

MANUAL: Governance	POLICY NUMBER: GOV-1-1601
SECTION 1: Governance Process	APPROVED DATE: Nov 2018
SUBJECT: 1.13 Privacy Statement	REVISION DATE:

PURPOSE:

Seaway Valley Community Health Centre (SVCHC) is a health information custodian and therefore subject to the Personal Health Information Protection Act of Ontario (PHIPA). PHIPA applies to the personal health information of our CHC clients, employees, Board of Directors, volunteers, students and contractors.

POLICY:

As an employer and a community not-for-profit organization, SVCHC collects, uses and discloses personal information of its clients, employees, Board of Directors, volunteers, students and contractors. SVCHC will safeguard all personal health information.

PROCEDURES:

1. SVCHC will comply with the Canadian Standards Association (CSA) Model Code for the Protection of Personal Information (the Model Code) with respect to this personal information.

The Model Code outlines basic guidelines for the protection of personal data. It addresses two main issues:

- How an organization collects, uses, discloses and protects personal information.
- How an individual can access and correct personal information collected by the organization.

Organizations who choose to follow the Model Code demonstrate that they are handling the information they collect fairly. The Model Code offers clients, employees and other data subjects a means for challenging an organization's practices. For additional information on the Model Code see

<https://www.cippguide.org/2010/06/29/csa-model-code/>.

2. The Board is ultimately responsible for compliance with PHIPA and the Model Code. The Board delegates the day-to-day responsibility for compliance to the Executive Director.
3. The Executive Director shall be the Privacy Officer or designate a Privacy Officer to ensure compliance with PHIPA and the Model Code. Refer to the Privacy Officer Job Description at below.
4. The Executive Director shall also ensure SVCHC has an appropriate privacy management plan

which includes a Job description for the Privacy Officer and appropriate privacy procedures to address all elements of PHIPA and the Model Code including:

- Access by individuals to their own personal health information and personal information;
- Process to correct errors in personal health information and personal information;
- Data minimization and ‘need to know’ principles for both personal health information and personal information;
- Procedures for collection, use, disclosure, retention and destruction of personal health information and personal information;
- Breach response protocol, including when notification to either or both the Office of the Information and Privacy Commissioner and/or affected individuals shall occur;
- Transparency to clients and employees of its privacy management program including their right to complain to the Office of the Information and Privacy Commissioner of Ontario if they believe PHIPA has been breached; Ensure individuals are aware that they have the right to file a privacy complaint with the IPC and the aware of the process of how to do so, (1-800-387-0073 or info@ipc.on.ca).
- All employees, Board of Director members, volunteers and students shall sign an Oath of Protection of Privacy;
- Orientation training for new hires and regular in-service training on PHIPA for existing employees, volunteers and, where appropriate contractors;
- Appropriate physical, technological and administrative safeguards to safeguard personal health information and personal information in our custody or under our control.