

Enabling Quality-Based Reporting and PHIPA Compliance and A Stewardship Privacy Model

October 28, 2015



North York
Family Health Team



Guelph Family
Health Team

Presenters

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Conestoga College*

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Guelph Family Health Team*

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*Executive Director
North York Family Health Team*



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Disclosure

We have no actual or potential conflict of interest in relation to the sponsors of the AFHTO 2015 conference and have received no remuneration directly or indirectly for this presentation.



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A few warm up pitches...

Personal Health Information Protection Act (PHIPA)

- Written in 2004 with acute care in mind
 - Intended to be an enabling piece of legislation
 - Based on a CSA Standard CAN/CSA-Q830, Model Code for the Protection of Personal Information
-
- Accountability
 - Identifying Purposes
 - Consent
 - Limiting Collection
 - Limiting Use, Disclosure and Retention
- Accuracy
 - Safeguards
 - Openness
 - Individual Access
 - Challenging Compliance



Primary Care Challenges

- Who is the Health Information Custodian?
- Who is responsible (legally and ethically) to ensure that patient privacy rights are respected while using physician services? FHT services? What if there are conflicts?
- How does the FHT analyze data within an appropriate (and legal) governance framework?



Format for Today's Discussion

The Guelph FHT and North York FHT has each begun tackling challenges with Privacy governance frameworks.

Today

- Each FHT will review their strategies (5-10 minutes each)
- We will break into a panel style discussion about privacy
 - The panel discussion is meant to be interactive!
 - Please write questions down on the cards provided and provide them to the facilitator
 - The facilitator will do his best to consolidate questions and touch on as many themes as possible while the panel discussions are taking place.



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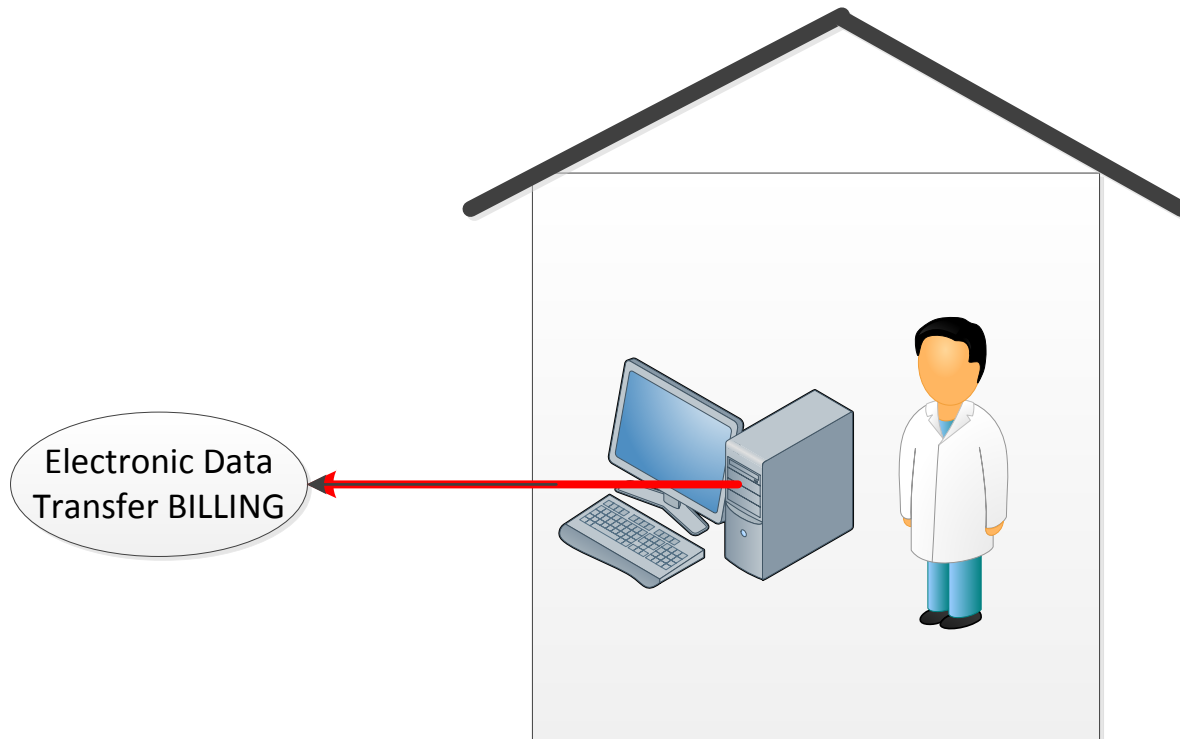


