

Policy and Procedure

Title:	Transmittal of Personal Health Information Via Facsimile (“Fax”)
Policy Number:	06.021
Effective Date:	October 21, 2011
Revised Date:	July 8, 2014
Approving Body:	President and CEO
Authority:	CancerCare Manitoba Act
Responsible Officer:	President and CEO
Delegate:	
Contact:	Health Information Services and CCMB Privacy Officer
Applicable to:	CCMB Staff and Physicians

1.0 **BACKGROUND:**
Not Applicable

2.0 **PURPOSE:**

- 2.1 To ensure that the Trustee protects Personal Health Information transmitted by facsimile (Fax) whether manual or auto faxed in accordance with *The Personal Health Information Act* (“PHIA”).
- 2.2 To provide Personal Health Information required for Health Care to and within Health Care Facilities in an effective and timely manner.

3.0 **DEFINITIONS:**

- 3.1 **Access:** The right of an Individual or a Person Permitted to Exercise the Rights of an Individual, to examine (view) and receive a copy of the Individual’s Personal Health Information Maintained by the Trustee.
- 3.2 **Confidentiality:** The obligation of a Trustee to protect the Personal Health Information entrusted to it, to maintain the secrecy of the information and not misuse or wrongfully Disclose it.
- 3.3 **Demographic Information:** An Individual’s name, address, telephone number, and email address.
- 3.4 **Disclosure of Personal Health Information:** Revealing the Personal Health Information outside the Trustee, i.e. to other Trustees, to family and friends of the Individual, or to other persons legally entitled to have Personal Health Information released to them.
- 3.5 **Health Care:** Any care, service or procedure provided to diagnose, treat or maintain an Individual’s health; provided to prevent disease or injury or promote Health Care; or that affects the structure or a function of the body and includes the sale or dispensing of a drug, device, equipment or other item pursuant to a prescription.
- 3.6 **Health Care Facility:** A hospital, personal care home, Psychiatric Facility, medical

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clinic, laboratory, CancerCare Manitoba and community health centre or other facility in which Health Care is provided and that is designated in the PHIA regulation.

3.9 **Individual:** A patient, client or resident receiving Health Care services within a CancerCare Manitoba facility. For the purpose of Access, Correction, Use and Disclosure of Personal Health Information includes Persons Permitted to Exercise the Rights of an Individual.

3.10 **Integrity of Personal Health Information:** The preservation of its content throughout storage, use, transfer and retrieval so that there is confidence that the information has not been tampered with or modified other than as authorized.

3.11 **Maintain:** In relation to Personal Health Information, to have custody or control of the information.

3.12 **Personal Health Information:** Recorded Information about an identifiable Individual that relates to:

- The Individual's health, or Health Care history, including genetic information about the Individual;
- The provision of Health Care to the Individual; or
- Payment for Health Care provided to the Individual;

and includes:

- The PHIN (personal health identification number) and any other identification number, symbol or particular assigned to an Individual; and
- Any identifying information about the Individual that is collected in the course of, and is incidental to, the provision of Health Care or payment for Health Care;

and for further clarity includes:

- Personal information such as financial position, home conditions, domestic difficulties or any other private matters relating to the Individual which have been Disclosed to the Trustee.

3.15 **Privacy:** The fundamental right of an Individual to control the collection, Use and Disclosure of their Personal Health Information.

3.16 **Privacy Officer:** An employee designated by CancerCare Manitoba whose responsibilities include dealing with requests from individuals who wish to examine, receive a copy or make a correction to Personal Health Information Maintained by the Trustee and facilitating the Trustee's compliance with PHIA. The definition is intended to mean the Privacy Officer and/or their delegate.

3.18 **Record or Recorded Information:** A Record of information in any form, and includes information that is written, photographed, recorded or stored in any manner, on any storage medium or by any means, including by graphic electronic

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or mechanical means, but does not include electronic software or any mechanism that produces records.

3.20 **Trustee:** A Health Professional, Health Care Facility, public body or Health Services Agency that collects or Maintains Personal Health Information.

3.21 **Use:** Involves revealing Personal Health Information to someone within the Trustee’s own organization who needs to know the information to do their job. Use includes processing, reproduction, transmission and transportation of Personal Health Information.

4.0 **POLICY:**

4.1 All fax transmittal of Personal Health Information including Demographic Information must be in accordance with the CancerCare Manitoba policies on Access, Collection, Use or Disclosure of Personal Health Information.

4.2 When determining if faxing is the appropriate method to send and/or receive Personal Health Information, consider the sensitivity of the information, the number of documents that need to be transmitted, and the urgency of which the information is required.

4.3 Personal Health Information mistakenly faxed to an unintended recipient is an unauthorized Disclosure resulting in a breach of Privacy of the Individual to whom the information is about. The breach shall be reported in accordance with the ‘Reporting of Security Breaches Related to Personal Health Information Policy’.

4.4 When dealing with a request to fax Personal Health Information to a new fax number, reasonable measures should be followed to ensure the identity of the requestor and the appropriateness of sending a fax to that number.

4.5 Any fax machine used to send or receive Personal Health Information should be located in a place that prevents unauthorized persons from seeing faxed Personal Health Information. Access to the machine should be controlled.

4.6 Fax confirmation sheets shall be retained with the original faxed documents wherever possible and when reasonable to do so.

