



Patient Privacy Policy

Policy Statement:

Voice Found is committed to protecting the privacy of our patients and safeguarding the personal health information (PHI) with which we are entrusted. This policy establishes rules for the collection, use, and disclosure of PHI held at Voice Found in order to protect patient privacy and to ensure the delivery of safe and effective health care services.

Definitions:

1. **Agent** – any person authorized by Voice Found to act on its behalf in respect of PHI for The Clinic purposes, and not the agent's own purposes, whether or not the agent has the authority to bind the custodian, is employed by the custodian, or is being remunerated;
2. **Circle of Care** – A group that includes any person who is involved in the care or treatment of a given patient and who may rely on implied consent for the collection, use, and disclosure of information for the purposes of providing that patient with care.
3. **Chief Privacy Officer** - The person responsible for the oversight of all activities related to the implementation of, and adherence to, the organization's **privacy** and to ensure operational procedures are in **compliance** with relevant **privacy** laws.
4. **Collect:** to gather, acquire, receive or obtain PHI by any means from any source.
5. **Consent:** A patient or substitute decision maker's (SDM) agreement, whether express (explicit statement from patient or SDM or implied (concluded from the surrounding circumstances), written or oral, to the collection, use, or disclosure of their PHI
6. **Consent Directive:** A patient or SDM instruction to withhold or withdraw, in whole or in part, consent to the collection, use, or disclosure of PHI to one or more individuals (also known as a lock box)
7. **Disclose:** To make information available or to release it to any other person
8. **Healthcare:** Any observation, examination, assessment, care, service, or procedure that is done for a health-related purpose.

9. **Health Care Custodian:** A person or organization described in section 3 of the Person Health Information Protection Act (PHIPA) and who has custody or control of PHI. For the purposes of this policy, this includes Voice Found.
10. **Patient Photography:** Any recording of a patient's likeness, whether identifiable or not, through visual means including still photography, videotaping, and digital image, but excludes radiographic or ultrasonic images (e.g X-rays, echocardiography, etc)
11. **Personal Health Information:** Information about an individual, whether oral or recorded form, that identifies the individual or could enable such identification and that related to: the person's health, medical history or past or future medical treatment (eg a patient's physical or mental health or personal or family health history; the provision of health care to a patient; the identity of a patient's health care provider or SDM, payments or eligibility for health care or healthcare coverage, donation by an individual of any body part of bodily substance, a patient's health number.
12. **Privacy Breach:** Any intentional or unintentional unauthorized collection, use, or disclosure of PHI, including the loss of or failure to protect such information
13. **Secondary Use:** Any information beyond that for which the information was collected.
14. **Staff:** All permanent and temporary, full time or part time, casual or contract employees, trainees and volunteers, including but not limited to physicians, residents, interns, researchers and students.
15. **Substitute Decision Maker (SDM):** A person who is authorized under PHIPA to consent on behalf of a patient to the collection, use, or disclosure of that patient's PHI, and
16. **Use:** To view, handle, or otherwise deal with PHI

POLICY:

Accountability:

1. The Clinic staff and agents ("we") are responsible for protecting patient privacy. All known or suspected privacy breaches must be reported to Voice Found CEO or Board Chair as soon as reasonably possible.
2. We must cooperate with the Privacy Officer to ensure that privacy breaches are properly contained and investigated and that further privacy breaches are prevented.
3. We must ensure successful completion of privacy training. Voice Found privacy training involves at a minimum, completion of online monitored interactive training and review of internal policy and procedures. Regulated Health professionals must meet all training requirements set out by their respective regulatory colleges.

4. We are responsible for complying with the rules related in privacy training, including those on collection, use, and disclosure of information in the various information systems used at Voice Found.
5. Voice Found will undertake regular audits to evaluate appropriateness of the collection, use, and disclosure of PHI by its staff and agents.
6. PHI can only be accessed for the delivery of care by appropriate staff members.
7. We do not have authority to access the PHI of family, friends, neighbours, or high-profile patients using any and all clinical information systems unless we are providing care to the patient as part of our authorized duties. This remains the case even if verbal consent is obtained.
8. Any violation of this policy is grounds for disciplinary action up to and including dismissal or termination of privileges.
9. Under PHIPA, Voice Found also has mandatory privacy breach reporting requirements to the Information and Privacy Commissioner of Ontario (IPC) as well as to relevant regulatory colleges.
10. We are subject to the fines and penalties set out in PHIPA.
11. We are responsible for safeguarding the PHI we collect, use and disclose in the course of our authorized duties through the use of physical, administrative, technical, and electronic safeguards described in Policy Information Systems and Technology Security
12. Under the direction of the Privacy Officer or Board Chair, patients, or their SDM's will be informed of the loss, theft, or inappropriate access use or disclosure of their PHI as soon as reasonably possible, as may be required by PHIPA. We must cooperate with the Privacy Officer to ensure that patients are properly notified of breaches relating to their PHI.

