

Spinal Cord Injury Ontario	Subject: Privacy – Personal Information and Personal Health Information	Page: 1 of 9
	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
	Effective/Revision Date: November 1, 2012	
HUMAN RESOURCES Policies and Procedures		

VISION

Spinal Cord Injury Ontario champions excellence in service, advocacy and quality of life for people with spinal cord injuries.

MISSION

Spinal Cord Injury Ontario assists persons with spinal cord injuries and other physical disabilities to achieve independence, self-reliance and full community participation.

POLICY

SCI Ontario is committed to individuals’ rights to privacy, confidentiality and security of all personal information including personal health information. SCI Ontario is committed to collecting, using and disclosing personal information and personal health information responsibly and only to the extent necessary for the delivery of programs and services provided. Privacy and confidentiality of personal and personal health information applies to clients, donors, members, staff, and other stakeholders. SCI Ontario will be open and transparent as to how it handles personal information and personal health information, guided by the practices outlined in the Federal and Provincial privacy legislations.

PRIVACY STATEMENT

SCI Ontario is committed to respecting the right to privacy. SCI Ontario has a long-standing commitment to protecting the privacy and confidentiality of the personal information of our clients, donors, staff, volunteers, and members. SCI Ontario handles personal health information guided by the practices outlined in Ontario’s Personal Health Information Protection Act (PHIPA). All other personal information is guided by the practices in the Provincial Freedom of Information and Protection of Privacy Act (FIPPA) and the Federal Personal Information and Electronics Document Act (PIPEDA). The Chief Privacy Officer manages privacy inquiries, access, complaints and correction procedures and can be reached at privacyofficer@sciontario.org

SCI Ontario will collect personal health information from various sources with a preferred method of collecting information from the individual themselves. The information will be used for the purpose for which it is gathered and relevant to the delivery of community services when it pertains to clients. SCI Ontario will disclose personal information and personal health information when required for the delivery of community service or as necessary for the operation of SCI Ontario for bonafide business activities as an employer or volunteer agency, with a preferred method of obtaining expressed consent.

As an essential part of quality service and program delivery, SCI Ontario commits to collecting, maintaining, disclosing, securing and destroying personal information in accordance with applicable Provincial and Federal privacy legislations.

Spinal Cord Injury Ontario	Subject: Privacy – Personal Information and Personal Health Information	Page: 2 of 9
	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
HUMAN RESOURCES Policies and Procedures	Effective/Revision Date: November 1, 2012	

PURPOSE

SCI Ontario recognizes the need for personal information and personal health information to be shared with various individuals to ensure timely and effective client service delivery and internal program delivery as it relates to volunteers and employees. When information is shared, it is important that such sharing is;

- Consistent with PHIPA, FIPPA and PIPEDA
- In a manner where reasonable steps are taken to protect the personal information and personal health information
- Communicated to only those individuals whom the information is relevant to the provision of services and only shared on a “need to know” basis

SCOPE

This policy applies to employees, consultants, volunteers and students.

RESPONSIBILITY

It is the responsibility of the Hiring Manager in conjunction with Human Resources that all employees and consultants review the Personal Information and Personal Health Information Policy and sign a Confidentiality Agreement which reinforces the requirements to secure personal and personal health information. The Confidentiality Agreement will be signed off by Human Resources or the Hiring Manager and staff at the time of hire.

It is the responsibility of the Department Manager or their designate to review the Personal Information and Personal Health Information Policy with volunteers at the time of recruitment and have them sign a Confidentiality Agreement. The Confidentiality Agreement will be signed off by the Department Manager and volunteer.

Confidentiality Agreements will be updated by the Manager or their designate annually at the time of performance evaluations for employees.

DEFINITIONS

Personal Health Information (PHI) - Includes oral or written information about an individual that;

- Relates to the individual’s physical or mental health, including family health history
- Relates to the provision of health care, including the identification of persons providing the care
- Is a plan of service for individuals requiring long-term care
- Relates to payment or eligibility for health care
- Relates to the donation of body parts or bodily substances or is derived from the testing or examination of such parts or substances

Is the individual’s health number or identifies an individual’s substitute decision maker

Spinal Cord Injury Ontario	Subject: Privacy – Personal Information and Personal Health Information	Page: 3 of 9
	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
	Effective/Revision Date: November 1, 2012	
HUMAN RESOURCES Policies and Procedures		

- ** Employee records are excluded from the PHI definition, provided that the records are used primarily for purposes other than providing health care.
- ** The Act does not apply to information about an individual if the information cannot be reasonably used to identify the individual.

Health Information Custodian (HIC) – Is a person or organization who has custody or access to personal health information as a result of, or in connection with performing the persons’ or organizations’ duties or work in any of the following capacities.

