

Privacy Training



Welcome

Welcome

- This module will take approximately 20 minutes to complete.
- Please read each page carefully and follow any instructions then click the 'next' button to move forward.
- This module contains audio, adjust your volume accordingly or wear headphones if available.
- To view the audio script for each page, click on 'Notes' on the top right of the player.
- The menu is available on the left of the screen for you to monitor your progress through the module.

Click on the audio icon to test your sound



Course Objectives

Objectives

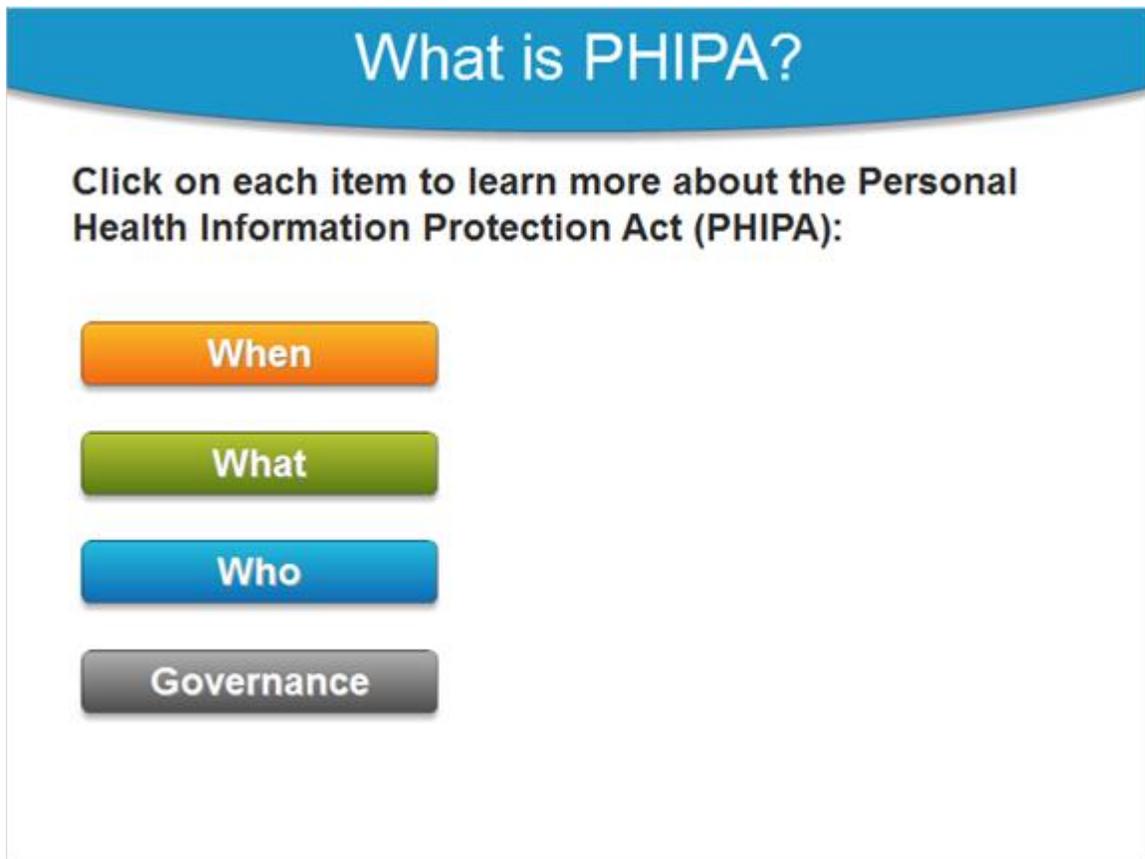
Upon completion of this course, you will:

- Know how PHIPA and PHI are defined.
- Understand the Circle of Care and Consent Directive
- Know what the Hospital is doing to prevent unauthorized access of PHI
- Obtain a greater awareness of consequences to privacy breaches
- Identify your role in safeguarding PHI and how to prevent breaches

Privacy



What is PHIPA?



What is PHIPA?

