

March 2004

**Upper Ottawa Physiotherapy and MVA Services**  
**Privacy Policy**

Privacy of personal information is an important principle to Upper Ottawa Physiotherapy. We are committed to collecting, using and disclosing personal information responsibly and only to the extent necessary for the goods and services we provide. We also try to be open and transparent as to how we handle personal information. This document describes our privacy policies.

**WHAT IS PERSONAL INFORMATION?**

Personal information is information about an identifiable individual. Personal information includes information that relates to their personal characteristics (e.g., gender, age, income, home address or phone number, ethnic background, family status), their health (e.g., health history, health conditions, health services received by them) or their activities and views (e.g., religion, politics, opinions expressed by an individual, an opinion or evaluation of an individual). Personal information is to be contrasted with business information (e.g., an individual's business address and telephone number), which is not protected by privacy legislation.

**WHO WE ARE**

Our organization, Upper Ottawa Physiotherapy, includes at the time of writing seven Physiotherapists, one Occupational Therapist, two Physiotherapy assistants and three administrative staff. We use a number of consultants and agencies that may, in the course of their duties, have limited access to personal information we hold. These include computer consultants, office security and maintenance, bookkeepers and accountants, temporary workers to cover holidays, credit card companies, website managers, cleaners and lawyers. We restrict their access to any personal information we hold as much as is reasonably possible. We also have their assurance that they follow appropriate privacy principles.

**WE COLLECT PERSONAL INFORMATION: PRIMARY PURPOSES**  
**About Clients**

Like all physiotherapists, we collect, use and disclose personal information in order to serve our clients. For our clients, the primary purpose for collecting personal information is to provide physiotherapy treatment. For example, we collect information about a client's health history, including their family history, physical condition and function and social situation in order to help us assess what their health needs

are, to advise them of their options and then to provide the health care they choose to have. A second primary purpose is to obtain a baseline of health and social information so that in providing ongoing health services we can identify changes that are occurring over time. It would be rare for us to collect such information without the client's express consent, but this might occur in an emergency (e.g., the client is unconscious) or where we believe the client would consent if asked and it is impractical to obtain consent (e.g., a family member passing a message on from our client and we have no reason to believe that the message is not genuine).

### **About Members of the General Public**

For members of the general public, our primary purposes for collecting personal information are to provide notice of special events (e.g., a seminar or conference) or to make them aware of physiotherapy services in general or our clinic in particular. For example, while we try to use work contact information where possible, we might collect home addresses, fax numbers and email addresses. We try to obtain consent before using any such personal information, but where this is not, for any reason, possible, we will upon request immediately remove any personal information from our distribution list.

### **About Contract Staff, Volunteers and Students**

For people who are contracted to do work for us (e.g., temporary workers), our primary purpose for collecting personal information is to ensure we can contact them in the future (e.g., for new assignments) and for necessary work-related communication (e.g., sending out paycheques, year end tax receipts). Examples of the type of personal information we collect for those purposes include home addresses and telephone numbers. It is rare for us to collect such information without prior consent, but it might happen in the case of a health emergency (e.g., a SARS outbreak) or to investigate a possible breach of law (e.g., if a theft were to occur in the clinic). If contract staff, volunteers or students wish a letter of reference or an evaluation, we will collect information about their work related performance and provide a report as authorized by them.

### **USE OF PERSONAL INFORMATION**

Personal information will only be disclosed in accordance with the purposes for which it was collected. Access to family and client information is restricted to the employees and agents who require the information to provide services related to the client. For personal health information this typically means a team of people who are responsible for providing care to a client. Client and family information

is provided to employees and agents on a “need to know” basis depending on the job duties of the employee or the services provided by the agents.

