



ADMINISTRATION

Policy & Procedure

Title	CONFIDENTIALITY	Date Effective	February 18, 2013
Document #	AD-07-10	Date Reviewed	December 11, 2018
Scope	ALL EMPLOYEES, SITES AND FACILITIES	Date Revised	January 7, 2019
Approved By	SENIOR MANAGEMENT TEAM	Signature	<i>Original signed by H. Bryant</i>
Managed By	REGIONAL PRIVACY & ACCESS OFFICER		

1.0 PURPOSE

- 1.1 To respect and protect all confidential information and adopt administrative, technical and physical safeguards to ensure the confidentiality, security, integrity, and availability of this information. Confidentiality of information is governed by provincial and federal law and Northern Health Region (NHR) policy.

2.0 DEFINITIONS

- 2.1 AD-07-10- Appendix A- PHIA Definitions

3.0 POLICY STATEMENT(S)

- 3.1 Personal health information that is collected and maintained in a facility or a portion of a facility designated as a psychiatric facility under [The Mental Health Act](#) is governed by the standards of confidentiality within this Act, which takes precedence over [The Personal Health Information Act \(PHIA\)](#) and [The Freedom of Information and Protection of Privacy Act \(FIPPA\)](#).
- 3.2 Employees are obligated to protect confidential information as outlined below and understand this obligation continues after their employment, contract, association, or appointment with NHR ends.
- 3.2.1 Employees have a legal, professional, and ethical responsibility to protect all confidential information (verbal or recorded in any form) that is obtained, handled, learned, or viewed in the course of their work or association with NHR.
- 3.2.2 Confidential information must be protected and employees are responsible for using safeguards that protect the confidentiality, security, and integrity and availability of this information during its collection, use, disclosure, storage, transmission, transport, and destruction in accordance with applicable legislation and/or NHR policy.
- 3.2.3 When required to discuss confidential information, precautions are used to ensure the conversation is not overheard and is not in the presence of persons not entitled to this information such as in public places (elevators, lobbies, cafeterias, coffee shops, off premises, etc.).
- 3.2.4 Employees are required to use safeguards (i.e. password protection) specific to protecting the confidentiality and security of electronic information (i.e. not sharing passwords), while using Information and Communications Technology department (ICT) resources or accessing ICT services.

- 3.2.5 Accessing, using, disclosing or discussing confidential information is acceptable **only** where required in the performance of one's job duties and responsibilities and is on a "**need to know**" basis and only the minimum amount required. For example: accessing, using, disclosing, or discussing an individual's information should only occur where there is a care relationship with the individual and the information is required for:
- the provision of health care, or
 - to arrange for the provision of health care, or
 - to fulfill administrative responsibilities and duties related to supporting the provision of health care.
- 3.2.6 Employees are not permitted to access confidential information about themselves, their family, friends, or co-workers without following the access to information procedures set out in [AD-07-115 Access to Personal Health Information](#).
- 3.2.7 Employees who, in the performance of their duties, are required to have access to confidential information about family member, friend, or co-worker will:
- Consult with their manager to determine whether another employee member should be assigned, where possible; and
 - Where required and practical, obtain verbal consent from the client prior to fulfilling these duties.
- 3.2.8 All employees, as a condition of employment/ contract/ association/ appointment with NHR, are required to complete the following prior to, or as soon as reasonably possible following, the commencement of their employment or association with NHR:
- PHIA online module through Absorb;
 - Review AD-07-10 Confidentiality;
 - Sign Pledge of Confidentiality Form #: NHR_0196. The pledge must be signed prior to or at the commencement of relationship with NHR and prior to working any shifts.
- 3.2.9 Employees or persons associated with the NHR shall complete the mandatory PHIA online module every three (3) years through Absorb. Managers will be responsible for monitoring that employees have completed the education every year.
- 3.2.10 The Pledge of Confidentiality Form #: NHR_0196 will be signed each time there is a substantial change in an individual's position (i.e. employee moves from a department with little exposure to confidential information to a department that collects or maintains large amounts of confidential information).
- 3.2.11 Employees and persons associated with the NHR may be required to receive additional PHIA education or sign another Pledge of Confidentiality Form #: NHR_0196 at the discretion of the manager and/or Regional Privacy & Access Officer. (i.e. educational purposes).
- 3.2.12 Employees have a duty to report any knowledge of or reasonable belief that a privacy breach has occurred. Reporting and management of privacy breaches is in accordance with AD-07-135 Privacy Breach Management.
- 3.2.13 **Confidentiality Agreements/Contracts**
- All Information Managers are required to enter into and sign an agreement that provides for, among other things, protection of confidential information. The Regional Privacy & Access Officer oversees the execution and maintenance of all Information Manager Agreements.
 - All persons or agencies contracted under a Service Agreement or another Agreement with NHR, where the service would expose them to confidential information, as a condition of acceptance of the agreement, are required to sign an Agreement that provides for, among other things, protection of confidential information.