Click on each item to learn more about the Personal Health Information Protection Act (PHIPA):

- When**
- What**
- Who**
- Governance**

The following 4 slides will describe the 'When', 'What', 'Who' and 'Governance' of PHIPA in more detail.

What is PHIPA?

Click on each item to learn more about the Personal Health Information Protection Act (PHIPA):

When

What

Who

Governance

When

PHIPA came into effect in Ontario on November 1st, 2004 and sets out the rules for collection, use and disclosure of Personal Health Information (PHI).

All provinces have their own equivalent PHI act.

What is PHIPA?

Click on each item to learn more about the Personal Health Information Protection Act (PHIPA):

When

What

Who

Governance

What

PHIPA governs the collection, use, disclosure and disposal of PHI by 'Health Information Custodians' (HICs) and their 'agents'.

What is PHIPA?

Click on each item to learn more about the Personal Health Information Protection Act (PHIPA):

When

What

Who

Governance

WHO

PHIPA applies to 'Health Information Custodians' (HICs) and 'agents' (Physicians, Nurses, etc.) who collect, use and disclose PHI for or on behalf of HICs.

What is PHIPA?

Click on each item to learn more about the Personal Health Information Protection Act (PHIPA):

When

What

Who

Governance

Governance

The governing body for the PHIPA is the 'Information and Privacy Commissioner' (IPC) of Ontario.

What is PHI?

What is PHI?

What is Personal Health Information (PHI)?

PHI is **identifying information** collected about an individual, whether oral or recorded.

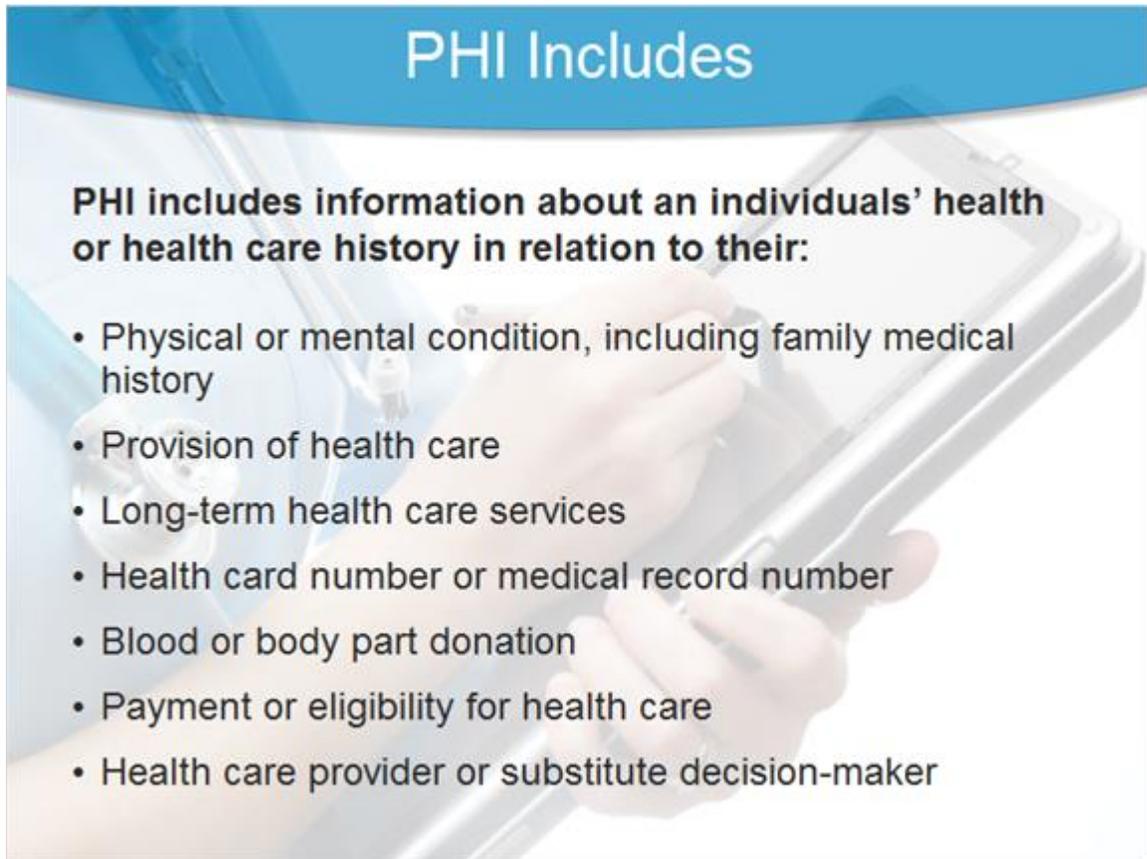
Identifying Information:

