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|  <p>Winnipeg Regional Health Authority<br/>Office régional de la santé de Winnipeg<br/>Caring for Health À l'écoute de notre santé</p> <p><b>POLICY</b></p> | <p><b>REGIONAL</b></p> <p>Applicable to all WRHA governed sites and facilities (including hospitals and personal care homes), and all funded hospitals and personal care homes. All other funded entities are excluded unless set out within a particular Service Purchase Agreement.</p> |  | Level:<br><b>1</b> |
|  | Policy Name:<br><b>Confidentiality of Personal Health Information</b>   | Policy Number:<br>10.40.020                                | Page<br>1 of 5     |
|  | Approval Signature:<br><i>Original signed by A. Wilgosh</i>   | Section:<br><b>Governance &amp; General Administration</b> |                    |
|  | Date:<br>April 2010   | Supercedes:<br>May 31, 2000                                |                    |

## 1.0 **PURPOSE:**

- 1.1 To ensure that Trustees protect Personal Health Information including Demographic Information so that Individuals are not afraid to seek Health Care or to disclose sensitive information to health professionals.
- 1.2 To also ensure that Personal Health Information is protected during its collection, use, disclosure, storage and destruction in accordance with the provisions of *The Personal Health Information Act* ("PHIA") and other prevailing enactments such as *The Mental Health Act*.

## 2.0 **DEFINITIONS:**

- 2.1 **Access:** The right of an Individual, or a Person Permitted to Exercise the Rights of that Individual, to examine (view) and receive a copy of the Individual's Personal Health Information maintained by the Trustee.
- 2.2 **Breach of Security:** Occurs whenever Personal Health Information is collected, used, disclosed or accessed other than as authorized, or its integrity is compromised.
- 2.3 **Confidentiality:** The obligation of a Trustee to protect the Personal Health Information entrusted to it, to maintain the secrecy of the information and not misuse or wrongfully disclose it.
- 2.4 **Demographic Information:** An Individual's name, address, telephone number, and email address.
- 2.5 **Disclosure of Personal Health Information:** Revealing the Personal Health Information outside the Trustee, i.e. to other Trustees, to family and friends of the Individual, or to other persons legally entitled to have Personal Health Information released to them.
- 2.6 **Health Care:** Any care, service or procedure provided to diagnose, treat or maintain an Individual's health; provided to prevent disease or injury or promote Health Care; or that affects the structure or a function of the body and includes

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the sale or dispensing of a drug, device, equipment or other item pursuant to a prescription.

- 2.7 Health Care Facility: A hospital, personal care home, Psychiatric Facility, medical clinic, laboratory, CancerCare Manitoba and community health centre or other facility in which Health Care is provided and that is designated in the PHIA regulations.
- 2.8 Health Professional: A person who is licensed or registered to provide Health Care under an Act of the Legislature or who is a member of a class of persons designated as Health Professionals in the PHIA regulations.
- 2.9 Individual: A patient, client or resident receiving Health Care services within the WRHA/ Health Care Facility. For the purpose of Access, correction, Use and Disclosure of Personal Health Information includes Persons Permitted to Exercise the Rights of an Individual.
- 2.10 Information Manager: A person or body (corporation, business, or association) that processes, stores or destroys Personal Health Information or provides information management or information technology services for the Trustee.
- 2.11 Personal Health Information: Recorded information about an identifiable Individual that relates to:
- the Individual's health, or Health Care history, including genetic information about the Individual;
  - the provision of Health Care to the Individual; or
  - payment for Health Care provided to the Individual;
- and includes:
- the PHIN (personal health identification number) and any other identification number, symbol or particular assigned to an Individual; and
  - any identifying information about the Individual that is collected in the course of, and is incidental to, the provision of Health Care or payment for Health Care;
- and for further clarity includes:
- personal information such as financial position, home conditions, domestic difficulties or any other private matters relating to the Individual which have been disclosed to the Trustee;
- and for the purpose of the Confidentiality policy:
- any Personal Health Information exchanged verbally about the Individual.
- 2.12 Persons Associated with the WRHA/Health Care Facility includes: all contracted persons, volunteers, students, researchers, WRHA medical staff, educators, members of the Boards of Directors, Information Managers, employees, or agents of any of the above or other health agencies.
- 2.13 Privacy Officer: An employee designated by the WRHA or the Health Care Facility whose responsibilities include dealing with requests from Individuals who

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wish to examine and copy or correct Personal Health Information collected and maintained by the Trustee and facilitating the Trustee's compliance with PHIA. The definition is intended to mean the Privacy Officer and/or their delegate.