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Performance and Accountability

A gateway to improving privacy risk management

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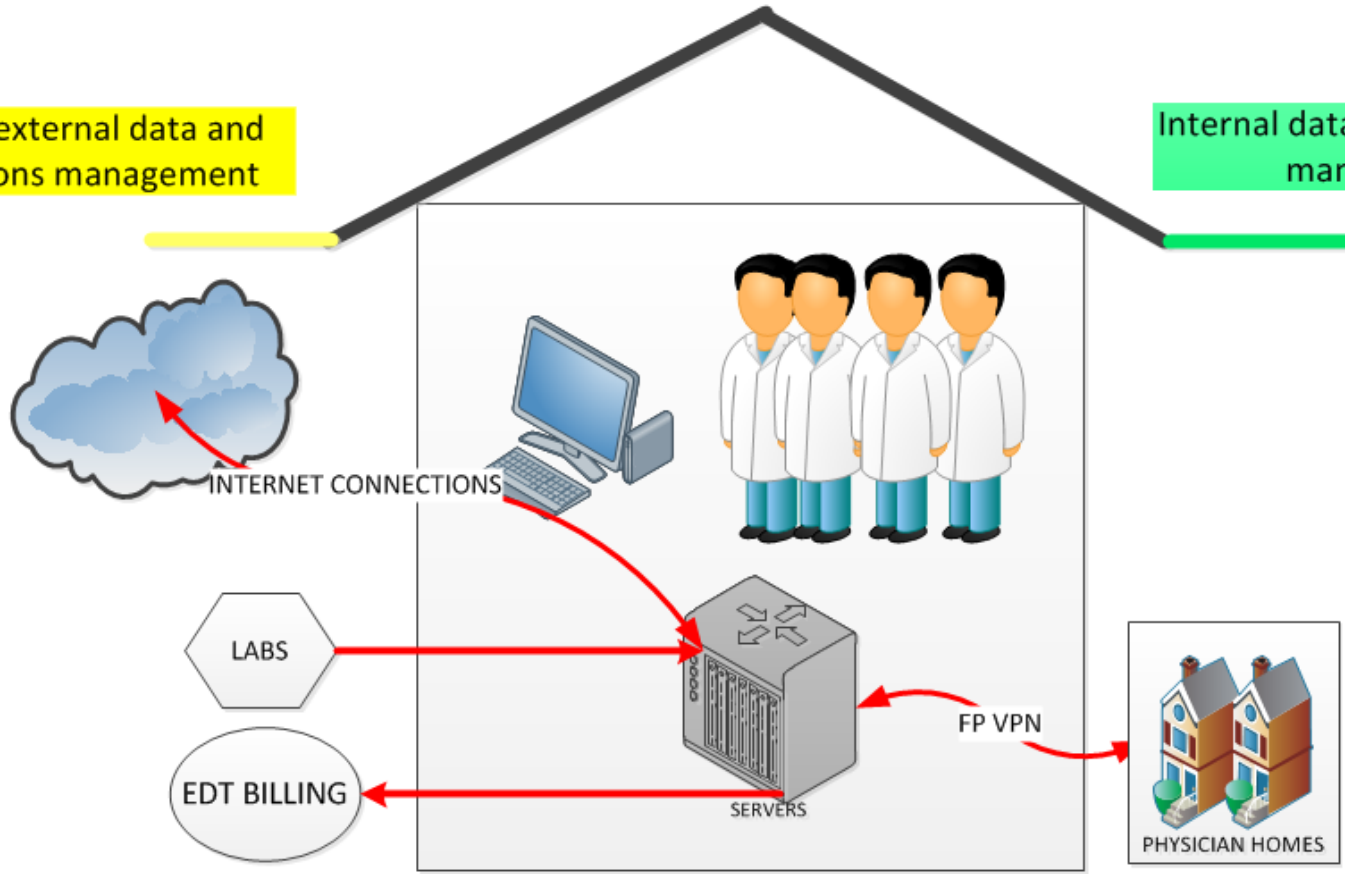
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3rd Party external data and applications management

