

Policy and Procedure

Title:	Confidentiality of Personal Health Information		
Policy Number:	06.001	Section:	Information Management
Effective Date:	February 18, 1999		
Revised Date:	September 14, 2023		
Approving Body:	President and Chief Executive Officer of CancerCare Manitoba (CCMB)		
Authority:	<i>The Health System Governance and Accountability Act (Manitoba)</i>		
Policy Contact:	CCMB Privacy Officer		
Applicable to:	All CCMB Corporate and Clinical Staff		

1.0 BACKGROUND:

- 1.1** The Regulations under *The Personal Health Information Act* (Manitoba) (PHIA) requires trustees to establish and comply with written policies and procedures containing provisions for the security of personal health information during its collection, use, disclosure, storage, and destruction.

2.0 PURPOSE:

- 2.1** To ensure CancerCare Manitoba (CCMB) protects Personal Health Information including Demographic Information so that Individuals are not afraid to seek Health Care to disclose sensitive information to health professionals.
- 2.2** To also ensure that Personal Health Information is protected during its collection, use, disclosure, storage and destruction in accordance with the provisions of PHIA.

3.0 DEFINITIONS:

- 3.1 Access:** The right of an Individual, or a Person Permitted to Exercise the Rights of that Individual, to examine (view) and receive a copy of the Individual's Personal Health Information maintained by CCMB.
- 3.2 Breach of Security:** Occurs whenever Personal Health Information is collected, used, disclosed or accessed other than as authorized, or its integrity is compromised.
- 3.3 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.
- 3.4 Demographic Information:** An Individual's name, address, telephone number, and email address.
- 3.5 Disclosure:** Revealing the Personal Health Information outside CCMB.
- 3.6 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

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Health Care; or that affects the structure or function of the body and includes the sale or dispensing of a drug, device, equipment or other item pursuant to a prescription.

3.8 Health Professional: A person who is licensed or registered to provide Health Care under an Act of the Legislature or who is a member of a class of persons designated as a Health Professionals in the PHIA regulations.

3.9 Individual: A patient, client or resident receiving Health Care services within the CCMB/Health Care 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 Information Manager: A person or body (corporation, business, or association) that processes, stores or destroys Personal Health Information or provides information management or information technology services for CCMB.

3.11 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 of 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 CCMB; and

for the purpose of the Confidentiality policy any Personal Health Information exchanged verbally about the Individual.

3.13 Privacy Officer: An employee designated by the Health Care Facility 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 CCMB and facilitating CCMB's compliance with PHIA. At CCMB, the Medico-Legal Correspondent also assists in this designated capacity.

3.14 Trustee: A Health Professional, Health Care Facility, public body or Health Services Agency that collects or maintains Personal Health Information.

3.15 Use: Involves revealing Personal Health Information to someone within CCMB's

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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 employees and Persons Associated with CCMB are responsible for protecting all Personal Health Information (oral or recorded in any form) that is obtained, handled, learned, heard or viewed in the course of his/her work or association with CCMB.

4.2 Personal Health Information shall be protected during its collection, Use, storage, and destruction within CCMB.

4.3 Use or Disclosure of Personal Health Information is acceptable only as part of one's job duties and responsibilities (including reporting duties imposed by legislation) and based on the need to know.

4.4 Discussion regarding Personal Health Information shall not take place in the presence of persons not entitled to such information or in public places (elevators, lobbies, cafeterias, off premises, etc.).

4.5 Employees and Persons Associated with CCMB shall attend a PHIA Orientation, complete the online PHIA training through the Learning Management System, and sign a Personal Health Information Pledge of Confidentiality as a condition of employment/ contract/association/appointment.

The pledge must be signed as soon as reasonably practicable, but not later than three (3) months after commencement of their relationship with CCMB.

4.6 Employees and persons associated with CCMB shall complete their PHIA LMS Training every three (3) years through the PHIA LMS Training online, or by an orientation session attended to in person by the Privacy Officer.

Training completion certificates must be sent to the Privacy Officer for tracking. Managers and supervisors will be responsible for ensuring that employees have completed the education every three (3) years.

