

RGP Privacy and Confidentiality Policy

Effective Date: October 1, 2016




**REGIONAL GERIATRIC
PROGRAM OF TORONTO**

Better health outcomes for frail seniors

Table of Contents

- 1 Background 3
- 2 RGP Vision and Mission 4
 - 2.1 Vision 4
 - 2.2 Mission 4
- 3 Purpose 4
- 4 Abbreviations and Acronyms 4
- 5 Scope and Applicability 5
- 6 Guiding Principles..... 5
 - 6.1 Accountability 5
 - 6.2 Identified Purposes 6
 - 6.3 Consent..... 6
 - 6.4 Limiting Collection..... 6
 - 6.5 Limiting Use, Disclosure and Retention 7
 - 6.6 Accuracy..... 7
 - 6.7 Safeguards..... 7
 - 6.8 Openness 7
 - 6.9 Individual Access..... 7
 - 6.10 Challenging Compliance 8
- 7 Information Privacy Program 8
- 8 Violations of this Privacy and Confidentiality Policy 8
- 9 Policy Administration..... 9
- 10 Contact..... 9

RGP Privacy and Confidentiality Policy	
Effective Date: October 1, 2016	Review Date: August 18,2016
Approved by:  Marlene Awad, Director of Operations	Version: V1.0

1 Background

The Regional Geriatric Program of Toronto (“RGP”) was established in 1989 pursuant to an Ontario Ministry of Health directive to create regional geriatric programs in the five health science centres in Ontario.

Today the RGP supports health care professionals through a network of 26 participating organizations in Toronto and surrounding regions, in the provision of interdisciplinary, senior-friendly, and evidence-based care that optimizes the function and independence of seniors and their ability to age in place. The 26 organizations provide a range of specialized geriatric services, which diagnose, treat and rehabilitate frail seniors with complex and multiple medical, functional and psychosocial problems. Specialized geriatric services are provided on a consultative basis by inter-professional team of health professionals in a variety of home, ambulatory, acute-care, long-term care and rehabilitation hospital settings. The goal of specialized geriatric services is to reduce the burden of disability by detecting and treating reversible conditions and recommending optimal management of chronic conditions.

The RGP is a Health Information Custodian (HIC) because it is an organization that has custody or control of Personal Health information (PHI) as a result of performing the organization’s powers and duties and it is “a centre, program or service for community health or mental health whose primary purpose is the provision of health care” (PHIPA section 3(1)4.vii).1

The RGP Registry System is an application developed for the collection, storage, retrieval, analysis, and dissemination of information on frail seniors who have been seen in a specialized geriatric service. Its data fields allow users to record information such as demographics, service use, visits, physician contacts, functional problems, diagnostic information, no shows, and wait time. The Registry also provides numerous reports to its users.

1 Clarke, Cynthia, Borden, Ladner, Gervais, Opinion Letter, RGP Patient Database – Sharing Referral History, February 17, 2006, p.p.2-3

2 RGP Vision and Mission

2.1 Vision

Better health outcomes for frail seniors.

2.2 Mission

We support health care providers in the delivery of interdisciplinary, senior-friendly, and evidence-based care that optimizes the function and independence of seniors and supports aging in place. This is achieved through:

Service: A network of health service providers caring for frail seniors.

Education: Learning resources to build capacity for frailty focused care.

Research: Evaluation and research on best practices for senior friendly care.

Advocacy: Advocacy on issues that build better health outcomes for frail seniors.

3 Purpose

The purpose of this Privacy and Confidentiality Policy is to provide guidance to the management, employees and contractors of the RGP on matters concerning the protection of Personal Health Information with respect to the RGP Registry System and the business operations of the RGP.

Patients, families, caregivers and Participating Organizations expect and trust that the RGP will protect the confidentiality, integrity and availability of their Personal Health Information (PHI). The RGP is committed to meeting these expectations and to ensuring compliance with the Personal Health Information Protection Act (PHIPA) and privacy best practices.

