

Posting Date: 2013-03-22

Posting History Dates:

**Title: PRI – Privacy Policy**

**Applies to:** All Hamilton Health Sciences (HHS) staff, Hospital Affiliates, members of the Medical, Dental and Midwifery staff.

## **1.0 Purpose & Goals Description**

- 1.1 Hamilton Health Sciences is committed to protecting the privacy, confidentiality and security of all personal health information that has been entrusted to us.
- 1.2 Hamilton Health Sciences provides this protection, in part, by complying with Ontario's Personal Health Information Protection Act, enacted on November 1, 2004. The Personal Health Information Protection Act establishes rules concerning the [collection](#), [use](#) and [disclosure](#) of personal health information ([PHI](#)).

## **2.0 Equipment/Supplies**

None

## **3.0 Policy**

HHS adheres to the following principles related to PHI:

### **3.1 Principle I - Accountability for Personal Health Information**

- 3.1.1 Accountability for HHS compliance with privacy principles rests with the Board and/or CEO, having overall accountability, although other individuals within HHS are responsible for the day to day collection and processing of personal health information.
- 3.1.2 The Chief Privacy Officer is delegated to act on behalf of the CEO with respect to the oversight and compliance of privacy at Hamilton Health Sciences.
- 3.1.3 Hamilton Health Sciences is responsible to protect the privacy of patient information in its custody or control. Personal health information that has been transferred to an [agent](#) of HHS will be protected through the use of contractual or other means.
- 3.1.4 HHS implements policies and guidelines to give effect to this policy and the principle of accountability.

### **3.2 Principle II - Identifying purposes for the collection of personal health information**

- 3.2.1 HHS identifies the purposes for which personal health information is collected, at or before, the time of collection.
- 3.2.2 The purpose is conveyed to the patient by means of a Statement of Information, poster, brochure, public web site or by direct contact with the Privacy Office.
- 3.2.3 Personal health information is collected for the purpose of:
- Delivery of direct patient care
  - Administration of the health care system
  - Research
  - Teaching
  - Statistics
  - Fundraising
  - Meeting of legal and regulatory requirements as described in the Personal Health Information Protection Act ([PHIPA](#)).
- 3.2.4 When personal health information that has been collected is to be used for a purpose not previously identified, the new purpose will be identified prior to use. Unless law requires collection of the PHI for the new purpose, consent of the patient is required before information can be used for that purpose.

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### **3.3 Principle III - Consent for the collection, use and disclosure of personal health information**

- 3.3.1 Consent is required for the collection of personal health information and the subsequent use or disclosure of this information. HHS obtains consent for the use or disclosure of the information at the time of collection.
- 3.3.2 In certain circumstances personal information may be collected, used, or disclosed without the consent of the individual. E.g. For legal or security reasons it may be impracticable to seek consent.
- 3.3.3 HHS makes a reasonable effort to ensure that the individual is advised of the purposes for which the information will be used. To make the consent meaningful, the purposes must be stated in such a manner that the individual can reasonably understand how the information will be used or disclosed.
- 3.3.4 In obtaining consent, the reasonable expectations of the individual are also relevant. HHS can assume that an individual's request for treatment constitutes consent for specific purposes, unless the patient explicitly states otherwise.
- 3.3.5 Consent may be sought in a variety of ways, depending on the circumstances and the type of information being collected. Consent may be given verbally or in writing at the time of treatment, on an admission or registration form or consent may be given orally when information is collected over the telephone. Where a verbal consent is provided this exchange is to be documented in the patient's health [record](#).
- 3.3.6 A patient may withdraw consent at any time, subject to legal restrictions and reasonable notice. Withdrawal of the consent will not have a retroactive effect. HHS informs the individual of the implications of such a withdrawal and documents in the patient's health record.

### **3.4 Principle IV - Limiting collection of personal health information**

- 3.4.1 The amount and the type of personal health information collected is limited to that which is necessary for the purposes identified by Hamilton Health Sciences.
- 3.4.2 Personal health information will be collected by fair and lawful means.

### **3.5 Principle V – Limiting use, disclosure and retention of personal health information**

- 3.5.1 Personal health information will not be used or disclosed for purposes other than those for which it was collected, except with the consent of the patient or as required by law.
- 3.5.2 In cases where disclosure/release of information to external sources is authorized, the least amount of information appropriate for the intended purposes is disclosed.
- 3.5.3 Personal health information is retained only as long as necessary for the fulfillment of its purpose.
- 3.5.4 Hamilton Health Sciences will document any new purpose. Unless law permits the purposes; the consent of the individual is required before the information can be used for that purpose.

### **3.6 Principle VI – Ensuring accuracy of personal health information**

- 3.6.1 HHS will take reasonable steps to ensure the personal health information is as accurate, complete and up to date as possible.
- 3.6.2 Patients have the right to challenge the accuracy of the information.