3.2.14 NON-NHR Representatives

- Non-NHR Representatives attending NHR facilities for business purposes that may be exposed to confidential information (i.e. touring inpatient units, third party vendors/companies, contractors/trades people) will sign an Information and Agreement for Non- NHR Representatives Form #: NHR_0195.
- Contact Regional Privacy & Access Officer for Information and Agreement for Non-NHR Form #: NHR_0195.

3.2.15 Disciplinary Response

Failure to comply with NHR policy that results in a privacy breach involving unauthorized access, collection, use, disclosure, or destruction of confidential information may result in a disciplinary response as follows:

- Disciplinary action up to and including termination of employment, contract, association, or appointment with the Region;
- Imposition of fines pursuant to PHIA in cases where the confidential was personal health information; and
- Report to an associated professional regulatory body.

4.0 PROCEDURE / RESPONSIBILITIES

All employees complete the PHIA training (PHIA online module) and sign the Pledge of Confidentiality Form #: NHR_0196 as follows:

4.1 New Employees and Non-Medical Students

4.1.1 Human Resources, Educators, or Managers will:

- Provide a copy of the AD-07-10 Confidentiality review and signature;
- Arrange for new employees/students to complete the PHIA online module on Absorb as soon as reasonably practicable, but not later than two (2) weeks after commencement of relationship with NHR.
- Human Resources will maintain the signed Pledge of Confidentiality Form #: NHR_0196
- Maintain a record of employee's completion of PHIA online module.
- Human Resources will ensure agency agreements include clauses to ensure the agency established policy and procedures pertaining to the privacy, security, confidentiality, and access to confidential information that extent to, and are adhered to by, all employees, agents or persons associated with the agency.

NOTE: Persons who have attended an orientation session and/or completed PHIA training online in another health region in Manitoba within the past three (3) years may be excused from completing the PHIA online module in Absorb provided that they can produce a certificate of completion showing evidence of same. Review of AD-07-10 Confidentiality and signing of the Pledge of Confidentiality Form #: NHR_0196 are still required.

4.1.2 Medical Director of designated NHR Psychiatric Facility or Unit or designate:

- Ensures that new employees hired to a designated psychiatric facility or unit, or other employees or students who will be providing services in these facilities or units are orientated to [The Mental Health Act](#).

4.2 Medical Staff/ Medical Students/Researchers

4.2.1 Medical Services will :

- Provide a copy of AD-07-10 Confidentiality and the Pledge of Confidentiality Form #: NHR_0196 for medical staff , medical students, or researchers to review and sign;
- Arrange for medical staff to complete the PHIA online module on Absorb as soon as reasonably practicable, but not later than two (2) weeks after commencement of relationship with NHR;
- Arrange for medical students to complete AD-07-10 Appendix B PHIA Self Learning Package and return to the Regional Privacy & Access Officer;
- Arranges for approved researchers (non-NHR) to complete AD-07-10 Appendix B PHIA Self Learning Package at the time of the research approval and return it to the Regional Privacy & Access Officer;
- Maintain the signed Pledge of Confidentiality Form #: NHR_0196 completed by medical staff;
- Forward the Pledge of Confidentiality Form #: NHR_0196 signed by medical students or researchers to the Regional Privacy & Access Officer.

NOTE: Persons who have attended an orientation session and/or completed PHIA training online in another health region in Manitoba within the past three (3) years may be excused from completing the PHIA online module in Absorb provided that they can produce a certificate of completion showing evidence of same. Review of AD-07-10 Confidentiality and signing of the Pledge of Confidentiality Form #: NHR_0196 are still required.

4.3 Volunteers:

4.3.1 Volunteer Services Department will:

- Provide AD-07-10 Appendix B PHIA Self Learning Package, AD-07-10 Confidentiality and the Pledge of Confidentiality Form #: NHR_0196 for review and signature;
- Maintain the signed Pledge of Confidentiality Form #: NHR_0196 ;
- Return AD-07-10 Appendix B PHIA Self Learning Package quiz to the Regional Privacy & Access Officer;
- Maintains a record of volunteer's completed AD-07-10 Appendix B PHIA Self Learning package and the date completed.