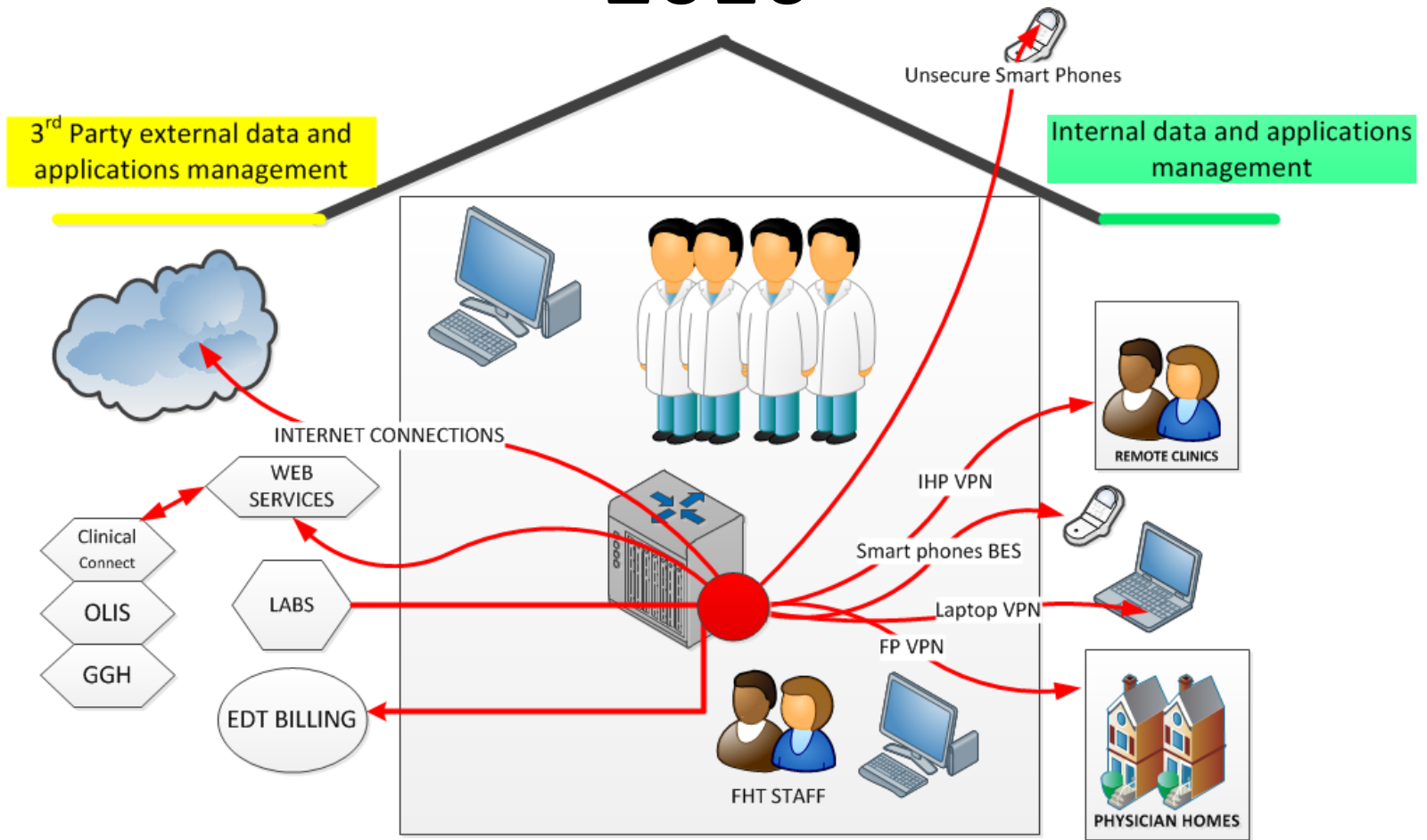
Internal data and applications management



