Privacy of personal information is an important principle to Shoreacres Therapy. We are committed to collecting, using, and disclosing personal information responsibly and only to the extent necessary for the psychological services we provide. We try to be open and transparent about how we handle personal information. This document describes our privacy policies.

### What is Personal Information?

Personal health information is information about an identifiable individual. Personal health information includes information that relates to:

- The physical or mental health of the individual (including family health history)
- The provision of health care to the individual (including identifying the individual's health care provider)
- Payments or eligibility for health care or coverage for health care
- The identification of the individual's substitute decision maker

### Who We Are

Our clinic, Shoreacres Therapy, includes at the time of writing three professionals. We use a number of consultants and agencies that may, in the course of their duties, have limited access to personal health information we hold. These include bookkeepers and accountants, lawyers, and website managers. We restrict their access to personal information we hold as much as possible We also have their assurance that they follow appropriate privacy principles.

Like all psychologists, I collect, use, and disclose health information in order to serve my clients. The main reason for collecting and using personal and health information is for accurate identification and to provide quality assessment and treatment services. For example, I collect certain information about my client's history, including medical, psychological, family, employment, and social history, and current symptoms and status in order to best assess needs, and to provide treatment that my clients consent to receive. Another primary purpose is to have an initial baseline of health and social information and to monitor change over time.

# **Health Information: Secondary Purposes**

Like most organizations, I also collect, use and disclose personal and health information for secondary purposes. The most common examples of secondary purposes are as follows:

- Basic information (e.g., name, address, contact information) may be used and/or disclosed to invoice clients for services, to process payments, to collect unpaid accounts, or to send receipts.
- To consult with accounting or legal professionals to assist with the operation of my practice. Some personal information (e.g., name, dates of visits, amounts paid for services) may be disclosed to these professionals. These professionals are mandated by

their own regulatory organizations to maintain the confidence and privacy of any personal information they access through the course of their job duties.

- The cost of some services I provide to some clients is paid for by third parties (e.g., WSIB, private insurance). These third-party payers have either the client's consent or the legislative authority to direct me to collect and disclose to them certain information in order to demonstrate entitlement to funding.
- As a psychologist, I am regulated by the College of Psychologists of Ontario. For quality assurance reasons, the College may inspect my records and/or interview me as part of their regulatory activities acting in the public interest. In addition, as a psychologist I must report serious misconduct, incompetence or incapacity of other practitioners if they belong to certain other organizations or my own organization.
- Also, like all organizations, various government agencies (e.g., Canada Customs and Revenue Agency, the office of the Information and Privacy Commissioner of Ontario, etc.) have the authority to review my files and interview me as a part of their mandates. In these circumstances, I may consult with professionals (e.g., lawyers, accountants) to ensure that these requests are legitimate and required by law.

### **Disclosure of Health Information**

As a health information custodian, I cannot release personal health information to a third party (e.g., an insurance company) without written consent, however, PHIPA does allows the sharing of information without consent in certain circumstances. For example, I am required to disclose personal information without a client's consent in the event of certain emergencies or other urgent circumstances in order to eliminate or reduce a significant risk of serious bodily harm. I am obligated to disclose information, with or without a client's consent when I suspect or am informed that:

- 1. A child under the age of 16 is at risk of abuse or neglect
- 2. A person in a long-term care facility or retirement home is at risk of abuse, neglect, or of being defrauded
- 3. There is risk of imminent harm to yourself or others
- 4. Previous or current sexual abuse by a regulated health professional
- 5. As required by court order
- 6. As required by police in the case of a missing person

PHIPA also allows the sharing of information with other health professionals who are involved in my client's care without explicit written consent, however there are provisions in the Act that allow an individual to deny information from being shared with other health professionals by specifying exactly what should not be shared. The health care professional receiving the information would then be told that part of the individual's health record has been withheld.

# **Protecting Personal and Health Information**

To protect my clients' personal and health information, I adhere to the following office procedures:

• Client information in paper form is either under my direct supervision or is secured

within my locked filing cabinet within my locked office at all times. No one other than myself has access to my locked filing cabinet.

- My electronic hardware (e.g., computer equipment) is either under my direct supervision or is secured in my locked office or locked home at all times. My electronic hardware is secured with passwords. Information stored on all electronic hardware is protected with encryption and a firewall.
- Paper information is delivered through sealed and addressed envelopes and delivered by reputable organizations (e.g., Canada Post) with tracking information and requiring a signature to ensure delivery to the intended recipient. When it is time to destroy paper files containing personal information, I do so by cross-cut shredding.

# In the Event of a Privacy Breach

As a health information custodian, I am required to notify the Information and Privacy Commissioner of Ontario (IPC) of certain privacy breaches as follows:

- Use or disclosure of health information without authorization
- Stolen information
- Further use or disclosure of information
- Breaches that occur as part of a pattern
- Breaches related to the disciplinary action against a college or non-college member
- Significant breaches

In the event that health information is stolen, lost, or accessed by an unauthorized person, I will notify the client directly (in addition to any requirements to notify the IPC) and make a note of the issue and include it in the client's file.