### **WE COLLECT PERSONAL INFORMATION:**

#### **RELATED AND SECONDARY PURPOSES**

Like most organizations, we also collect, use and disclose information for purposes related to or secondary to our primary purposes. The most common examples of our related and secondary purposes are as follows:

1. To invoice clients for goods or services that were not paid for at the time, to process credit card payments or to collect unpaid accounts.
2. To advise clients that their product or service should be reviewed (e.g., to ensure a product is still functioning properly and appropriate for their then current needs and to consider modifications or replacement).
3. To advise clients and others of special events or opportunities (e.g., a seminar, development of a new service, arrival of a new product) that we have available.
4. Our clinic reviews client and other files for the purpose of ensuring that we provide high quality services, including assessing the performance of our staff. In addition, external consultants (e.g., auditors, lawyers, practice consultants, voluntary accreditation programs) may on our behalf do audits and continuing quality improvement reviews of our Clinic, including reviewing client files and interviewing our staff.
5. Physiotherapists are regulated by the College of Physiotherapists of Ontario who may inspect our records and interview our staff as a part of their regulatory activities in the public interest. In addition, as professionals, we will report serious misconduct, incompetence or incapacity of other practitioners, whether they belong to other organizations or our own. Also, our organization believes that it should report information suggesting serious illegal behaviour to the authorities. External regulators have their own strict privacy obligations. Sometimes these reports include personal information about our clients, or other individuals, to support the concern (e.g., improper services). Also, like all organizations, various government agencies (e.g., Canada Customs and Revenue Agency, Information and Privacy Commissioner, Human Rights Commission, etc.) have the authority to review our files and interview our staff as a part of their mandates. In these circumstances, we may consult with

- professionals (e.g., lawyers, accountants) who will investigate the matter and report back to us.
6. The cost of some goods/services provided by the organization to clients is paid for by third parties (e.g., OHIP, WSIB, private insurance, Assistive Devices Program). These third-party payers often have your consent or legislative authority to direct us to collect and disclose to them certain information in order to demonstrate client entitlement to this funding.
  7. Clients or other individuals we deal with may have questions about our goods or services after they have been received. We also provide ongoing services for many of our clients over a period of months or years for which our previous records are helpful. We retain our client information for ten years after the last contact to enable us to respond to those questions and provide these services (our regulatory College also requires us to retain our client records).
  8. If Upper Ottawa Physiotherapy or its assets were to be sold, the purchaser would want to conduct a "due diligence" review of the Clinic's records to ensure that it is a viable business that has been honestly portrayed to the purchaser. This due diligence may involve some review of our accounting and service files. The purchaser would not be able to remove or record personal information. Before being provided access to the files, the purchaser must provide a written promise to keep all personal information confidential. Only reputable purchasers who have already agreed to buy the organization's business or its assets would be provided access to personal information, and only for the purpose of completing their due diligence search prior to closing the purchase.

You can choose not to be part of some of these related or secondary purposes (e.g., by declining to receive notice of special events or opportunities, by paying for your services in advance). We do not, however, have much choice about some of these related or secondary purposes (e.g., external regulation).

### **PROTECTING PERSONAL INFORMATION**

We understand the importance of protecting personal information. For that reason, we have taken the following steps:

- Paper information is either under supervision or secured in a locked or restricted area.
- Electronic hardware is either under supervision or secured in a locked or restricted area at all times. In addition, passwords are used on computers.

- Paper information is transmitted through sealed, addressed envelopes or boxes by reputable companies.
- Staff is trained to collect, use and disclose personal information only as necessary to fulfill their duties and in accordance with our privacy policy.
- External consultants and agencies with access to personal information must enter into privacy agreements with us.
- Electronic information is transmitted through a direct line (fax).
- UOP destroys paper files containing personal information by shredding.

### **RETENTION AND DESTRUCTION OF PERSONAL INFORMATION**

We need to retain personal information for some time to ensure that we can answer any questions you might have about the services provided and for our own accountability to external regulatory bodies. However, we do not want to keep personal information too long in order to protect your privacy.

