



TO: Chair and Members of the Governance Committee

FROM: Christopher Mackie, Medical Officer of Health/CEO

DATE: 2020 February 27

ANNUAL PRIVACY PROGRAM UPDATE

Recommendation

It is recommended that the Governance Committee receive Report No. 005-20GC re: “Annual Privacy Program Update” for information.

Key Points

- Under provincial privacy legislation, the Health Unit is obliged to ensure the rights of individuals with respect to privacy, access to, 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 (IPC) in accordance with the 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 classified as a “health information custodian” (HIC) under section 3 of PHIPA, and an “institution” under section 2 of 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 to, 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 Privacy Program

In accordance with Policy G-100 Privacy and Freedom of Information, the MOH/CEO is the responsible party with respect to freedom of information and protection of individual privacy under MFIPPA. As the designated HIC under PHIPA, the MOH/CEO is specifically responsible for maintaining information systems and implementing policies/procedures for privacy and security, data collection, and records management.

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 technologies, emerging best practices, and increased awareness and expectations on the part of the public with respect to privacy and access.

Key areas of focus and successes of 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;
- 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 for staff with respect to access, privacy, and information security; and
- Processing of access requests for personal health information and Health Unit general records (freedom of information), including collaboration with the 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 (attached as [Appendix A](#)), 2) access and correction requests under PHIPA (attached as [Appendix B](#)), and 3) access and correction requests under MFIPPA (attached as [Appendix C](#)). All of these reports were submitted to the IPC within the required timelines.

As per the appended reports, MLHU was in compliance with all legislative requirements pertaining to access and correction requests, and had no breaches under PHIPA in 2019.

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



Christopher Mackie, MD, MHSc, CCFP, FRCPC
Medical Officer of Health / CEO