



TO: Chair and Members of the Governance Committee

FROM: Christopher Mackie, Medical Officer of Health
Michael Clarke, CEO (Interim)

DATE: 2021 February 18

ANNUAL REPORT ON PRIVACY PROGRAM

Recommendation

It is recommended that the Governance Committee receive Report No. 04-21GC re: “Annual Report on Privacy Program” 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 policy and procedure development, education, assessment and mitigation of privacy risks, facilitation of access and correction requests, and management of breaches and complaints.
- 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 this 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 are responsible 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:

- Policy and procedure development
- Education
- 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, decisions and orders issued by 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:

- Implementation of a new annual online privacy education module for MLHU staff to increase awareness and compliance with legislative requirements;
- Privacy impact assessment and risk mitigation to support implementation of new technologies, processes and agreements in response to information sharing and collaboration requirements created by the pandemic (e.g., rapid deployment of remote teams, data sharing agreements with external partners, secure web-based transmission of COVID-19 test results, adoption of provincial COVID-19 case and contact management solution); 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, despite the operational impacts of the pandemic. In addition to responding to formal written requests, MLHU responded to a high volume of requests for COVID-19 test results and epidemiological data pertaining to COVID-19.

MLHU experienced a total of five privacy breaches in 2020, including one that met the threshold for notification of the Information and Privacy Commissioner/Ontario (IPC). MLHU worked closely with the IPC to address the breach (the "50 King St. Breach") and ensure that the necessary steps were taken to comply with PHIPA and MFIPPA. The IPC closed its file on January 15, 2021, indicating that their office was satisfied with the actions taken by MLHU and no orders were issued. (Refer to [Appendix A](#) for summary data for all breaches that occurred in 2020.)

Priorities for the coming year include 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.

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 Healthy Organization Division.



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Medical Officer of Health



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