Please note that as it applies to SCI Ontario, the custodian is SCI Ontario and the Chief Executive Officer (CEO) and falls into the first category being:

- A service provider who provides community service within the meaning of the Long-Term Care Act, 1994.

SCI Ontario recognizes the relevance in acknowledging other relevant HIC(s) as defined under the PHIPA legislation which includes:

- Health care practitioners that provide health care
- Hospitals, independent health facilities, psychiatric facilities
- Ambulance services
- Pharmacies, laboratories, specimen collection centres
- Long-term care homes, community care access corporations
- Centre’s programs or services for community or mental health whose primary purpose is the provision of health care

Health Information Agent (HIA) - Is a person that a health information custodian authorizes to deal with other individual’s personal health information regardless of whether or not the agent is employed by the custodian or whether or not the agent is being paid. An agent includes both internal and external persons to SCI Ontario. Internally an agent includes an employee, consultant, volunteer or student. Externally an agent includes a third party client survey administrator, a community partner, a third party service provider, or a funder.

Consent:

Implied Consent – Occurs when you conclude from the surrounding circumstances that are reasonable to believe that an individual would consent to the collection, use or disclosure of personal health information. Health information custodians may imply an individual’s consent to collect and use personal health information for some purposes. They may also imply consent to disclose personal health information to another health information custodian for the purpose of providing or assisting in the provision of health care to the individual.

Spinal Cord Injury Ontario	Subject: Privacy – Personal Information and Personal Health Information	Page: 4 of 9
	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
	Effective/Revision Date: November 1, 2012	
HUMAN RESOURCES Policies and Procedures		

Expressed Consent – Occurs when an individual explicitly agrees to the collection, use and disclosure of their personal health information. Expressed consent can be obtained in writing, orally, electronically or by telephone.

In order to rely on express consent, health information custodians must be satisfied that all of the required elements of consent are fulfilled.

Expressed consent is always required to use personal health information for fundraising, marketing and research purposes and needs to be documented in writing.

Chief Privacy Officer (CPO) - Is the person designated to assist in meeting the privacy obligations in accordance with the PHIPA legislation and to respond to individual inquiries about privacy-related matters.

GUIDELINES

1. **Accountability** - Overall accountability for SCI Ontario’s compliance with PHIPA legislation rests with the Board and/or CEO. Staff, volunteers and consultants within SCI Ontario are responsible for applying this policy in the day to day collection and use of personal information and personal health information.

The Chief Privacy Officer (CPO) is responsible for the organization’s compliance with the legislation and will understand policy, procedures, and handle privacy complaints. The “Chief Privacy Officer” is delegated to act on behalf of the CEO and Board of Directors with respect to the oversight and compliance of privacy at SCI Ontario.

SCI Ontario is responsible for safeguarding personal information and personal health information under its control including information that has been transferred to an external “agent” of SCI Ontario through its service partnerships. Information that is transferred to “agents” will be protected through the use of contractual agreements that demonstrate agents have practices in place that support the compliance of the applicable Provincial and Federal privacy legislation(s).

2. **Purpose and Need** - Personal information and personal health information is collected, used, and disclosed for the purpose of which consent is obtained. SCI Ontario will identify the purposes for which information is collected at, or before the time of collection. The general purpose of the collection of personal health information from clients is conveyed to the individual by means of a Privacy Statement, brochure, and public website or by direct contact with the Chief Privacy Officer. Personal information and personal health information from clients is primarily collected for the purpose of delivering community services which at the time of writing this policy include; regional services coordination, attendant services, peer support services, employment services, information and education and advocacy. Secondly, clients’ personal health information and personal information is collected, retained and used for the administration of community services for the purpose of statistics, research, fundraising, membership and meeting the legal and regulatory requirements as described by the PHIPA legislation.

Spinal Cord Injury Ontario

	Subject: Privacy – Personal Information and Personal Health Information	Page: 5 of 9
HUMAN RESOURCES Policies and Procedures	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
	Effective/Revision Date: November 1, 2012	

Personal information and personal health information from staff or volunteer's is primarily collected for the purpose of meeting the legislative and regulatory requirements as an employer for bonafide business reasons. These may include but are not limited to; payroll, WSIB and insurance claims, audit purposes, and internal quality improvement measures.

When information that has been collected is to be used for a purpose not previously identified, the new purpose will be communicated to the individual and revised consent obtained.

- 3. Consent** –SCI Ontario mandates that expressed consent is obtained for the use of all personal information excluding circumstances indicated in the PHIPA legislation where implied consent for personal health information is reasonable. SCI Ontario will obtain implied or expressed consent before collecting, using or disclosing personal health information, as outlined in the Client Services Policies and Procedures, Consent to Obtain and / or Release Personal Information (Ref. SD-001).

