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Information Management & Technology	Personal Health Information Protection Policy

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Policy Owner	Corporate Administration, Office of the Regional Clerk, Access and Privacy Office, Deputy Regional Clerk	
Approval Body	Council	
Approval Date		
Effective Date	September 1, 2020	
Review by Date	August 2022	

1. Policy

Niagara Region shall comply with the Province of Ontario's access to information and privacy protection requirements as mandated by the *Personal Health Information Protection Act* (PHIPA, 2004).

Individual Access to his/her Own Personal Health Information

Niagara Region programs and services, which collect personal health information (PHI) shall develop, implement and annually review procedures for granting individuals' access to their own PHI, including a standard for what information may be provided through routine disclosure and what information may require the individual to submit a formal written request for records, or request for a correction of PHI.

Every individual who is given access to his/her PHI is entitled to request correction of the PHI, if the individual believes there is an error or omission.

- In the event Niagara Region is unable to make a correction due to the inability to verify accuracy, Niagara Region shall instead ensure the request is documented and appended to the information in question reflecting any correction that was requested but not made and the reasons therefore.
- Additionally, Niagara Region shall ensure that anyone to whom the PHI was disclosed, within the year before the correction was requested, be notified of the correction or the statement of disagreement.



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Privacy Protection of Personal Health Information

Health Information Custodians will:

- Comply with Niagara Region's corporate privacy program and procedural framework by developing health information practices, in accordance with PHIPA and with the Canadian Standard Association's (CSA) guiding principles of privacy;
 - i. Accountability
 - ii. Identifying Collection Purposes
 - iii. Consent
 - iv. Limiting Collection
 - v. Limiting Use, Disclosure & Retention
 - vi. Accuracy
 - vii. Safeguards
 - viii. Openness
 - ix. Individual Access
 - x. Challenging Compliance
- b. Maintain, or require the maintenance of, an electronic audit log in compliance with PHIPA and Ontario Regulations for any electronic means of collection, use, disclosure, modification, retention or disposal of PHI;
- c. Ensure all officials and employees share responsibility for the protection of personal information as further described in the roles and responsibilities identified in this policy;
- d. Apply this policy and related policies and practices to the collection, use and disclosure, and disposal of personal information.

2. Purpose

The purpose of this privacy policy is to establish mandatory requirements and responsibilities for the protection of personal health information (PHI) that is received or sent by Niagara Region's Health Information Custodians.

Niagara Region is committed to being a leader in privacy by fostering trust and confidence with its clients and the public through its transparency of process and by maintaining confidentiality and a high level of protection of PHI.



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3. Scope

This policy applies to all Niagara Region employees, elected officials, students and volunteers. Niagara Region employees responsible for managing, developing, and entering into contracts with any third party service providers or contractors that involve information that would be subject to this policy are responsible for ensuring that those contractual arrangements are in alignment with this policy. The policy applies to all services and corporate activities that may impact the privacy of PHI in Niagara Region's custody or control.

3.1. Roles and Responsibilities

3.1.1. Health Information Custodians

Niagara Region has two Health Information Custodians as defined by the *Personal Health Information Protection Act*, *2004*: The Medical Officer of Health, and the Commissioner of Community Services.

Appendix A provides a list of Niagara Region's Health Information Custodians. Appendix B provides a diagram of the Health Information Custodian administrative reporting structure.

Any designated Health Information Custodian at Niagara Region shall:

- i. Obtain the individual's implied or express consent when collecting, using and/or disclosing PHI, except in limited circumstances as specified under PHIPA;
- ii. Collect PHI appropriately (by lawful means and for the lawful purposes of providing health care as defined by PHIPA) and no more than is reasonably necessary;
- iii. Take reasonable precautions to safeguard PHI:
 - a) against theft or loss,
 - b) unauthorized use, disclosure, copying, modification and/or destruction;
- iv. Implement and annually review procedures regarding consent documentation;



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- v. Provide notification to an individual at the first reasonable opportunity if the information is stolen, lost or accessed by an unauthorized person;
- vi. Implement and annually review procedures for auditing for compliance with this policy and PHIPA requirements for protection of privacy;
- vii. Ensure health records are as accurate, up-to-date and complete as necessary for the purposes for which they were collected, used and/or disclosed;
- viii. Ensure health records are stored, transferred and disposed of in a secure manner;
- ix. Designate a contact person who is responsible for:
 - a) responding to access/correction requests;
 - b) responding to enquires about the health information custodian's information practices;
 - c) receiving complaints regarding any alleged breaches of PHIPA and notifying Niagara Region's Access and Privacy Office as soon as possible;
- x. Provide a written statement for each Health Information Custodian as defined in this policy that is readily available to the public, published on the Region's external website, and/or available in print from each program service area which describes:
 - a) the Health Information Custodian's information practices;
 - b) how to reach the contact person; and
 - c) how an individual may obtain access to, request a correction and/or make a complaint regarding his/her PHI;
- xi. Administer the review, response and administration of all formal requests for PHI and records in the custody or control of the Health Information Custodian, in coordination with Niagara Region's Access and Privacy Office; and
- xii. Ensure that all agents of the Health Information Custodian are appropriately informed of their duties under this policy and PHIPA.

3.1.2. Access and Privacy Office, Office of the Regional Clerk

- a) Develop and implement policies, programs and services for management and protection of PHI based on Privacy by Design principles;
- b) Establish privacy standards, guidelines and procedures to support this Policy and Framework;



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- c) Develop, coordinate and deliver privacy training as required by this policy and its associated procedures;
- d) Advise Niagara Region's Health Information Custodians, programs and services on the implementation of this policy, their roles and responsibilities, and interpretation of PHIPA;
- e) The Access and Privacy Office is responsible for reviewing all privacy incidents and investigating to determine whether or not a breach has occurred. The Access and Privacy Office will coordinate and manage all privacy breaches of PHI according to Niagara Region's Privacy Breach Protocol procedure.