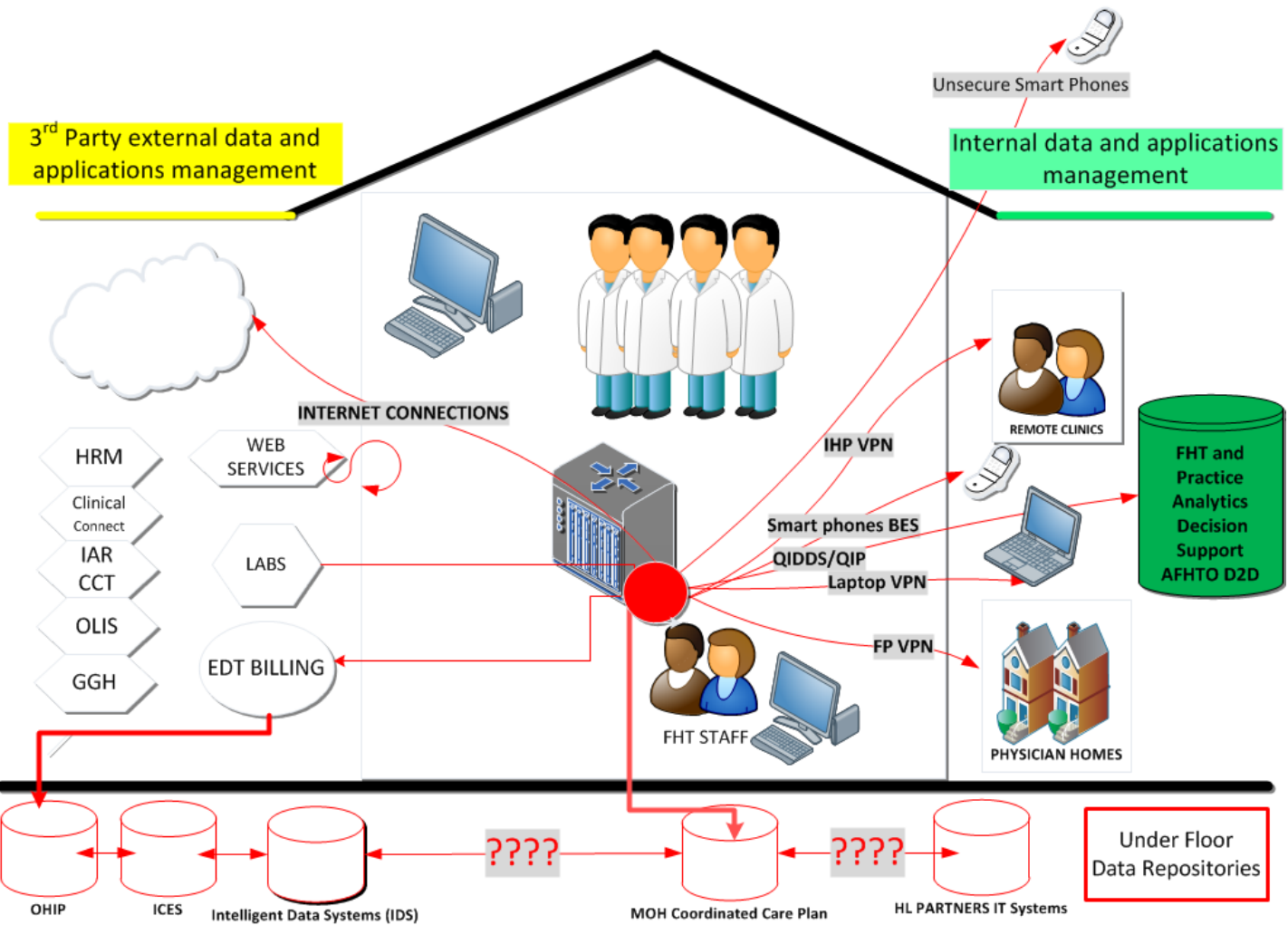
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2010