Openness:

12. Upon request, patients will be informed of:
 - A. Voice Found privacy statement, which describes Voice Found's privacy and information practices and is posted on the website
 - B. Their right to forward an inquiry or make a complaint to Voice Found's Privacy Officer and or the the Information and Privacy Commissioner of Ontario (IPC)
 - C. Their right to obtain access to and/or request a correction of their record of their PHI

Consent:

13. We may rely on a patient's or SDM's implied consent for the collection, use, and disclosure of PHI if the information is required for the purposes of providing healthcare to the patient.

14. Before using PHI for any secondary purpose, we will seek express consent from patients or their SDM's except where the information:

- A. Is needed to prevent serious bodily harm or reduce a significant risk of harm to any person
- B. Must be disclosed by law

15. When obtaining consent from patients and SDM's, Voice Found and agents must make reasonable efforts to ensure that patients or their SDM's are advised of the purpose for which their information is being collected.

16. Patients or their SDM's are entitled to withdraw consent to the use and disclosure of their PHI stored in Voice Found electronic health record system by applying a consent directive.

17. We may only override a consent directive with patient consent or for authorized purposes.

18. Voice Found investigates all overrides of consent directives to ensure the access was appropriate and authorized.

Collection, Use and Disclosure

19. We may only collect, use and or disclose PHI to the extent necessary for legitimate purposes prescribed by Voice Found and in the course of our duties. The purpose for collection must be clear at the time of collection and may include:

Delivery of patient care;

(ii) Clinic administration (e.g. billing and invoicing);

(iii) Support for and promotion of education and research that has been approved by the REB or other contractually assigned Board of record as approved by Voice Found;

(iv) Risk Management, Error Management and Quality of Care;

(v) Quality assurance;

(vi) Documentation of patterns of illness to support prevention programs and early disease detection;

(vii) Fundraising, provided express consent has been obtained and where the information consists only of the patient's name and contact information; and

(viii) Meeting Voice Found's legal and regulatory requirements.

19. We may only collect PHI through photography or videography if information is being collected for the purposes of documenting patient care or findings.

20. No patient will be contacted for research purposes unless express consent for such contact has been previously obtained and recorded in the patient's record.

21. We may rely on implicit consent for the disclosure of PHI to others within a patient's circle of care.

22. PHI may be disclosed through shared electronic health records systems for use by external healthcare providers who are involved in the care of the person to whom the information relates and who have signed an agreement with The Clinic to enable access to the information.

Accuracy, Access and Correction:

24. We will take reasonable steps to ensure that information about patients is accurate, complete, and up-to-date.

25. We must record PHI when it is collected or as soon as reasonably possible afterward. Whenever possible, the individual who collects the PHI should be the one recording the PHI.

26. When disclosing PHI for any purpose, we will set out for the recipient any known limitations on the accuracy and/or completeness of the information.

27. Upon request and verification of identity, patients or their SDMs will be informed of the existence, use, and disclosure of their PHI and given access to that information unless a specific exception applies .

28. When an individual demonstrates the inaccuracy or incompleteness of their PHI held by Voice Found, we will take steps to amend the information . Where appropriate, the amended information will be transmitted to third parties having access to the information in question.

Retention:

29. Voice Found uses an EMR ensures there is never a destruction of PHI record

Exceptions:

30. Any exceptions to this policy must be approved by the Privacy Officer, the IPO or the Privacy and Information Security Steering Committee.