4.7 All fax transmissions of Personal Health Information shall have a cover sheet containing the following information:

- Intended recipient’s name, address (including department or program), telephone and fax number whenever feasible;
- Sender’s full and telephone number;
- Individual’s Demographic Information and shall not contain any other Personal Health Information about the Individual;
- Number of pages sent including cover sheet;
- Confidentiality statement stating that the faxed material is confidential, is intended only for the stated recipient, is not to be Disclosed to or used by

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anyone else, that if the fax is received in error or the number of pages is incorrect to immediately notify the sender and at the request of the sender to return or securely destroy the information.

- 4.8 When faxing sensitive Personal Health Information, unique identifiers or codes should be used to protect the identity of the Individual(s).
- 4.9 At no time shall Personal Health Information be left unattended on the fax machine if in an unsecured area.
- 4.10 When Personal Health Information is compromised through faxing and/or cannot be retrieved when faxed to an unintended recipient, notify your supervisor and contact the Site Privacy Officer.
- 4.11 A copy of the Guidelines For Faxing Personal Health Information shall be:
- Posted by all fax machines that are used to send or receive Personal Health Information; or
 - Made available to employees authorized to send and receive Personal Health Information.

5.0 **PROCEDURE:**

- 5.1 Persons authorized to fax Personal Health Information shall:
- Set up pre-programmed fax numbers (speed dial and auto faxing directories) for most commonly used fax numbers and regularly check to ensure that the fax numbers are accurate and up to date. Pre-programmed fax numbers shall not include numbers for media.
 - Confirm that the fax number for the intended recipient is correct;
 - Check the fax number dialed to ensure it is correct (use visual check on the display) prior to sending the fax;
 - Check each fax confirmation report to ensure that the fax number on the report is the same as the recipient’s number and that the number of pages transmitted and received are the same;
 - Remove the documents from the fax machine as soon as the fax has been processed;
 - Keep a Record of the Personal Health Information that was sent via fax.
- 5.2 Persons authorized to receive Personal Health Information via fax transmission shall:
- Check to ensure the number of pages received match the number noted on the fax cover sheet and that all pages are legible;
 - Advise the sender of the fax when there is a discrepancy in the number of pages sent and received, or that copies are illegible and request another copy be sent;
 - Check to ensure that the fax does not contain any material that should not have been sent or was intended for another recipient;

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- Promptly notify the sender when material was sent in error and return or destroy the information as requested by the sender.

6.0 **REFERENCES:**

- 6.1 WRHA Corporate Policy – Transmission of Personal Health Information via Facsimile (“Fax”), #10.40.130.
- 6.2 WRHA Corporate Policy - Reporting and Investigating Privacy Breaches and Complaints Involving Personal Health Information, #10.40.110.
- 6.3 Manitoba Ombudsman Practice Note: Privacy Considerations For Faxing Personal Health Information.
- 6.4 *The Personal Health Information Act (Manitoba)*
- 6.5 *The Personal Health Information Act Regulations*
- 6.6 CCMB Facsimile Transmittal Cover Sheet (*See Appendix A*)
- 6.7 CCMB Guideline: Faxing Personal Health Information (*See Appendix B*)

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):	

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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		
21/10/11	1	Initial	L Costa	New CCMB policy; adapted from WRHA policy.
08/07/14	2	Minor Revision	L Costa Policy Team	New policy number assigned; original policy number was duplicate with another policy. Minor revisions made. New policy template.
06/04/2018	2	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
12/09/14	Dr. S. Navaratnam President and CEO, CCMB	<i>Original signed by Dr. S. Navaratnam</i>

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APPENDIX A



FAX

To: _____ From: _____

Fax: _____ Pages: _____

Phone: _____ Date: _____

Re: _____ CC: _____

Urgent For Review Please Comment Please Reply

Confidential

This message is intended for the use of the individual or entity to which it is addressed and contains information that is privileged and confidential. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited by law. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address at our cost.

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APPENDIX B



GUIDELINE: FAXING PERSONAL HEALTH INFORMATION

BEFORE FAXING YOU MUST:

1. Make sure the documents you are faxing include a fax cover sheet that:
 - Clearly identifies who is sending the fax; (Sender)
 - Clearly identifies who the fax is going to; (Recipient)
 - Records the total number of pages being faxed (including the coversheet); and
 - States the site approved confidentiality statement.
2. Double check that you have the correct fax number for the person you are sending the fax to.
3. Once you have keyed in the fax number, confirm it is the correct number before pressing the “Send” Button.

AFTER FAXING YOU MUST:

1. Remove the documents from the fax machine - no documents containing personal health information should ever be left unattended on a fax machine.
2. Check the fax confirmation sheet to make sure that all the pages were successfully sent AND that they went to the correct recipient.
3. Keep a copy of the fax confirmation sheet with the original documentation that was faxed wherever possible and when reasonable to do so.
4. When a fax contains extremely sensitive information, contact the receiver to confirm receipt.

RECEIVING FAXED DOCUMENTS:

1. Remove the documents from the fax machine as soon as possible. No documents containing personal information should ever be left unattended on a fax machine.
2. Check to make sure that all pages sent to your site were received.

When personal health information is mistakenly faxed to the wrong site or person (Recipient) you MUST notify your supervisor, manager or site Privacy Officer immediately to report the breach!

For more detailed information on faxing refer to:

CCMB Policy - Transmission of Personal Health Information Via Facsimile (“Fax”)