Information that identifies an individual either alone or combined with other information.

Sensitive Information:

PHI is among the most sensitive types of information, and HIPAA requires that HICs and their agents treat it as confidential and keep it secure.

PHI Includes

A hand is shown holding a tablet computer. The tablet screen displays a blue header with the text "PHI Includes". Below the header, there is a bolded text: "PHI includes information about an individuals' health or health care history in relation to their:". Underneath this, there is a bulleted list of seven items. The background of the slide is a light blue and white gradient with a faint image of a hand holding a tablet.

PHI Includes

PHI includes information about an individuals' health or health care history in relation to their:

- Physical or mental condition, including family medical history
- Provision of health care
- Long-term health care services
- Health card number or medical record number
- Blood or body part donation
- Payment or eligibility for health care
- Health care provider or substitute decision-maker

PHI does not include

PHI does not include

PHI does not include:

Identifying information about an employee, agent or HIC (Health Information Custodian) that is not maintained for the provision of health care.

Circle of Care

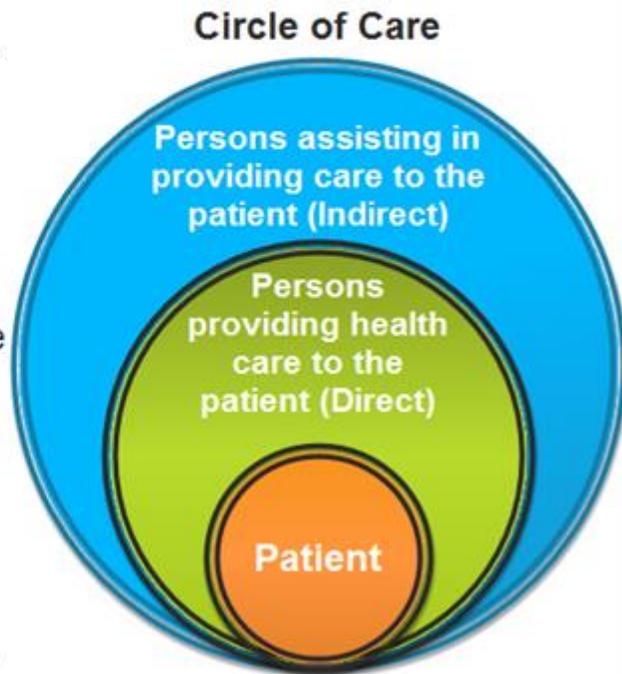
Circle of Care

PHI must only be accessed by individuals in the patients' circle of care for **Authorized Purposes**.

Circle of Care:

Refers to those members of the health care team who are involved in the care or treatment of the patient.

Please stop and think before accessing any patients' PHI to make sure your access is appropriate.



Circle of Care Details

The Circle of Care includes:

- The attending physician and the health care team such as; the residents, nurses, other allied health professionals, technicians and support staff assigned to the patient.

Circle of Care implied consent:

- Members of a patients' circle of care can imply consent or assume they have the patient's implied consent to collect, use and disclose the patient's PHI for that care (unless the patient expressly withholds or withdraws this consent).

Consent Directive

- HIPAA provides direction to hospitals concerning collection, use and sharing of PHI.
- The Hospital may collect, use and give out PHI to others as reasonably necessary for the provision of care or as required by law.
- Patients have the right to refuse to allow their PHI to be shared even within the circle of care. This is called consent directive.

What is Unauthorized Access?

What is Unauthorized Access?