Inquiries

Any inquiries relating to this policy may be directed to Voice Found Privacy Officer at cynthia@voicefound.ca or via mail at 604B-1 Nicholas St, Ottawa, ON K1N 7B7

REFERENCES

Personal Health Information Protection Act, 2004, SO 2004, c 3. SCH A
University Health Network Policy and Procedure Manual, Administrative - Privacy e-
health Ontario, Electronic Health Record Privacy Policies
Information and Privacy Commissioner of Ontario, "Detecting and Deterring
Unauthorized Access to Personal Health Information", Toronto : ON 2015
Information and Privacy Commissioner of Ontario, Order HO-014
Information and Privacy Commissioner of Ontario, PHIPA Order HO-010
Information and Privacy Commissioner of Ontario, PHIPA Order HO-002

Appendix A: ACCESS TO MEDICAL RECORDS

Telus Electronic Medical Record (EMR)

Access to medical records held by Voice Found is subject to the following:

1. Patients or SDMs can request access to patient medical records by filling out a Request / Consent for Release / Disclosure of Patient Health Information form.
2. Patients have a legal right to their medical records. There are only two reasons a person can be denied access:
 - (i) it contains PHI from another individual,
 - (ii) The information in the chart could cause the patient harm.
3. If information is withheld for any of the above reasons or for any other reason, the reason will be communicated to the patient or SDM.
4. Voice Found will respond to a patient or SDM's request for access to a medical record within 30 days. We may notify the individual that an additional 30 days is required to respond to the request if:
 - (i) Responding within 30 days would interfere with patient care because finding or compiling the medical record is very complex; or
 - (ii) More time is needed to confirm whether some of the medical record should be withheld.
5. Voice Found may charge reasonable costs for individual access to information based on IPC guidance and directives.

eHealth Ontario's Shared EHR Systems:

ConnectingOntario, Diagnostic Imaging Common Services (DI-CS):

If a patient or SDM requests access to information in the ConnectingOntario, or DI-CS system and the information has been created and contributed by Voice Found, the record can be provided to the individual in accordance with Voice Found internal procedures. If the information requested was created and contributed to the system by another HIC or by multiple HICs, the individual must contact eHealth Ontario directly and may visit Voice Found's external Privacy webpage for further information.

B. OLIS:

If a patient or SDM wishes to access a record in OLIS, he or she must contact Service Ontario at 1 (800) 291-1405.

C. Digital Health Drug Repository (DHDR):

If a patient or SDM wishes to access their PHI in DHDR, he or she must contact Service Ontario at 1 (800) 291-1405 or visit the Ministry of Health and Long-Term Care's webpage at www.ontario.ca/mydruginfo.

Appendix B: CORRECTION TO MEDICAL RECORDS

Correction to medical records held by Voice Found is subject to the following:

1. A patient or SDM can request a correction to a patient's medical record by filling out a Request for Correction to Personal Health Record form, which can be obtained from Voice Found.

2. Voice Found may decline a request to make a correction to a medical record if:

(i) The information was received from another organization and Voice Found does not have enough information to know whether it should be corrected;

(ii) The correction is frivolous, vexatious, or requested in bad faith;

(iii) The medical record is not incorrect or incomplete; or

(iv) The information represents a clinical opinion that was made in good faith.

3. When a challenge relating to the accuracy of a medical record is not resolved to the satisfaction of the patient or SDM, the individual may write a statement of disagreement. Voice Found will record the substance of the unresolved challenge and include the written statement from the individual in the patient's health record.

A. eHealth Ontario's Shared EHR Systems:

ConnectingOntario, Diagnostic Imaging Common Services (DI-CS):

If a patient or SDM requests that a correction be made to information in the ConnectingOntario or DI-CS system and the information has been created and contributed by Voice Found, Voice Found must determine whether the correction should be made in accordance with the procedures outlined in this Appendix. Where a request for correction is granted and the correction is medically relevant (i.e. not a minor correction such as an update to a patient's contact information), the most responsible staff must contact eHealth Ontario at: privacy.operations@ehealthontario.on.ca or 1 (416) 946-4767.

If the request relates to information that has been contributed by another HIC or by multiple HICs, staff must notify the individual that the information is not within the custody or control of Voicefound and direct the individual to contact eHealth Ontario directly at privacy@ehealthontario.on.ca or 1 (866) 250-1554.

B. OLIS:

If a patient or SDM wishes to request a correction to their information in OLIS, he or she must speak to the HIC who ordered the test or to the laboratory that performed the test.

C. Digital Health Drug Repository (DHDR):

If a patient or SDM wishes to request a correction to their PHI in DHDR, he or she must contact Service Ontario at 1-800-291-1405.