We keep our client files for about ten years. We keep our pediatric client files for 10 years after their 18<sup>th</sup> birthday. Our client and contact directories are much more difficult to systematically destroy, so we remove such information when we can if it does not appear that we will be contacting you again. However, if you ask, we will remove such contact information right away. We keep any personal information relating to our general correspondence (e.g., with people who are not clients) newsletters, seminars and marketing activities for about six months after the newsletter ceases publication or a seminar or marketing activity is over. We destroy paper files containing personal information by shredding. We destroy electronic information by deleting it and, when the hardware is discarded, we ensure that the hard drive is physically destroyed. Alternatively, we may send some or the entire client file to our client.

### **YOU CAN LOOK AT YOUR INFORMATION**

With only a few exceptions, you have the right to see what personal information we hold about you. Often all you have to do is ask. We can help you identify what records we might have about you. We will also try to help you understand any information you do not understand (e.g., short forms, technical language, etc.). We will need to confirm your identity, if we do not know you, before providing you with this access. We reserve the right to charge a nominal fee for such requests. If there is a problem we may ask you to put your request in writing. If we cannot give you access, we will tell you within 30 days if at all possible and tell you the reason, as best we can, as to why we

cannot give you access. If you believe there is a mistake in the information, you have the right to ask for it to be corrected. This applies to factual information and not to any professional opinions we may have formed. We may ask you to provide documentation that our files are wrong. Where we agree that we made a mistake, we will make the correction and notify anyone to whom we sent this information. If we do not agree that we have made a mistake, we will still agree to include in our file a brief statement from you on the point and we will forward that statement to anyone else who received the earlier information.

### **DO YOU HAVE A QUESTION?**

Our Information Officer, Mike Vallely is available on site to answer your questions. **PHONE** (905) 389-8772

He will attempt to answer any questions or concerns you might have. If you wish to make a formal complaint about our privacy practices, you may make it in writing to our Information Officer. He will acknowledge receipt of your complaint; ensure that it is investigated promptly and that you are provided with a formal decision and reasons in writing. If you have a concern about the professionalism or competence of our services or the mental or physical capacity of any of our professional staff we would ask you to discuss those concerns with us. However, if we cannot satisfy your concerns, you are entitled to complain to our regulatory body:

#### COLLEGE OF PHYSIOTHERAPISTS OF ONTARIO

375 University Avenue Suite 901 Toronto, Ontario M5G 2J5

Phone: (416) 591-3828 1-800-583-5885 Fax: (416) 591-3834

Email: [info@collegept.org](mailto:info@collegept.org) Website: [www.collegept.org](http://www.collegept.org)

This policy is made under the *Personal Information Protection and Electronic Documents Act*. That is a complex Act and provides some additional exceptions to the privacy principles that are too detailed to set out here. There are some rare exceptions to the commitments set out above. For more general inquiries, the Privacy Commissioner of Canada oversees the administration of the privacy legislation in the private sector. The Commissioner also acts as a kind of ombudsman for privacy disputes.

The Privacy Commissioner can be reached at (enforces the federal document PIPEDA):

112 KENT STREET | OTTAWA, ONTARIO | K1A 1H3  
**PHONE** (613) 995-8210 | **TOLL-FREE** 1-800-282-1376 | **FAX** (613) 947-6850 | **TTY** (613) 992-9190 [www.privcom.gc.ca](http://www.privcom.gc.ca)

Information & Privacy Commissioner/Ontario (enforces the provincial document PHIPA, which is more specific to Health Care Privacy Laws):  
80 Bloor Street West, Suite 1700 Toronto, Ontario M5S 2V1  
416 325 3333 e-mail: [commissioner@ipc.on.ca](mailto:commissioner@ipc.on.ca)

References:

1. College of Physiotherapists of Ontario. Are you ready for the new privacy model? October 2003.
  2. College of Physiotherapists of Ontario. What the new Personal Health Information Protection Act Means for Practitioners. Richard Steinecke. 2004.
  3. College of Physiotherapists of Ontario. A Supplementa ry Guide to the Personal Health Information Act, 2004. Privacy Requirements and Policies for Health Practitioners in Ontario. October 2004.
  4. College of Physiotherapists of Ontario. Guide: Privacy Requirements and Policies for Health Practitioners in Ontario. November 2003.
  5. College of Physiotherapists of Ontario. Checklists : Privacy Requirements and Policies for Health Practitioners in Ontario. November 2003.
  6. The Information and Privacy Commissioner of Ontario. Your Health Information: Your Rights. Your Guide to the Personal Health Information Protection Act, 2004. November 2004.
  7. Information and Privacy Commissioner/Ontario. Your Health Information and Your Privacy in Our Office. 2004.
  8. Canadian Physiotherapy Association. Various resources on PIPEDA. May 2006.
  9. Canadian Physiotherapy Association. What every Physiotherapist Needs to Know About Privacy Legislation. Richard Steinecke. 2005.
  10. *Code of Ethics for Physiotherapists, 1996*
    - 1.35 Maintains the privacy of the clinical record, as well as all information relating to the client's personal conduct and affairs.
    - 1.36 Discusses the client's personal information only with his or her permission or as law permits to protect the welfare of the individual or the community.
    - 1.37 Prior to initiating service, explains any foreseeable limitations on preserving the confidentiality of information to the client, e.g., legal obligation to report when an examination is conducted on behalf of a third party.
- Rules of Conduct*
- 1.10 Physiotherapists shall respect all client information as confidential. Such information shall not be communicated to any person without the consent of the client or surrogate except when required by law.

Reviewed and Revised June 2006  
Reviewed and Revised February 2007, July 2007

**Upper Ottawa Physiotherapy and MVA Services**  
**Personal Information Protection and Electronic Documents Act**  
**PIPEDA (Federal Act, January 1, 2004)**

**Definition:** The Privacy Act applies to Commercial Activities where any collection, use or disclosure of personal information. Personal Information means any information about an identifiable individual that relates to their personal characteristics, their health, their activities and their views (See appendix A for examples of personal information).

**Information Officer: Mike Vallely**

- Responsible for overseeing an organization’s compliance with its privacy obligations
- Reviewing the organization’s policies and practices for collecting, using and disclosing personal information
- Implementing safeguards to protect personal information
- Ensuring individuals have a right to access and correct personal information
- Implementing a retention and destruction of information policy
- Training the organization’s staff
- Acting as contact for inquiries from the public
- Ensuring there is a process for handling complaints made about information practices

**PIPEDA**

Ten principles that must be followed when collecting, using and disclosing individual’s personal information.

| <b>Principles</b>   | <b>PIPEDA Definition</b>   | <b>UOP Concerns and Changes</b>   |
|---------------------|--|---|
| Accountability      | Decide to whom you are accountable to  | <ul style="list-style-type: none"> <li>▪ Accountable to staff and patients</li> <li>▪ See statement in clinic waiting room</li> </ul>   |
| Identifying Purpose | What is personal information? <ul style="list-style-type: none"> <li>▪ Gender, age</li> <li>▪ Health Hx</li> <li>▪ Religion, politics</li> </ul> | <ul style="list-style-type: none"> <li>▪ Change to intake form to limit info</li> <li>▪ Limit staff that has access to this information</li> <li>▪ Be clear in policy as to why we collect the</li> </ul> |