SCI Ontario will provide individuals the information they need to understand why they are collecting their personal health information, how they intend to use it and who they intend to disclose it to. SCI Ontario will provide a written statement of their information practices at primary points of collection and provide individuals with a copy of this statement to enable individuals to provide meaningful consent.

For consent to be valid the following elements are required:

- the individual must have the capacity to consent,
- consent must be knowledgeable (it is reasonable the individual understands the reason you are collecting, using or disclosing the information and their right to refuse or withdraw consent),
- consent must be voluntary,
- consent must be related to the information in question.

Implied consent is permitted for the collection, use and disclosure of personal health information for the purpose of providing health care and if disclosure of information is to another health information custodian for the purpose it was intended. In order to rely on implied consent, SCI Ontario health information custodians must be satisfied that all the required elements of consent are fulfilled. Expressed consent is SCI Ontario's preferred method and should generally be obtained as outlined below.

SCI Ontario will make reasonable efforts to seek the expressed consent of the individual for the collection, use or disclosure of all personal health information. Expressed can be either verbal or written, and includes a communication of what type of personal health information will be collected, how it will be used (purpose) and with whom it will be shared. It is the preferred practice of SCI Ontario to have clients sign a Consent to Obtain and / or Release Personal Information form, documenting consent however, in some cases (i.e. for timely delivery of services in urgent situations) it may be necessary to obtain verbal consent in which case it will be documented in the client case file or appropriate file documentation.

Spinal Cord Injury Ontario

	Subject: Privacy – Personal Information and Personal Health Information	Page: 6 of 9
HUMAN RESOURCES Policies and Procedures	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
	Effective/Revision Date: November 1, 2012	

If the purpose of disclosure is not to provide health care, consent must be expressed (i.e. fundraising, research). Disclosure of information to third parties that are not custodians must be expressed. Certain exemptions may apply, such as law enforcement, emergencies, or audit purposes. By completing and signing the Consent to Obtain and / or Release Personal Information form, the individual is giving consent to the collection and specified uses.

Individuals have the right to refuse, withdraw or place restrictions on their consent for the collection, use and disclosure of personal health information. By completing and signing the withdrawal portion of the Consent to Obtain and / or Release Personal Information form, the individual is withdrawing their specified consent.

Consent may be withdrawn upon a request to do so in writing by the individual to the primary service staff. If withdrawal of consent compromises service delivery, the impact of this will be discussed with the individual to enable them to make an informed decision. The discussion will be documented in the individual file notes. If a withdrawal of consent impacts individual service eligibility, the staff will advise their Manager/Supervisor. In this case refer to the Client Service Policies and Procedures, Consent to Service (Ref. SD-003).

- Limiting Collection** – SCI Ontario will limit the amount and type of personal information and personal health information collected and identify the purpose for which it is being collected, used and disclosed. If new purposes arise for which consent is necessary, individuals will be advised and consent obtained for the new purpose. Information collection shall be collected by fair and lawful means and follow procedures, as outlined in the Client Services Policies and Procedures, Client Bill of Rights (Ref. R1-003).
- Disclosure and Retention of Personal Information** – SCI Ontario can only use, disclose, and retain personal information and personal health information for the purposes for which the information was collected. Information will be retained only until the specified purpose has been fulfilled or as required by applicable legislation governing the collection of such information. Information will be disposed of, at the appropriate time, and in a manner that prevents improper access as per the Human Resources Policies and Procedures, Storage, Retention and Destruction of Documents (Ref:2-022).
- Accuracy** – SCI Ontario is committed to ensuring that personal information and personal health information is accurate, complete and as up to date as possible to minimize the possibility of inappropriate information being used that will negatively impact the delivery of programs and services.

Individuals have the right to challenge the accuracy and completeness of personal information and personal health information on record. The individual is asked to complete the Request to Correct Personal Information form. The staff will support the individual in completing the form if required.

Spinal Cord Injury Ontario

	Subject: Privacy – Personal Information and Personal Health Information	Page: 7 of 9
HUMAN RESOURCES Policies and Procedures	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
	Effective/Revision Date: November 1, 2012	

The Chief Privacy Officer is notified of the individual's request and ensures that the individual's challenge is responded to within 30 days and will follow the Client Services Policies and Procedures, Correction to File Documentation (Ref 2-022). SCI Ontario has a responsibility to correct a record that is not accurate or complete, unless SCI Ontario did not create the record or the record consists of a professional opinion made in good faith.

If SCI Ontario refuses to amend the record then the refusal must be in writing to the individual. The written refusal includes the reason for the refusal and the individual's rights and complaint process as outlined in the Client Services Policies and Procedures, Client Complaint (Ref. RI-004).