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### **3.7 Principle VII – Ensuring safeguards for personal health information**

3.7.1 Hamilton Health Sciences is committed to protect patient information in all its forms (electronic, paper, verbal, or other) throughout its life cycle (origination, entry, processing, distribution, storage and disposal) for authorized access, modification, destruction or disclosure whether accidental or intentional. This protection is provided through equipment and software.

3.7.2 The safeguards will vary depending on:

- Sensitivity of the information that has been collected
- Amount
- Distribution
- Format of the information
- Method of storage

3.7.3 The methods of protection to include:

- Physical measures – locked filing cabinets and restricted access to offices
- Organization measures – confidentiality agreements
- Technological measures – passwords, secure computer networks and audits

3.7.4 HHS makes its employees aware of the importance of maintaining the confidentiality of personal health information by having the employee sign a Confidentiality Agreement, by providing privacy education and privacy awareness campaigns.

3.7.5 Care is taken in the disposal or destruction of personal health information to prevent unauthorized parties from gaining access to the information.

### **3.8 Principle VIII – Openness about personal health information and practices**

3.8.1 HHS Statement of Information Practices includes information about HHS privacy policy practices in a form that is generally understandable, including:

- A general description of HHS information practices
- How to contact the HHS Chief Privacy Officer
- How an individual may obtain access to and/or make a correction request for a record of personal health information
- How a patient may file a complaint with HHS Chief Privacy Officer of the Information Privacy Commissioner/Ontario.

3.8.2 HHS may make information on its policies and practices for personal health information available in other ways, including brochures or through the HHS public web site.

### **3.9 Principle IX – Individual access to own personal health information**

3.9.1 Hamilton Health Sciences supports the right of patients to access their personal health information as per legislation. Upon written request, within a reasonable time, an individual will be informed of the existence of their personal health information. The patient may challenge the accuracy and completeness of the information and have it amended as appropriate.

3.9.2 In certain situations, HHS may not be able to provide access to all the personal health information about a patient. Exceptions to the access requirement will be in accordance with PHIPA. The reasons for denying access will be provided to the patients.

3.9.3 HHS may choose to make sensitive medical information available through a medical practitioner.

3.9.4 The patient is required to provide sufficient information so as to permit HHS to provide an account of the existence, use and disclosure of their personal health information. The information provided will only be used for this purpose.

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### **3.10 Principle X – Challenge and compliance with Hamilton Health Sciences Privacy Policies and Practices.**

3.10.1 A patient or substitute decision maker is able to challenge compliance with the above standards by contacting the Chief Privacy Officer at Hamilton Health Sciences at [privacy@hhsc.ca](mailto:privacy@hhsc.ca).

3.10.2 The hospital has policies and procedures in place to receive and respond to complaints and inquiries about the policies and practices relating to the privacy and security of personal health information.

3.10.3 The hospital will investigate any complaint and if the complaint is justified will take appropriate measures including, if necessary, amending their policies and procedures.

### **4.0 Documentation**

None

### **5.0 Definitions**

**Agent** – In relation to a health information custodian, means a person that, with the authorization of the custodian, acts for or on behalf of the custodian in respect of personal health information for the purposes of the custodian, and not the agent's own purposes, whether or not the agent has the authority to bind the custodian, whether or not the agent is employed by the custodian and whether or not the agent is being remunerated.

**Collect** - In relation to personal health information, means to gather, acquire, receive or obtain the information by any means from any source, and "collection" has a corresponding meaning.

**Disclose** - In relation to personal health information in the custody or under the control of a health information custodian or a person, means to make the information available or to release it to another health information custodian or to another person, but does not include to use the information, and "disclosure" has a corresponding meaning.

**HIC** – Health Information Custodian as defined in PHIPA s.3 is a person or organization who has custody or control of personal health information as a result of or in connection with performing the person's or organization's duties.

**PHI** – Personal Health Information is defined in PHIPA s.4 as identifying information about an individual in either oral or recorded form that relates to the physical or mental health of the individual; relates to the provision of healthcare to the individual, including the identification of a provider of healthcare to the individual.

**PHIPA** – Personal Health Information Protection Act - means the 2004 (Ontario) and the regulations made there under.

**Record** - Means a record of information in any form or in any medium, whether in written, printed, photographic or electronic form or otherwise, but does not include a computer program or other mechanism that can produce a record.

**Use** - As defined in PHIPA s2, in relation to personal health information in the custody or under the control of health information custodian or a person, means to handle or deal with the information.

Posting Date: 2013-03-22

Posting History Dates:

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**6.0 Cross References**

PRI – Privacy Breach Investigation Protocol

PRI – Correction of Personal Health Information Protocol

**7.0 External References**

Personal Health Information Protection Act, Ontario, 2004.

Canadian Safety Association Privacy Code

**8.0 Developed By**

Chief Privacy Officer

**9.0 In Consultation With**

FOI Office Working Group

**10.0 Approved By**

FIPPA Task Force

**Keyword  
Assignment**

Private, health information, info, protection of

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