- 2.14 Psychiatric Facility: A place designated in the regulations of *The Mental Health Act* as a facility for the observation, assessment, diagnosis and treatment of persons who suffer from mental disorders.
- 2.15 Site: A Health Care Facility, community health centre, community office within the WRHA.
- 2.16 Trustee: A health professional, Health Care Facility, public body, or health services agency that collects or maintains Personal Health Information. For clarity, the WRHA as a public body is the Trustee of the Personal Health Information collected and maintained within Health Care facilities and Sites owned and/or operated by the WRHA and includes Community Health Services. The other hospitals and personal care homes within the region are Trustees of the Personal Health Information collected and maintained at each Health Care Facility.
- 2.17 Use: Involves revealing Personal Health Information to someone within the Trustee's own organization who needs to know the information to do their job. Use includes processing, reproduction, transmission and transportation of Personal Health Information.

### 3.0 POLICY:

- 3.1 All employees and Persons Associated with the Trustee are responsible for protecting all Personal Health Information (oral or recorded in any form) that is obtained, handled, learned, heard or viewed in the course of his/her work or association with the Trustee.
- 3.2 Personal Health Information shall be protected during its collection, Use, storage and destruction within the Trustee.
- 3.3 Use or Disclosure of Personal Health Information is acceptable only as part of one's job duties and responsibilities (including reporting duties imposed by legislation) and **based on the need to know**.
- 3.4 Discussion regarding Personal Health Information shall not take place in the presence of persons not entitled to such information or in public places (elevators, lobbies, cafeterias, off premises, etc.).
- 3.5 Employees and Persons Associated with the WRHA/Health Care Facility shall attend a WRHA PHIA Orientation and sign a WRHA Pledge of Confidentiality as a condition of employment/ contract/ association/ appointment. The pledge must be signed as soon as reasonably practicable, but not later than three (3) months after commencement of their relationship with the WRHA/Health Care Facility.

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- 3.6 At the discretion of the WRHA Chief Privacy Officer or Site Privacy Officer, some Persons Associated with the WRHA may only be required to sign the [PHIA Information Form – Visitor's on Business](#).
- 3.7 The WRHA Pledge of Confidentiality shall be signed each time there is a substantial change in an Individual's position, as determined by the department, program or division responsible for the person, (i.e. an employee moves from a department with little exposure to Personal Health Information to a department that collects or maintains large amounts of Personal Health Information).
- 3.8 Employees and Persons Associated with the Trustee may be required to attend an additional PHIA Orientation and sign another WRHA Pledge of Confidentiality, at the discretion of the Privacy Officer, (i.e. disciplinary purpose).
- 3.9 All persons contracted under a Purchase Service Agreement or another Agreement, as a condition of acceptance of the agreement, shall be required to sign a Purchase Service Agreement or a similar Agreement that provides, amongst other things, for protection of confidential information including Personal Health Information.
- 3.10 All Information Managers shall be required to sign an agreement that provides, amongst other things, for protection of Personal Health Information.
- 3.11 All contractors engaged in providing a service for the Trustee, where the service provided would expose them to confidential information, shall be required to sign a contract that provides, amongst other things, for the protection of confidential information including Personal Health Information.
- 3.12 Unauthorized use or disclosure of confidential information may result in a disciplinary response up to and including termination of employment/ contract/ association/ appointment. A person convicted of an offence under *The Personal Health Information Act* may be required to pay a fine up to \$50,000. A confirmed breach of Confidentiality may be reported to the appropriate professional regulatory body.
- 3.13 All persons who become aware of a possible Breach of Security or Confidentiality of Personal Health Information shall refer to the '[Reporting of Security Breaches Related to Personal Health Information Policy](#)'.

#### **4.0 PROCEDURE:**

- 4.1 The WRHA Pledge of Confidentiality will be signed at the end of the orientation and maintained in a place designated by the Chief Privacy Officer or Site Privacy Officer.
- 4.2 The PHIA Information Form - Visitors on Business will be administrated by the Program/ Department/ Division where the visitor will be located and maintained in a place designated by the Chief Privacy Officer or Site Privacy Officer.

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- 4.3 The administration of a Purchase Service Agreement, a similar Agreement or a Contract may be handled by the department responsible for the agreement/contract, WRHA Logistic Services, or WRHA Corporate. The original shall be maintained by the department or a place designated by the Chief Privacy Officer or the Site Privacy Officer.
- 4.4 The administration of an Information Managers Confidentiality Agreement maybe handled by WRHA Logistic Services, the WRHA Chief Privacy Officer, or the Site Privacy Officer. The original shall be maintained by the WRHA Chief Privacy Officer and a copy may be retained at the Site.

## **5.0 REFERENCES:**

- 5.1 *The Personal Health Information Act.*
- 5.2 *The Personal Health Information Act Regulations.*

***Policy Contact:*** Landis Esposito, WRHA Chief Privacy Officer