



TO: Chair and Members of the Governance Committee

FROM: Emily Williams, CEO; Dr. Alexander Summers, Acting Medical Officer of Health

DATE: 2022 February 17

ANNUAL PRIVACY PROGRAM UPDATE

Recommendation

It is recommended that the Governance Committee recommend that the Board of Health receive Report No. 03-22GC re: “Annual Privacy Program Update” for information.

Key Points

- The Middlesex-London Health Unit (MLHU) has obligations under provincial privacy legislation to ensure the rights of individuals with respect to privacy, access and correction of records of their personal information and personal health information, as well as the right to access general records that pertain to MLHU operations and governance.
- MLHU’s Privacy Program supports compliance with these obligations through education, policy and procedure development, assessment and management of privacy risks, facilitation of access and correction requests, and management of potential and actual breaches that may occur.
- MLHU completes annual statistical reporting to the Information and Privacy Commissioner of Ontario in accordance with requirements set out in the *Personal Health Information Protection Act (PHIPA)*, *O. Reg. 329/04* and the *Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)*.

Background

MLHU is a ‘health information custodian (HIC)’ in accordance with section 3 of the *Personal Health Information Protection Act (PHIPA)*, and an ‘institution’ in accordance with section 2 of the *Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)*. Under these legislation MLHU and the Middlesex-London Board of Health have obligations to ensure the rights of individuals with respect to privacy, access and correction of records of their personal information and personal health information, and access to general records that pertain to MLHU operations and governance.

MLHU Privacy Program

In accordance with [Policy G-100 Privacy and Freedom of Information](#), the Medical Officer of Health (MOH) and Chief Executive Officer (CEO) have the delegated duties and powers of the head with respect to freedom of information and protection of individual privacy under MFIPPA. The MOH serves as the health information custodian (HIC) for the purposes of PHIPA (s. 3 (1)). Together, the MOH and CEO have the responsibility to maintain information systems and implement policies/procedures for privacy and security, data collection, and records management.

The day-to-day administration and management of MLHU’s privacy program is operationalized by MLHU’s Privacy Officer, and includes the following components:

- Education
- Policy development
- Privacy impact assessment and consultation
- Response to access and correction requests under PHIPA and MFIPPA

- Breach and complaint management

MLHU's Privacy Program is continually evolving in response to internal and external drivers, including, but not limited to, new legislation/regulations and case law, orders issued by the provincial and federal Privacy Commissioners, new technology, emerging best practices, and increasing awareness and expectations by the public with respect to privacy and access.

Successes over the past year include:

- MLHU staff are compliant in completing the annual online privacy education module implemented in 2021 to increase awareness and compliance with legislative requirements;
- Alignment of Privacy and Risk Management with the Strategy portfolio to support a consistent approach to effective, open and supportive systems of governance and management;
- Further assessment and mitigation of risks associated with new technologies and processes that support online collaboration and communication/information sharing among MLHU staff and with clients and external partners; and
- Completion of all formal written requests for access to records of personal information or personal health information or general records within the statutory time limits.

MLHU experienced a total of six (6) health information privacy breach incidents in 2021, none of which met the threshold for notification to the Information and Privacy Commissioner/Ontario (IPC). Corrective actions were taken following each incident to comply with legislative requirements under PHIPA and MFIPPA.

Provincial Oversight

MLHU is required to submit annual statistical reports to the IPC with respect to:

- Confirmed privacy breaches under PHIPA (attached as [Appendix A](#));
- Access and correction requests under PHIPA (attached as [Appendix B](#)); and
- Access and correction requests under MFIPPA (attached as [Appendix C](#)).

All of these reports were submitted to the IPC within the required timelines.

This report was prepared by the Manager, Strategy, Risk and Privacy, Healthy Organization Division.



Alexander Summers, MD, MPH, CCFP, FRCPC
Acting Medical Officer of Health



Emily Williams, BScN, RN, MBA, CHE
Chief Executive Officer