4.4.1 Independent Contractors (excluding medical services): Managers will:

- Arrange for contracted providers to complete AD-07-10 Appendix B PHIA Self Learning Package ;
- Provide a copy of AD-07-10 Confidentiality and the Pledge of Confidentiality Form #: NHR_0196 for review and signature;
- Forward the signed Pledge of Confidentiality Form #: NHR_0196 to Human Resources;
- Forward AD-07-10 Appendix B PHIA Self Learning Package quiz to the Regional Privacy & Access Officer

- 4.4.2 Medical Services Independent Contractors or /Locums: Medical Services will:
 - Arrange for contracted providers to complete AD-07-10 Appendix B PHIA Self Learning Package ;
 - Provide a copy of AD-07-10 Confidentiality and the Pledge of Confidentiality Form #: NHR_0196 for review and signature;
 - Forward AD-07-10 Appendix B PHIA Self Learning quiz to the Regional Privacy & Access Officer;
 - Maintain the signed Pledge of Confidentiality Form #: NHR_0196.

- 4.5 Board Members
 - 4.5.1 CEO/Designate will:
 - Make arrangements for board members to complete the PHIA online module on Absorb;
 - Provide a copy of AD-07-10 Confidentiality and the Pledge of Confidentiality Form #: NHR_0196 for review and signature;
 - Maintain the signed Pledge of Confidentiality Form #: NHR_0196.

- 4.6 Non-NHR Representatives i.e. touring inpatient units, third party vendors, companies, contractors, or trades people)
 - 4.6.1 Managers who are meeting with the visitor will:
 - Provide the Information and Agreement for Non-NHR Representatives Form #: NHR_0195 for the visitors review and signature;
 - Forward the signed form to the Regional Privacy & Access Officer.

- 4.7 Contracts and Agreements
 - 4.7.1 Managers ensure all service contracts/agreements where the service provided would expose them to confidential information include, at minimum, a standard confidentiality clause related to protecting confidential information.
 - 4.7.2 Where the program or facility will be entering into a contract for information management services, managers will contact the Regional Privacy & Access Officer to arrange for the administration of an Information Manager's Agreement.

- 4.8 Regional Privacy & Access Officer
 - 4.8.1 Oversees the development, implementation, and maintenance of Confidentiality and PHIA training;
 - 4.8.2 Oversees the administration of Information Manager Agreements and other Information Sharing Agreements.

- 4.9 Refresher Training
 - 4.9.1 Every three (3) years, or sooner as deemed necessary, managers ensure that employees:
 - Complete PHIA online module on Absorb

Confidentiality	Date Revised January 7, 2019	Document No. AD-07-10	Page 6 of 6
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5.0 RELATED DOCUMENTS

- 5.1 AD-07-10 Appendix A: PHIA Definitions
- 5.3 AD-07-10 Information and Agreement for Non-NHR Representatives Form #: NHR_0195
- 5.4 AD-07-10 PHIA Self Learning Package
- 5.5 AD-07-10 Pledge of Confidentiality Form #: NHR_0196

6.0 REFERENCES

- 6.1 Manitoba Government. (1997). *The Personal Health Information Act.C.C.S.M.c.P33.5*
Retrieved from <http://web2.gov.mb.ca/laws/statutes/ccsm/p033-5e.php>
- 6.2 Manitoba Government. (1998). *The Mental Health Act.C.C.S.M.c.M110*
Retrieved from <https://web2.gov.mb.ca/laws/statutes/ccsm/m110e.php>
- 6.3 Manitoba Government. (1997). *The Freedom of Information and Protection of Privacy Act. C.C.S.M.c.F175*
Retrieved from <http://web2.gov.mb.ca/laws/statutes/ccsm/f175e.php>
- 6.4 Northern Health Region. (2018). AD-07-115 Access to Personal Health Information
- 6.5 Northern Health Region.(2018).HR-01-175 Student Placement/Work Experience
- 6.6 Northern Health Region. (2018). AD-07-135 Privacy Breach Management
- 6.7 Northern Health Region PHIA online Absorb
- 6.8 Prairie Mountain Health.(2016). PPG-00179. Confidentiality
- 6.9 Southern Health Santé - Sud. (2016). ORG.1411.PL.201. Confidentiality of Personal Health Information.

7.0 REVISION & REVIEW DATE(S)

Revised (R) December 27, 2018
reviewed (r) December 11, 2018