Unauthorized Access Includes:

- Looking at PHI where you are not required to do so. For example, because you are curious about a particular patient.
- Accessing information about yourself or snooping into records of family, friends, colleagues, neighbours or prominent people to whom you are not providing care.

Any unauthorized access to PHI is not permitted by PHIPA and carries serious consequences!

Click on the buttons below to view privacy in the media detailing hospital privacy breaches.

[IPC News Release](#) [The Toronto Star Article](#)

The following 6 pages contain 2 news articles pertaining to PHIPA in the news.

Article 1:

Health Record Snooping Case Prosecuted in Goderich

Mar 16 2017

**Published by: The Office of the Information and Privacy
Commissioner (IPC) - www.ipc.on.ca**

TORONTO, ON, (March 16, 2017) – A Masters of Social Work student who was on an educational placement with a family health team in Central Huron, has been ordered to pay a \$20,000 fine and a \$5,000 victim surcharge for accessing personal health information without authorization. This is the highest fine to date for a health privacy breach in Canada. The student pled guilty to willfully accessing the personal health information of five individuals. As part of her plea, she agreed that she accessed the personal health information of 139 individuals without authorization between September 9, 2014 and March 5, 2015.

In March 2015, the IPC was advised that the individual was found to have been illegally accessing the records of family, friends, local politicians, staff of the clinic and other individuals in the community. Following an investigation, we referred the matter to the Attorney General of Ontario for prosecution.

This is the fourth person convicted under the Personal Health Information Protection Act (PHIPA). Previous convictions include two radiation therapists at the University Health Network and a registration clerk at a regional hospital.

“Health care professionals need to know that this kind of behaviour, whether it’s snooping out of curiosity or for personal gain, is completely unacceptable and has serious consequences. This judgement sends a message through Ontario’s health care system that unauthorized access will not be tolerated. Further, there is an obligation to ensure that proper safeguards are in

place to prevent this kind of activity. Patient privacy is vital if Ontarians are to have confidence in their health care system.”

– Brian Beamish, Commissioner

In delivering her reasons for sentence, the Justice of the Peace stated that:

“Overall, the victim impact statements reveal a lack of trust and a sense of reluctance to share information with future health care providers. I believe this is a truly significant factor, given that we all must believe that when we go to the doctor for our physical illnesses and our mental health illnesses, that we will be able to trust our own health care practitioners and their team and that what we tell them will be respected and held in confidence so we receive the treatment and care we deserve.”

Additional Resources

- [Report a health privacy breach](#)
- [Learn about health privacy rights](#)
- [Find information on Unauthorized Access](#)

Media inquiries:

416-326-3965

media@ipc.on.ca

Thanks to the IPC.

Hospital workers convicted for snooping into Rob Ford's personal health files

Pair at Princess Margaret Cancer Centre, who pleaded guilty, are the first ever convicted under Ontario's health privacy act.

Two health-care workers who improperly looked at Rob Ford's records while we was being treated at Princess Margaret Cancer Care Centre have been convicted under Ontario's health-care privacy law. (Dan Jacobs / AP)

By **MAY WARREN** Staff Reporter
Fri., May 6, 2016

Two health workers who snooped into late mayor Rob Ford's electronic health records have become the first in Ontario to be convicted under the province's health privacy law, the Star has learned.

Mohammad Rahman, of Toronto, and Debbie Davison, of Pickering, both pleaded guilty under the Personal Health Information Protection Act (PHIPA) to "willfully collecting, using or disclosing personal health information," while working at the University Health Network (UHN) Princess Margaret Cancer Centre in January 2015.

Each was fined \$2,505, according to court records.

Multiple attempts by the Star to contact Davison, Rahman and their lawyers by phone, email and social media for comment were unsuccessful.

There is no evidence they used the information for anything or shared it with anyone. But under the act, looking at even a single health-care record of a patient not under one's care is a crime.

Their convictions come as changes to Ontario's health privacy act, passed in the legislature Thursday, make it easier to prosecute these types of cases and mandatory for hospitals to report privacy breaches to the information and privacy commissioner.