4 Abbreviations and Acronyms

CIHI	Canadian Institute for Health Information
CSA	Canadian Standards Association
HIC	Health Information Custodian
PHI	Personal Health Information
PHIPA	Personal Health Information Protection Act
PIA	Privacy Impact Assessment
RGP	Regional Geriatric Program of Toronto

5 Scope and Applicability

This Privacy and Confidentiality Policy applies to:

1. All agents (i.e. employees, volunteers, and contractors) of the RGP who have access to PHI or who work in proximity to media containing PHI.
2. All Participating Organizations and their respective agents who may have access to, and use, the RGP Registry System.
3. All RGP information assets including PHI, system administration and security data, hardware, software, communications networks and facilities.
4. All activities associated with the operation of the RGP Registry System and the business operations of the RGP.

6 Guiding Principles

The RGP strives to uphold a corporate pledge to respect personal privacy and safeguard individual record confidentiality and system security. The following principles give substance to this commitment. They are based on those contained in the Ontario *Personal Health Information Protection Act (PHIPA), 2004*, the Canadian Institute for Health Information (CIHI) *Privacy Policy on the Collection, Use, Disclosure and Retention of Personal Health Information and De-identified Data, 2010*, and the *CSA Model Code for the Protection of Personal Information*.

6.1 Accountability

1. The Board of Directors of the RGP is responsible for ensuring that the RGP is in compliance with PHIPA, its regulations and with the privacy and security policies of the RGP.
2. Responsibility for implementing a privacy program is delegated to the Director of Operations of the RGP. The Director of Operations of the RGP is responsible for the day-to-day management of the RGP privacy program to ensure the protection of PHI and the protection of patient privacy rights under PHIPA. The Director of Operations shall implement standard operating procedures (SOPs) to give effect to this policy.
3. All employees and contractors of the RGP are responsible for:
 - a) Understanding and following all privacy and security policies and procedures established by the RGP.

- b) Safeguarding the privacy and confidentiality of PHI collected, used and disclosed in the course of their duties.
- c) Acting in a timely and co-operative manner to prevent, detect and respond to security and privacy breaches or other incidents.
- d) Protecting their passwords and other devices (e.g. keys, access cards, access tokens) that enable access to RGP information assets.

6.2 Identified Purposes

1. The RGP collects, uses and discloses PHI for the following purposes:
 - (a) The provision of healthcare, or assisting with the provision of healthcare, to individuals.
 - (b) Planning, evaluating, monitoring and delivering programs of the RGP and participating organizations.
 - (c) Health research subject to the requirements of PHIPA and its regulation.
 - (d) The provision of summary and statistical reports that do not include PHI, to support the management of the Ontario health care system (including the provision of summary and statistical reports to the RGP's funders).
2. PHI collected by the RGP cannot be used for any other purpose without the written authorization of the RGP.

6.3 Consent

1. The RGP relies on the implied consent of the individual or their substitute decision makers for the collection, use and disclosure of personal health information by participating organizations within the circle of care, unless otherwise directed by the individual or their substitute decision maker.

6.4 Limiting Collection

1. The RGP will collect, directly or indirectly, only that data necessary to satisfy the purposes identified in section 6.2.
2. The RGP will limit collection of personal data to those data which are relevant, necessary and consistent for the purposes for which they are collected, as identified at the time of collection.
3. Data shall be collected by fair and lawful means.

6.5 Limiting Use, Disclosure and Retention

1. RGP will only use, disclose and retain personal health information for purposes consistent with those for which they were originally collected or as permitted or required by law.

6.6 Accuracy

1. RGP shall endeavour to ensure the integrity (quality, accuracy, and reliability) of records under its control, whether in written, electronic, or other form. Questions regarding the accuracy of individual records are to be directed back to the original data collector for resolution.

6.7 Safeguards

1. RGP applies physical, administrative and technical safeguards to protect PHI against loss or theft, or from unauthorized access, disclosure, copying, use, disposal or modification. Refer to the *RGP Information Security Policy* for more information.