|   |   |   |
|---|---|---|
|   |   | information that we do  |
| Consent                                 | People must consent to collect. Consent form should explain purpose, right to withdraw, and implications.   | <ul style="list-style-type: none"> <li>▪ Implied consent</li> <li>▪ Verbal consent on phone to collect information</li> <li>▪ May require some written consent for secondary purposes</li> <li>▪ Sign posted in waiting room</li> </ul>   |
| Limiting Collection                     | Obligated to limit the information collected. Should only pertain to services provided.   | <ul style="list-style-type: none"> <li>▪ Change to intake card (No SIN, no health info)</li> <li>▪ Limiting information required</li> </ul>   |
| Limiting Use, Disclosure and Protection | Only allowed to use for purpose it was collected  | <ul style="list-style-type: none"> <li>▪ Statement on fax cover sheet and in waiting room.</li> <li>▪ Changes to security of files (passwords, locking drawers)</li> </ul>  |
| Accuracy                                | Kept in state, up to date and complete  | <ul style="list-style-type: none"> <li>▪ Information updated on follow up or return</li> </ul>  |
| Safeguards                              | <p>Organization: teaching all staff, signed policy</p> <p>Physical: locking cabinets, alarm system, secure archives, passwords</p> <p>Electronic: back up, virus protection</p> | <ul style="list-style-type: none"> <li>▪ Policy is signed by all staff</li> <li>▪ Computer screens protected</li> <li>▪ Charts are out of public's view</li> <li>▪ New faxing cover sheet</li> <li>▪ Shredding of information</li> <li>▪ Destruction of information after 10 years (including electronic info)</li> </ul> |
| Openness                                | Responsibility to inform patients of the existence of policies  | <ul style="list-style-type: none"> <li>▪ Policy in clinic waiting room and full policy available in staff manual</li> <li>▪ Policy outlined on the</li> </ul>   |

|                        |  |  |
|------------------------|--|--|
|                        |  | back of welcome brochure   |
| Individual Access      | Patients right to access to files and request for change               | <ul style="list-style-type: none"> <li>▪ 30 days to get patients their information</li> <li>▪ Physiotherapist will assist patient to understand information</li> </ul>   |
| Challenging Compliance | Implied responsibility if there was a breach of privacy (i.e. robbery) | <ul style="list-style-type: none"> <li>▪ Internal complaint system</li> <li>▪ Disagreements taken to Information Officer</li> <li>▪ Must inform any individuals that may be effected by a breach of privacy</li> </ul> |

### **Six Steps to be followed:**

1. Designating the Organizations's Privacy Officer
2. Information and Activities Covered by the Privacy Plan
3. Collecting Personal Information
4. Safeguards, Retention and Destruction
5. Access, Correction, Complaints and Openness
6. Implementing your Privacy Plan

## **Appendix A: Examples of Personal Information**

### ***Personal Characteristics***

*\$ Name*

*\$ Home contact information*

*\$ Identification number (e.g., credit card, social insurance, health, website cookies)*

*\$ Insurance benefit coverage*

*\$ Identifying features including fingerprints and blood type*

*\$ Gender*

*\$ Age*

*\$ Colour*

*\$ Language*

*\$ Ethnic or country of origin*

*\$ Education or training*

*\$ Marital status, sexual history or sexual orientation*

*\$ Income*

*\$ Social status*

### ***Health***

*\$ Health history*

*\$ Health measurements, samples or examination results*

*\$ Health conditions, assessment results, diagnoses*

- \$ Health services provided to or received by the person*
- \$ Health information collected in the course of providing services*
- \$ Prognosis or other opinions formed during assessment and treatment*
- \$ Compliance with assessment and treatment*
- \$ Reasons for discharge and discharge condition and recommendations*
- \$ Bodily donations activities or plans for donations*

**Activities and Views**

- \$ Transaction history with the organization*
- \$ Occupation/profession*
- \$ Opinions expressed by the person*
- \$ Community involvements*
- \$ Religion*
- \$ Political involvements*
- \$ Work hours*
- \$ Criminal history*
- \$ Disciplinary actions against the individual*
- \$ Credit or loan data*
- \$ Existence of a dispute with the organization*
- \$ Intentions (e.g., to buy goods or services, to change jobs)*
- \$ Involvement with organization (e.g., they are a client)*
- \$ Letters written to the organization by the person*
- \$ Views, evaluations or opinions of the organization about the person*

References:

1. College of Physiotherapists of Ontario. Guide to PIPEDA. January 2004.
2. College of Physiotherapists of Ontario. Checklists to PIPEDA Guide. January 2004.

Reviewed and Revised June 2006

Reviewed and Revised February 2007