The new legislation comes on the heels of a series of Star investigations in 2015 that drew attention to a high number of unreported health privacy breaches and the absence of convictions under the act.

UHN spokesperson Gillian Howard said she could not discuss the individuals in question due to privacy concerns. It's not clear whether the two are still employed at Princess Margaret or faced internal discipline after the privacy breach, which took place as Ford was being treated for cancer.

In January 2015, "a high profile" patient was scheduled to begin receiving radiation treatment at Princess Margaret, an agreed statement of facts for Davison obtained by the Star shows.

According to the document, the 57-year-old radiation therapist "was curious and wanted to make sure that the patient was cared for and everything was 'okay,'" especially given the media storm the patient had provoked when visiting nearby Mount Sinai Hospital.

As a senior member of the unit, "she felt responsibility to ensure" the patient was being properly cared for. But she was not part of his "circle of care" when she looked at his electronic chart at two points on Jan. 5, 2015, for less than two minutes in total.

The Star was not able to obtain an agreed statement of facts providing similar details about Rahman's case. Rahman is named as a co-author on [an article in the International Journal of Radiation Oncology](#), which states that he was affiliated with the radiation medicine program at UHN and holds a bachelor of science degree.

Ann Cavoukian, executive director of the Privacy and Big Data Institute at Ryerson University, called the two convictions "long

overdue,” and said the ruling will act as a warning to other health-care workers. “They broke the law. If there aren’t consequences, then what’s to prevent others from doing it?” she said.

People may think looking at private records is “just snooping” and “no big deal,” said Cavoukian, Ontario’s former information and privacy commissioner.

“But it is a big deal when it’s people’s sensitive health information.”

She said she hopes the high-profile nature of the case does not send a message that “we only explore these matters legally when it involves VIPs, or high-profile individuals. Everyone’s privacy matters.”

The bill amending PHIPA, which passed Thursday, makes reporting breaches to the information commissioner and regulatory colleges mandatory, increases the range of fines and scraps the six-month time limit for beginning a prosecution. Cavoukian applauds these changes and said the mandatory notifications will also be a deterrent to hospitals tempted to overlook breaches.

UHN spokesperson Gillian Howard said all employees sign a confidentiality letter when they join the organization and each year they get a refresher course on privacy. The hospital also does random audits of electronic health record access. “We really raise the issue with the whole organization; it’s something that everybody needs to be reminded of,” said Howard.

A spokesperson for the Information and Privacy Commissioner, whose office was notified of the breach by UHN in February 2015, said the commissioner has referred a total of six people on five occasions to the Ministry of the Attorney General for prosecution under PHIPA.

Other health-care workers whose professional regulatory body found they had committed professional misconduct by snooping into hundreds and even thousands of patient files have not been convicted under the act.

So far there have been four completed prosecutions under PHIPA, including the two that resulted in convictions and one that was withdrawn, according to an emailed statement by the Ministry of Health and Long Term Care.

The other was North Bay nurse Melissa McLellan, the first person ever charged under the act. Her charges were stayed by a judge in January 2015, effectively dismissing the case, but she was found to have committed professional misconduct by the College of Nurses of Ontario after snooping into nearly 6,000 patient files.

The College of Nurses of Ontario's disciplinary panel also recently found registered nurse Mandy Edgerton had committed professional misconduct by looking at nearly 300 patient records at a Peterborough hospital over two years. Edgerton was not charged.

In an interview, Information and Privacy Commissioner Brian Beamish said snooping is a persistent issue, but changes to the act should be a "significant step" towards prosecuting the most serious cases.

"The electronic files can contain really sensitive information, and I know the people that have had this happen, many of them feel very violated by it," he said, speaking generally.

"It's not always just a stranger who's looking in these files; it could be a neighbour, it could be an ex. It could be someone who knows who you are and is looking at your health records."

