

Policy and Procedure

Title:	Privacy Officer
Policy Number:	06.005
Effective Date:	April 22, 1999
Revised Date:	October 20, 2014
Approving Body:	President and CEO
Authority:	CancerCare Manitoba Act
Responsible Officer:	President and CEO
Delegate:	
Contact:	CCMB Privacy Officer
Applicable to:	CCMB Staff and Physicians

1.0 **BACKGROUND:**

Not Applicable

2.0 **PURPOSE:**

2.1 To ensure that CancerCare Manitoba appoints a Personal Health Information (PHI) Privacy Officer to facilitate compliance with the *Personal Health Information Act* of Manitoba within CancerCare Manitoba.

3.0 **DEFINITIONS:**

Not Applicable

4.0 **POLICY:**

4.1 CancerCare Manitoba shall designate a PHI Privacy Officer, as well as an alternate, whose responsibilities include:

4.1.1 Encourage compliance to the *Personal Health Information Act* of Manitoba.

4.1.2 Respond to requests from individuals for access to and correction of personal health information.

4.1.3 Ensuring orientation and ongoing training is in place for employees and agents in terms of CancerCare Manitoba's policies and procedures concerning the *Personal Health Information Act*.

4.1.4 Ensuring that CancerCare Manitoba conducts an audit of its security safeguards at least every two years.

4.1.5 Works with the CCMB Leadership Team/Executive Office during an investigation of a privacy matter.

4.1.6 Ensures privacy policy and procedures are up-to-date and accurate.

4.1.7 Responds to Ethics/Conduct confidentiality events in the Incident

CANCERCARE MANITOBA GOVERNING DOCUMENTS Policy and Procedure
Title: Privacy Officer
Page: 2 of 3

Reporting System as required.

- 4.1.8 Provides an annual report/summary to the Vice President and Chief Officer, Patient Services of PHIA related events, breaches.

5.0 **PROCEDURE:**

- 5.1 The Chief Executive Officer will designate the position of PHI privacy officer and alternate. Generally, this will be the Director of Health Records and a member of the Health Records Department.
- 5.2 The PHI Privacy Officer (or designate) will:
 - 5.2.1 Respond to requests from individuals for access to and correction of personal health information.
 - 5.2.2 Conduct a periodic audit to ensure compliance with the *Personal Health Information Act*.
 - 5.2.3 Work with the appropriate CancerCare Manitoba departments to conduct an audit of security safeguards at least every two years.
 - 5.2.4 Initiate steps to correct deficiencies identified in an audit.
 - 5.2.5 Work with Human Resources/Managers/Supervisors to ensure provision of orientation and ongoing training for employees and agents.
 - 5.2.6 Provide assistance of any investigations from the Ombudsman's Office.
 - 5.2.7 Work with Executive Leadership, if requested, to develop a written response to an Ombudsman report.
 - 5.2.8 Receive Incident Reporting System events related to Ethics/Conduct confidentiality events to:
 - 5.2.8.1 Review and make recommendations to prevent future events.
 - 5.2.8.2 Route the event to the Manager/Supervisor for resolution/action.
 - 5.2.9 Provide an annual report/summary to the Vice President and Chief Officer, Patient Services of PHIA related events, breaches.

6.0 **REFERENCES:**

- 6.1 *The Personal Health Information Act* of Manitoba, Section 57.
- 6.2 Access and Privacy Service Alberta – resource document.

CANCERCARE MANITOBA GOVERNING DOCUMENTS
Policy and Procedure

Title: **Privacy Officer**

Page: 3 of 3

Policy Contact:

All enquiries relating to this policy should be directed to:

Name:	Venetia Bourrier
Title/Position:	Director, Health Information Services and Privacy Officer
Phone:	204-787-2158
E-mail:	vbourrier@cancercare.mb.ca
Address: (if required):	

DOCUMENTATION

Policy Location:

This policy is located (hard and e-copy formats):

- | | |
|----|--|
| 1. | The original signed and approved policy is on file in the Executive Office, CCMB |
| 2. | The e-copy is on file in the CCMB Governing Documents Library, SharePoint |
| 3. | |

Revision History:

Date	Version	Status	Author	Summary of Changes
dd/mm/yyyy	#	Initial, Draft Final Minor/Major revision		
22/04/1999	1			
25/01/2011	2	Minor Revision	L Costa	
20/10/2014	3	Minor Revision	L Costa Policy Team	Minor revisions only.
29/03/2018	3	Minor revision	S.Friedenberger	Reformatted to new template

Approvals Record:

This Policy requires approval by:

Approval	Date	Name / Title	Signature
		Not required.	

FINAL APPROVAL:

Date	Name / Title	Signature
09/01/2015	Dr. S. Navaratnam President and CEO, CCMB	<i>Original signed by Dr. S. Navaratnam</i>