, including a general account of our uses and disclosures; and
- A description of how a client may make a privacy complaint to VCHC or to the Information and Privacy Commissioner of Ontario.

Principle 9 – Client Access to Personal Health Information

Clients have the right to

- Access a copy of their information for their review by written request
- Request a correction of information by written request
- Have assistance in interpreting their record
- Obtain a copy of their record by written request.

Assistance in understanding the record will be the responsibility of the primary provider. Should the provider believe that releasing the information could be harmful to the client, the team will be consulted prior to the release. Staff will respond to a request to access a copy of a record for review within 30 days.

For further details, clients may make written requests to have access to their records of personal health information, in accordance with VCHC’s policy for “*Release of Information and Access to Health Records.*”

VCHC will respond to a client's request for access within reasonable timelines and costs to the client, as governed by law. VCHC will take reasonable steps to ensure that the requested information is made available in a format that is understandable and may assist clients to interpret their information.

Clients have a right to ask for their records to be corrected if they can demonstrate that the records we hold are inaccurate or incomplete in some way for the purposes for which

we hold that information. In some cases, instead of making a correction, we may offer a client an opportunity to append a statement of disagreement to their file.

Please Note: In certain situations, VCHC may not be able to provide access to all the personal health information we hold about a client. Exceptions to the right of access requirement will be in accordance with law. Examples may include information that could reasonably be expected to result in a risk of serious harm, or the information is subject to legal privilege.

Principle 10 – Challenging Compliance with VCHC Privacy Policies and Practices

VCHC will receive and respond to complaints or inquiries about our policies and practices relating to the handling of personal health information. We will inform clients who make inquiries or lodge complaints of other available complaint procedures.

VCHC will investigate all complaints. If a complaint is found to be justified, VCHC will take appropriate measures to respond.

The Information and Privacy Commissioner of Ontario oversees our compliance with privacy rules and PHIPA. Any individual can make an inquiry or complaint directly to the Information and Privacy Commissioner of Ontario by writing to or calling:

2 Bloor Street East, Suite 1400
Toronto, Ontario M4W 1A8
Phone: 1 (800) 387-0073
Fax: 1-416-325-9195
www.ipc.on.ca

Appendix A –Supporting Privacy Policies

The following policies and documents are incorporated into the Privacy Policy and must be followed by

Vaughan Community Health Centre and all staff, students, volunteers, and vendors:

Posted Privacy Policy Statement
Release of Information and Access to Health Records
Lockbox Policy
Confidentiality of Client Records and Safeguards for Client Information
Privacy Breach Protocol

APPENDIX

Request for Correction of Client Records

Instructions:

Complete the following form to request correction of your records.

Only you (or if you are incapable, your substitute decision-maker) can make a request for access to or correction of your chart. You will be required to provide proof of identity.

Please note: Only the healthcare organization that initially collected the client's Personal Health Information (PHI) can respond to the correction request. This is because only the care provider that originally collected the PHI can comment on the accuracy of the PHI and the appropriateness of the correction request.

If you have any questions about how to complete this form, please contact our Privacy Officer at privacy@vaughanchc.com

I _____ request to correct personal health information
(Print Full Name)

CLIENT PERSONAL INFORMATION:(please print clearly)

Last Name First Name

Previous surname (if applicable) Date of birth (DD/MM/YYYY)

Health Card Number

Mailing address

Daytime telephone number: Cell Phone:

REQUEST FOR CORRECTION

Please provide a detailed description of the personal health information you are seeking the VCHC to correct. Please be as specific as possible, including the date of the record, the reason for seeking the correction (e.g. the information is not accurate, complete or up-to-date), and the specific correction(s) you are seeking. If possible, please attach the relevant portion of the specific record.

I request that the following information be amended/corrected in my electronic medical record (please explain what the entry should say to be more accurate and complete):

Reason for request (please explain why the entry is incorrect or incomplete):

If your request is accepted and the appropriate amendment is made, a copy of the amended information will be sent to anyone who has previously received this information in the past year. I understand that:

- Vaughan CHC has 30 days to respond to my initial request for access. In some circumstances they may need an additional 30-day extension (I will be notified if needed).
- Vaughan CHC will consider my request, but it may be denied if the information was not created by Vaughan CHC (and they lack the expertise, knowledge or authority to make the change), is not part of my medical record, would not be available to me under applicable law, or is determined to be accurate and complete or it consisted of a professional opinion or observation made in good faith.

For more information about your rights to access your personal health information, please contact Vaughan CHC's Privacy Officer at privacy@vaughanchc.com [mailto:](#)

Client (Signature)

(Date)

FOR INTERNAL USE BY PRIVACY OFFICER ONLY



Request Received: _____
(dd/mm/yyyy)

Request Received by: _____
(Print Full Name) (Signature)

Amendment Accepted

Amendment/Correction completed. Date: _____

Amendment sent to individuals/entities who previously received this information

Date: _____

Amendment Denied

Reason for denial:

The information was not created by our CHC and our CHC lacks the expertise, knowledge or authority to make the correction

The information was not available to the patient under applicable law

The information was not part of the medical record

The information has been determined to be accurate and complete

Professional opinion or observation made in good faith

Other (please explain): _____

Requestor Notified of Request Result via:

Telephone

Letter

Date of Notification: _____

Additional Information:

Note that PHIPA sets these out as the reasons for not making a requested correction:

- (a) It consists of a record that was not originally created by the custodian and the custodian does not have the sufficient knowledge, expertise and authority to correct the record; or
- (b) It consists of a professional opinion or observation that a custodian has made in good faith about the individual