## **Retention of Information**

The College of Psychologists of Ontario requires that all Psychologists must retain client information in a secure location for a period of at least 10 years following the last contact with the client. Following 10 years after the last contact, paper files are destroyed by cross-cut shredding and electronic files are destroyed by secure deletion. If electronic hardware needs to be discarded, I will ensure that the hard drive is physically destroyed.

## **Access to Information**

Clients have the right to access the personal information contained in their file. This might mean looking at what is in the file or getting a copy of the file or parts of the file. Please note that PHIPA allows me to charge a reasonable fee for providing a copy of all or part of a file. This fee is calculated based on a reasonable cost recovery basis.

I encourage clients who would like to access the information contained within their file to please ask me. I may need to ask that the request to view or receive a copy of the file is made in writing. I always try to respond to requests for access of personal health information as soon as possible but I do reserve the right to take up to 30 days (or longer in rare circumstances) to provide a client with access to their file following a written request. This is to allow me enough time to review the file carefully and consult with other professionals to ensure that I am meeting the

## requirements of PHIPA.

Please be aware that there are certain circumstances described in PHIPA that allow me to refuse requests for access to personal health information. If I must refuse a request for access (i.e., if there are parts of a file that I cannot share with a client who requests access) I will indicate this in writing and I will provide a reason in those situations in which PHIPA allows me to do so. In all cases, I will still allow access to the part(s) of the file that I am able to share. Where possible, I will assist in helping a client to understand any information in their file that they do not understand (e.g., any term, code, or abbreviation). If a client is not happy with the outcome of their request for access to their file, they are encouraged to discuss their concern with the office of the Information and Privacy Commissioner of Ontario (contact information provided below).

As per the College of Psychologists of Ontario standards of practice and PHIPA, a succession plan is in place to ensure that client files will be retained and can be accessed in the event of my death, incapacitation, or a change in my practice. A colleague who is a psychologist registered with the College of Psychologists of Ontario has agreed to take charge of my files in the event of my death or incapacitation. In the event of a sudden change of my status or that of the practice, all clients will be notified by the psychologist that has agreed to take charge of my files.

## **Corrections to File Information**

If a client believes that there is a mistake in their personal health information recorded in their file, they are encouraged to ask me to correct it. I may need to ask that a request to correct a file be made in writing. I always try to respond to requests to make corrections as soon as possible but I do reserve the right to take up to 30 days (or longer in rare circumstances) to respond to written requests to change file information. This is to allow me sufficient time to review the request and the file carefully and consult with other professionals to ensure that I am meeting the requirements of PHIPA. I may ask that a client provide documentation that my file is wrong and I will place this documentation in the file.

Please be aware that there are certain circumstances described in PHIPA that allow me to refuse requests for correction to files. For instance, correction requests are appropriate when they apply to errors of factual information (e.g., date of birth) and not to my professional opinions or my observations that were formed in good faith. As well, I cannot make corrections to reports or records that I did not author. If I agree that a correction is needed, I will make the correction and I will notify anyone to whom the incorrect information was sent. If I do not agree that a correction is needed, I will explain why. In such a case, I will also ask for a brief written statement of disagreement. I will include this statement of disagreement in the file and will attach the statement of disagreement any time I disclose related file information. If a client is unhappy with the outcome of their request for a correction, they are encouraged to discuss their concern with the Information and Privacy Commissioner of Ontario (contact information provided below).

### **Ouestions**

Please contact me directly about any questions or concerns that you have with regard to the collection, use, and disclosure of your personal information.

My privacy policy was created under the rules and guidelines set out by the Regulated Health Professions' Act (RHPA), the Personal Health Information Protection Act (PHIPA), the Professional Information Protection and Electronic Documents Act (PIPEDA) and within the standards of practice and guidelines set out by the College of Psychologists of Ontario. There are additional exceptions to the privacy principles that are too detailed to set out here as well as some rare exceptions to the commitments set out above.

If you have concerns about the professionalism or competence of my services or my mental or physical capacity I would ask you to discuss those concerns with me. However, if I cannot satisfy your concerns, you are entitled to discuss your concerns with my regulatory body:

# COLLEGE OF PSYCHOLOGISTS OF ONTARIO

Suite 500 - 110 Eglington Avenue West Toronto, ON M4R-1A3 Phone: (416) 961-8817

> Toll Free: (800) 489-8388 Fax: (416) 961-2635 Email: cpo@cpo.on.ca Web: www.cpo.on.ca

For health information-related concerns, and to lodge a complaint related to my collection, use, or disclosure of your personal health information, talk to the provincial Privacy Commissioner:

Information and Privacy Commissioner of Ontario 80 Bloor Street West, Suite 1700 Toronto, Ontario

Phone: (416) 326-3333

E-mail: commissioner@ipc.on.ca

Web: www.ipc.on.ca

As well, the federal Information and Privacy Commissioner oversees the administration of privacy legislation that applies in the private sector and in some circumstances when working with a psychologist in Ontario. The federal Commissioner can also act as an ombudsman for certain type of privacy disputes and may be able to provide assistance in the event of a concern regarding the collection, use, and disclosure of your personal information:

Information and Privacy Commissioner of Canada 112 Kent Street Ottawa, Ontario

Phone: (613) 995-8210 Toll Free: 1-800-282-1376

Fax: (613) 947-6850) www.privcom.gc.ca