6.8 Openness

1. Upon request, RGP will make specific information about its policies and practices relating to its handling of PHI available to stakeholders including patients, families, caregivers and Participating Organizations.

6.9 Individual Access

1. Where PHI is supplied to RGP by participating organizations, requests for individual access and/or correction of PHI will be referred to the original data collector.
2. Where RGP collects PHI directly from individuals, they shall be informed, upon request, of its existence, use, and disclosure and shall be given access to it.
3. In certain situations, RGP may not be able to provide access to all the PHI it holds about an individual. For example,
 - a. RGP may refuse to disclose PHI if the disclosure could reasonably be expected to result in immediate and grave harm to the individual's safety or mental or physical health.
 - b. RGP may refuse to disclose PHI that contains references to other individuals and information subject to solicitor-client privilege.
4. An individual shall be able to challenge the accuracy and completeness of PHI and to have the PHI amended as appropriate.

6.10 Challenging Compliance

An individual shall be able to challenge RGP's compliance with the above principles. Challenges must be submitted in writing to the Director of Operations.

7 Information Privacy Program

RGP shall implement an Information Privacy Program that shall include:

1. Privacy and security training for employees and contractors of the RGP.
2. Ensuring that all agents of the RGP and the Participating Organizations who have access to PHI held by the RGP have signed a confidentiality agreement.
3. A process to receive, investigate and resolve questions or complaints from patients, substitute decision makers and the public.
4. A program to monitor and audit access to records of PHI to detect privacy breaches.
5. Investigation of privacy breaches and recommendations for corrective action to avoid similar breaches in the future.
6. Conducting, or overseeing the development of Privacy Impact Assessments for the RGP Registry System.
7. Development and publication of a Statement of Information Handling Practices for stakeholders and the public.
8. Ensuring that agreements or contracts with third parties who require access to PHI, contain provisions to adequately protect PHI.

8 Violations of this Privacy and Confidentiality Policy

1. Any violation of this Privacy and Confidentiality Policy by an employee of the RGP is subject to disciplinary sanctions as determined by the RGP up to and including dismissal.
2. Any violation of this Privacy and Confidentiality Policy by a supplier, vendor or contractor of the RGP or their respective employees and agents, is subject to remedies identified in the agreement or contract. The RGP may request the removal of a supplier, vendor or contractor employee who has violated this Privacy and Confidentiality Policy.

3. Any violation of this Privacy and Confidentiality Policy by an employee or agent of a Participating Organization is subject to the disciplinary policies and procedures of the Participating Organization. The RGP may suspend individual users of the RGP Registry System until any issues are resolved by the Participating Organization.

9 Policy Administration

This policy will be reviewed on an annual basis by the Director of Operations.

10 Contact

For more information about our privacy protection practices, or to raise a concern you have with our practices, contact us at:

Director of Operations
Regional Geriatric Program of Toronto
2075 Bayview Ave., Room H478
Toronto, On, M4N 3M5
<http://rgp.toronto.on.ca/>
Phone: (416) 480-6100 ext. 3341
Fax: (416) 480-6068
Email: marlene.awad@sunnybrook.ca

Individuals have the right to complain to the Information and Privacy Commissioner of Ontario if they think the RGP has violated their rights. The commissioner can be reached at:

Information and Privacy Commissioner/Ontario
2 Bloor Street East, Suite 1400
Toronto, Ontario M4W 1A8
Canada



RGP REGIONAL GERIATRIC
PROGRAM OF TORONTO

2075 Bayview Avenue, H478, Toronto, ON M4N 3M5 | 416-480-6026 | F: 416-480-6068 | www.rgp.toronto.on.ca

GiiC geriatrics interprofessional
interorganizational collaboration

GEM geriatric emergency
management network

PRCP psychogeriatric resource
consultation program of toronto

sfH senior friendly
hospitals