3.1.3. Niagara Region Personnel

Each individual that collects, uses, discloses, or disposes of information received as part of their duties as a Regional employee including personal information, is accountable for the actions they take with the information including ensuring the information is used only for the purpose it was obtained and is not disclosed to either other employees or non-employees except as permitted in accordance with this policy and applicable legislation whatever form the information is stored or transmitted in. All employees will:

- a) Manage PHI that they collect, use, retain, disclose and dispose of for Regional business in accordance their college requirements (if applicable) and with this policy and its procedures to safeguard such information;
- b) Take privacy training as required by their role, position, or in consultation with the Access and Privacy Office, to ensure the appropriate handling of personal information and to understand their responsibilities to protect privacy in executing their operational duties;
- c) Ensure that PHI is only accessible and discussed by authorized users;
- d) Be aware of their individual privacy responsibilities as defined by departmental, divisional, or program specific procedures for the collection, use, retention, disclosure, or disposal of personal information.

Each individual should be aware that non-compliance with PHIPA requirements, risks and consequences may include any or all of the following:

- Loss of trust or confidence in Niagara Region
- Cost and time in dealing with Privacy Breaches
- Legal liabilities and proceedings



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- Investigation by privacy oversight bodies (IPC)
- Negative media coverage for Niagara Region, Regional departments services and programs

Definitions

Health Information Practices means in relation to one of Niagara Region's health information custodians, the policy of the custodian for actions in relation to "personal health information", including,

(a) when, how and the purposes for which the custodian routinely collects, uses, modifies, discloses, retains or disposes of personal health information, and

(b) the administrative, technical and physical safeguards and practices that the custodian maintains with respect to the information.

Personal Health Information means all recorded information that is about an identifiable individual or is defined or deemed to be "personal health information" pursuant to any laws or regulations related to privacy or data protection that are applicable to the Regional Municipality of Niagara (including, without limitation, any information that constitutes "personal health information" as such term is defined by PHIPA).

PHIPA means the *Personal Health Information Protection Act* (Ontario) and its regulations, as amended from time to time.

Privacy Breach means any inappropriate or unauthorized collection, use, retention, disclosure, or disposal of personal information, as a result of a contravention of this policy, MFIPPA or PHIPA.

Privacy by Design means the consideration of privacy during the design process that integrates the protection of "personal information" directly into the technology/system through creation, operation, and management of the system or technology itself.

Privacy Incident means and inappropriate or unauthorized action that involves data, information or records which include "personal information" that may lead to the discovery of a "privacy breach".



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4. References and Related Document

4.1. Legislation, By-Laws and/or Directives

Personal Health Information Protection Act, 2004 (PHIPA)

4.2. Procedures

C-XXX-000-001	Formal Request for Records of Personal Health Information Procedure
C-XXX-000-002	Delegation of Authority to Agents of the Health Information Custodian

5. Related Policies

C-XXX-000 Access to Information and Privacy Protection Policy

6. Appendices

Appendix A – List of Niagara Region's Health Information Custodians Appendix B – Health Information Custodian Reporting Structure



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7. Document Control

The electronic version of this document is recognized as the only valid version.

Approval History

Approver(s)	Approved Date	Effective Date

Revision History

Revision No.	Date	Summary of Change(s)	Changed by



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Appendix A – List of Niagara Region's Health Information Custodians

Niagara Region Operates with two distinct Health Information Custodians.

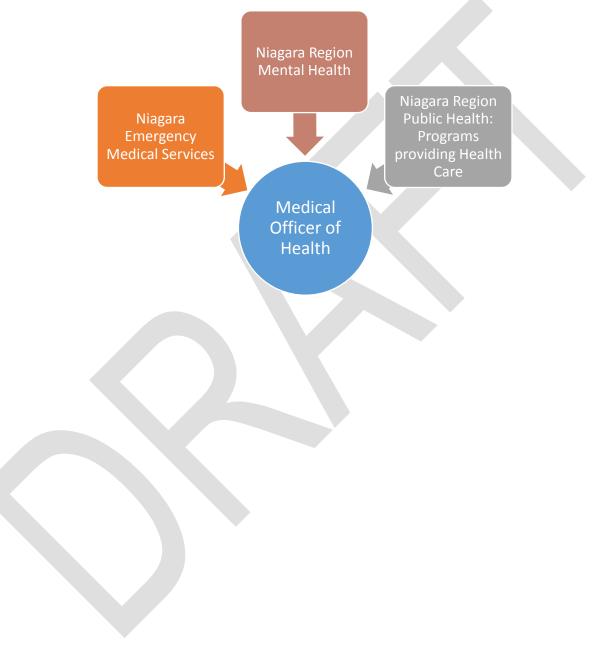
Health Information Custodians	Agents (Associated Programs and Services)
1. Medical Officer of Health/	Niagara Region Public Health programs providing health care
Commissioner Public Health	Niagara Region Mental Health
	Niagara Emergency Medical Services
	Seniors Community Programs
	Deer Park Villa Long-Term Care Home
	Woodlands of Sunset Long-Term Care Home
	Linhaven Long-Term Care Home
2. Commissioner, Community Services	Meadows of Dorchester Long-Term Care Home
	Northland Pointe Long-Term Care Home
	Rapelje Lodge Long-Term Care Home
	Upper Canada Lodge Long-Term Care Home
	Gilmore Lodge Long-Term Care Home



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Appendix B - Health Information Custodian Administrative Reporting Structure





Corporate Policy

C-XXX-000

