



TO: Chair and Members of the Governance Committee

FROM: Christopher Mackie, Medical Officer of Health / Chief Executive Officer

DATE: 2019 June 20

ANNUAL PRIVACY PROGRAM UPDATE

Recommendation

It is recommended that the Governance Committee receive Report No. 008-19GC re: “Annual Privacy Program Update” for information.

Key Points

- The Middlesex-London Health Unit is obligated under provincial privacy legislation to ensure the rights of individuals with respect to privacy; access to 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’s Privacy Program supports compliance with these obligations through education and training, 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.
- The development and implementation of enhanced privacy and information security policies and procedures are priorities for the year ahead to support implementation of MLHU’s electronic client record (ECR) system and the eHealth ClinicalConnect viewer.

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 provincial privacy legislations, MLHU and the Middlesex-London Board of Health are obligated to ensure: the rights of individuals with respect to privacy; access to 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/Chief Executive Officer (MOH/CEO) has the delegated duties and powers of the head with respect to freedom of information and protection of individual privacy under MFIPPA; and is responsible for maintaining information systems and implementing policies/procedures for privacy and security, data collection, and records management, as the designated HIC under PHIPA.

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 and training
- 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 technologies, emerging best practices, and increasing public awareness and expectations with respect to privacy and access.

Key areas of focus and success over the past year include:

- Development of an online privacy education module for MLHU staff to support understanding of and compliance with legislative and ethical obligations;
- Updating of MLHU's public statement regarding its privacy practices;
- Privacy impact assessment and consultation to balance legislative requirements with the evolving needs and expectations of our clients and the implementation of new technologies;
- Policy development to provide clear direction with respect to Board of Health and MOH/CEO accountability;
- Progress toward becoming a partner organization with eHealth Ontario's ClinicalConnect, a web-based portal that provides health care providers with real-time access to their patients' electronic medical information from other participating regional and provincial organizations; and
- Processing of access requests (e.g., freedom of information) for personal health information and general records kept by MLHU, including collaboration with the Information and Privacy Commissioner of Ontario (IPC) to resolve complex requests.

Provincial Oversight

MLHU is required to submit annual statistical reports to the IPC with respect to: 1) confirmed privacy breaches under PHIPA ([Appendix A](#)), 2) access and correction requests under PHIPA ([Appendix B](#)), and 3) access and correction requests under MFIPPA ([Appendix C](#)). All of these reports were submitted to the IPC within the required timelines.

Next Steps

As MLHU undertakes implementation of an electronic client record (ECR) system and ClinicalConnect, development and implementation of enhanced privacy and information security policies and procedures, including an electronic health record auditing/monitoring program, are priorities for the year ahead.

This report was prepared by the Privacy, Risk and Governance Team, Healthy Organization Division.



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