With files from Olivia Carville

Thanks to the Toronto Star

Preventing Unauthorized Access

Preventing Unauthorized Access

The Hospital takes reasonable precautions to safeguard PHI in its custody or control by:

- Protecting against theft, loss and unauthorized access
- Protecting against unauthorized copying, modification, or disposal
- Retaining, transferring and disposing of information in a secure manner
- Ongoing training and education to ensure staff is up-to-date on Hospital privacy practices

[Click here to view specific safeguards](#)

The following slide details the specific safeguards.

Preventing Unauthorized Access

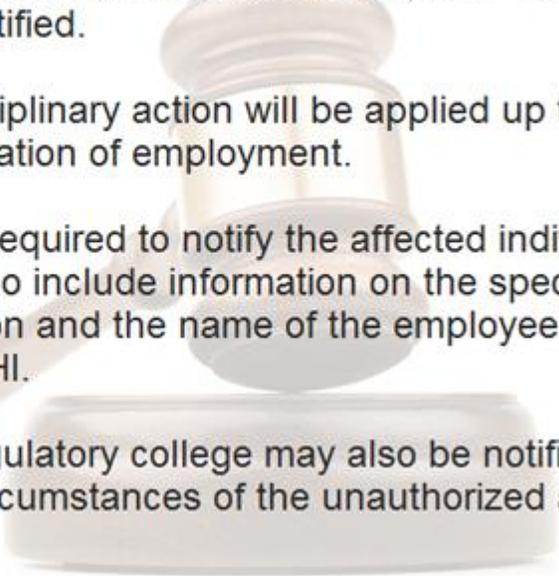
T
in

Specific safeguards include:

- Enforces access controls (i.e. username/password) to limit access to electronic systems
- Has **ZERO** tolerance on breach of confidentiality or inappropriate patient information access
- Electronic systems track and record user access to records and provide the ability to audit access

Implications of Unauthorized Access

Implications of Unauthorized Access

- When unauthorized access is confirmed, the Privacy Office will be notified.
 - Appropriate disciplinary action will be applied up to and including termination of employment.
 - The Hospital is required to notify the affected individual, and this may also include information on the specific disciplinary action and the name of the employee who accessed the PHI.
 - The IPC and regulatory college may also be notified based on the circumstances of the unauthorized access.
- 

Disciplinary Action

Disciplinary Action

If you are found to have breached PHIPA, these serious consequences can apply:

- Loss of job/career
- Loss of reputation and trust
- College disciplinary action
- Payment of costly fines, including lawyer/court costs
- Civil lawsuits
- Criminal charges
- Embarrassment and media attention

A conviction under PHIPA could result in a fine up to \$100,000 (individual) and \$500,000 (organization).

Accessing Personal Records

Accessing Personal Records

As an employee, if you wish to access your own health record, you need to complete a **Request to Access Personal Health Information** form and submit it to the Health Records Department at the site which you were treated (i.e. Centenary, General or Birchmount).

Employees should not be accessing their own records without following the proper process outlined above.

Accessing your own records is a breach of policy.

Accessing Family Records

Accessing Family Records

Employees who wish to access records of a family member need to have that family member complete a **Consent to Disclose Personal Health Information** and forward the form to the Health Records Department at the site where he/she is being treated (i.e. Centenary, General or Birchmount).

Employees should not be accessing records for family members without proper authorization and by following the process outlined above.

Your Role in Prevention

Your Role in Prevention

Ensure you are aware of the Hospitals' and your obligations under PHIPA:

- Review the privacy policies
- Sign the statement of confidentiality
- Complete the Privacy training E-Learning module annually
- Store PHI in a secure location and dispose in a shredder or confidential waste bin when no longer required
- Use encrypted portable devices when transporting PHI
- Pick-up PHI documents from the FAX or printer immediately
- Do not discuss confidential matters in public spaces
- Lock your computer when not in use, or log out of applications on a shared computer
- Never share your password with anyone
- Report privacy breaches to the Privacy Office

Summary

Summary

When it comes to Privacy and PHIPA:

- PHI is to be kept confidential, safe and secure.
- Only access the PHI if you are in a patient's circle of care.
- Contact the Privacy Office if you suspect someone has accessed PHI without authorization.
- Snooping is 100% unacceptable.
- There are serious consequences for unauthorized access of PHI.