- Safeguards** – SCI Ontario is committed to prevent loss, theft, unauthorized access, disclosure, unauthorized altering, copying, and use of personal information and personal health information in all of its forms. Safeguards will be appropriate based on the sensitivity level of the information being collected, the amount, distribution, format of the information, and method of storage. Please refer to the Human Resources Policies and Procedures, Storage, Retention and Destruction of Documents (Ref: 2-022).

Methods of protection will include:

- *Physical measures* – Double locked filing system which includes storing personal information and personal health information and client files in locked cabinets within an office and restricted access to offices (i.e. locks on doors). Following clean desk practices where client files and other personal information are not left unattended.
- *Organizational measures* – The use of confidentiality agreements, use of consent forms, privacy training for employees, privacy audits, contractual agreements with service partners and third party vendors.
- *Technology measures* – The use of passwords, secure computer networks, and conducting electronic file access audits. Following Human Resources Policies and Procedures, E-Communications (Ref: 2-019).

All staff, independent consultants and volunteers (volunteers who are privileged to personal health information and personal information) will sign a Confidentiality Agreement at the time of hire. Annual privacy audits are conducted internally by the Privacy Committee to evaluate the effectiveness of organizational process, procedures and training in the area of privacy. The Privacy Audit Checklist will be used to document the findings.

The Chief Privacy Officer is contacted immediately upon awareness of any privacy breaches. Any personal health information or personal information that is disclosed inappropriately is retrieved to ensure that the person who was not authorized to receive the information does not have copies of the information. The person's contact information is retrieved in case there is a need for follow-up. The Chief Privacy Officer explains to the individual whose information was compromised the extent of the breach, the steps that were taken to rectify the breach, and documents the breach in the affected information records.

Spinal Cord Injury Ontario

	Subject: Privacy – Personal Information and Personal Health Information	Page: 8 of 9
HUMAN RESOURCES Policies and Procedures	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
	Effective/Revision Date: November 1, 2012	

8. **Openness** – SCI Ontario is committed to making its privacy policies and practices concerning the management of personal information and personal health information easily accessible to the public. This openness will demonstrate that the organization is trustworthy, responsible, and respectful of individuals’ privacy. SCI Ontario privacy information and practices are duly noted on the website, in brochures and made available at the time of client intake and orientation to service.
9. **Individual Access** – SCI Ontario supports the right of individual access to their personal information and personal health information. A request can be made verbally or in writing. If the request is verbal, the staff member will document the request in the file and request that the individual follow up the verbal request by signing the Access to Personal Information Form. The staff will support the individual in completing the form if required. Upon written request to the Manager/ Supervisor, an individual will be informed of the existence of his or her information. The Manager/Supervisor will facilitate access to the individuals request to view the record and/or provide a copy if requested as per the Client Services Policies and Procedures, Access to Personal Information (Ref. PA-001). The individual will view the original record in the presence of a SCI Ontario employee while ensuring that the original record is kept unaltered. The Manager/Supervisor will notify the Chief Privacy Officer of the request for information within 5 business days and seek consultation with their Manager/Director if required. The Manager/Supervisor has 30 days to respond to a request for access to information and make reasonable efforts for arrangements for this access to occur. If the individual is able to substantiate that the request is urgent, all attempts will be made to provide access within the requested time period.
10. **Provide Recourse** – An individual including client, member, donor, volunteer or staff member is able to make a complaint about SCI Ontario’s compliance with the standards set out in applicable Provincial or Federal privacy legislations by contacting the Chief Privacy Officer at (privacyofficer@sciontario.org). SCI Ontario will follow its complaint procedure, as outlined in the Client Services Policies and Procedures, Client Complaint (Ref. RI-004) or Human Resource Complaint Policy (Ref: 2-011)

Spinal Cord Injury Ontario

HUMAN RESOURCES Policies and Procedures	Subject: Privacy – Personal Information and Personal Health Information	Page: 9 of 9
	Section: Employee Relations Ref: 2-016	Director Approval: March 2011
	Effective/Revision Date: November 1, 2012	

TOOLS REQUIRED:

1. Privacy Statement
2. Confidentiality Agreement
3. Consent to Obtain and / or Release Personal Information Form
4. Access to Personal Information Form
5. Request to Correct Personal Information Form
6. Privacy Audit Checklist Form

Policy and Procedure References:

1. Human Resources, Storage, Retention and Destruction of Documents (Ref.:2-022)
2. Human Resources, E-Communications (Ref: 2-019)
3. Human Resources, Complaint Procedure (Ref: 2-011)
4. Client Services, Consent to Obtain and / or Release Personal Information (Ref. SD-001)
5. Client Services, Consent to Service (Ref. SD-003)
6. Client Services, Client Bill of Rights (Ref. R1-003)
7. Client Services, Correction to File Documentation (Ref. TBD)
8. Client Services, Access to Personal Information (Ref. PA-001)
9. Client Services, Client Compliant (Ref. R1-004)