4.7 Program/Department/Division Leaders who sponsor a visitor are required to educate the visitor in terms of their PHIA obligation and sign the PHIA Information Form - Visitors on Business.

4.8 The CCMB Pledge of Confidentiality shall be signed each time there is a substantial change in an Individual's position, as determined by the department, program or division responsible for the person, (i.e. an employee moves from a department with little exposure to Personal Health Information to a department that collects or maintains large amounts of Personal Health Information).

4.9 Employees and Persons Associated with CCMB may be required to attend an

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additional PHIA Orientation and sign another CCMB Pledge of Confidentiality, at the discretion of the Privacy Officer, (i.e. disciplinary purpose).

- 4.10** All persons contracted under a Service Agreement or Contract, as a condition of acceptance of the agreement or contract, shall be required to sign a Purchase Service Agreement or a similar Agreement that provides, amongst other things, for protection of confidential information including Personal Health Information.
- 4.11** All Information Managers shall be required to sign an agreement that provides, amongst other things, for protection of Personal Health Information.
- 4.12** All contractors engaged in providing a service for CCMB, where the service provided would expose them to confidential information, shall be required to sign a contract that provides, amongst other things, for the protection of confidential information including Personal Health Information.
- 4.13** Unauthorized use or disclosure of confidential information may result in a disciplinary response up to and including termination of employment/ contract/ association/ appointment. A person convicted of an offence under PHIA may be required to pay a fine up to \$50,000. A confirmed breach of Confidentiality may be reported to the appropriate professional regulatory body.
- 4.14** All persons who become aware of a possible Breach of Security or Confidentiality of Personal Health Information shall refer to the 'Reporting of Security Breaches Related to Personal Health Information' policy.

5.0 PROCEDURE:

- 5.1** The CCMB Pledge of Confidentiality will be signed at the end of the PHIA orientation and is maintained in a place designated by the Privacy Officer:
- 5.2** The PHIA Information Form – Visitors on Business will be administrated by the Program/Department/Division where the visitor will be located and forwarded to the Privacy Officer for retention.
- 5.3** The administration of a Service Agreement or a Contract may be handled by the department responsible for the agreement/contract. The original shall be maintained by the department, and added to the master Contract Database retained in each department.

6.0 REFERENCES:

- 6.1** Shared Health - Confidentiality of Personal Health Information Policy #310.140.115:
[310.140.115 - Confidentiality of Personal Health Information \(sharedhealthmb.ca\).](http://310.140.115 - Confidentiality of Personal Health Information (sharedhealthmb.ca).)
- 6.2** CCMB Policy 06.028 – Reporting and Investigating Privacy Breaches and

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Complaints [Reporting and Investigating Privacy Breaches and Complaints.pdf](#)

- 6.3** *The Personal Health Information Act* (Manitoba):
<https://web2.gov.mb.ca/laws/statutes/ccsm/p033-5.php?lang=en>
- 6.4** The Personal Health Information Regulation:
<https://web2.gov.mb.ca/laws/regs/current/pdf-regs.php?reg=245/97>
- 6.5** Personal Health Information Pledge of Confidentiality [PHI Employee Pledge](#)
- 6.6** Personal Health Information – Information Sheet – Visitors on Business at CCMB
[PHIA Visitors Pledge](#)

Documentation:

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

Revision History:

Date	Version	Status	Author	Summary of Changes
18/02/99	1	Initial		
15/02/11	2	Revision		
20/06/14	3	Revision	L Costa Policy Team	CCMB Policy adapted from WRHA Policy as referenced.
28/03/2018	3	Minor revision	S.Friedenberger	Reformatted to new template
28/08/2023	3	Minor revision	J. Berry	Revised to match Shared Health Policy

Executive Sponsor: This Policy was approved/endorsed by:

Date	Name / Title
September 14, 2023	Brent Gibson, Chief of Corporate Services and Finance

Approved by:

Date	Name / Title	Signature
September 14, 2023	Dr. Sri Navaratnam, President and Chief Executive Officer, CancerCare Manitoba	"Original signed by Dr. Sri Navaratnam"