2014



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Rob Ford's medical records accessed by 2 unauthorized hospital staff members

Hospital took 'appropriate action' against individuals involved in privacy breach

CBC News Posted: Oct 16, 2014 6:46 PM ET | Last Updated: Oct 16, 2014 7:17 PM ET



Mount Sinai Hospital has informed Toronto Mayor Rob Ford, pictured at an advance polling station to cast an early ballot in Toronto's mayoral election, that two staff members accessed his health record despite not being authorized to do so. (Chris Young/The Canadian Press)

34 shares

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- Google

Toronto Mayor Rob Ford's health records at Mount Sinai Hospital, where he is receiving cancer treatment, were "inappropriately" accessed by two staff members, the hospital says.

The two people were not involved in Ford's care, said Sally Szuster, the senior manager of communications and public affairs, in a statement.

- What is liposarcoma and how is it treated?
- Rob Ford casts early ballot for brother Doug

Hospital staff investigated the incident after becoming aware of a security breach and "appropriate action has been taken," she said.

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- Ontario aims for tougher tow-truck rules
- Toronto daystarter: Thursday, Sept. 17, 2015



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Ontario to double fines for medical privacy breaches; make prosecution easier

Proposed rules would discourage 'snooping' into patients' medical records

The Canadian Press Posted: Jun 10, 2015 1:55 PM ET | Last Updated: Jun 11, 2015 3:58 PM ET



Ontario Health Minister Eric Hoskins addressed privacy breaches on Wednesday. (CBC)

65 shares



Ontario's Liberal government wants to double the fines for people who access patients' medical records without authority, and make it easier to prosecute offenders.

There have been problems with health-care workers accessing private medical records at hospitals in Peterborough, Sault Ste. Marie, Brantford, Toronto and elsewhere, with reports the data is sometimes sold to marketing companies.

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- Murder suspect arrested after standoff in Hochelaga-Maisonneuve



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THREAT RESPONSE Actionable info on the latest security

Home / Security

Data breach trends for 2015: Credit cards, healthcare records will be vulnerable



Tony Bradley | @gettechspective
PCWorld

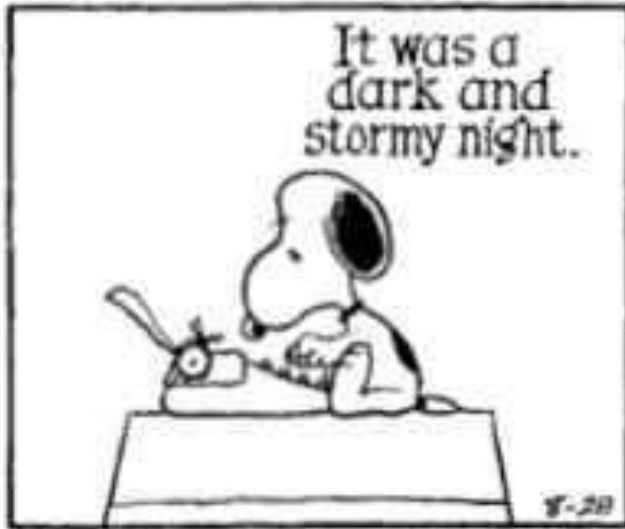
Dec 3, 2014 10:30 AM

The data breaches of 2014 have yet to fade into memory, and we already have 2015 looming. Experian's [2015 Data Breach Industry Forecast](#) gives us much to anticipate, and I've asked security experts to weigh in with their thoughts for the coming year as well.



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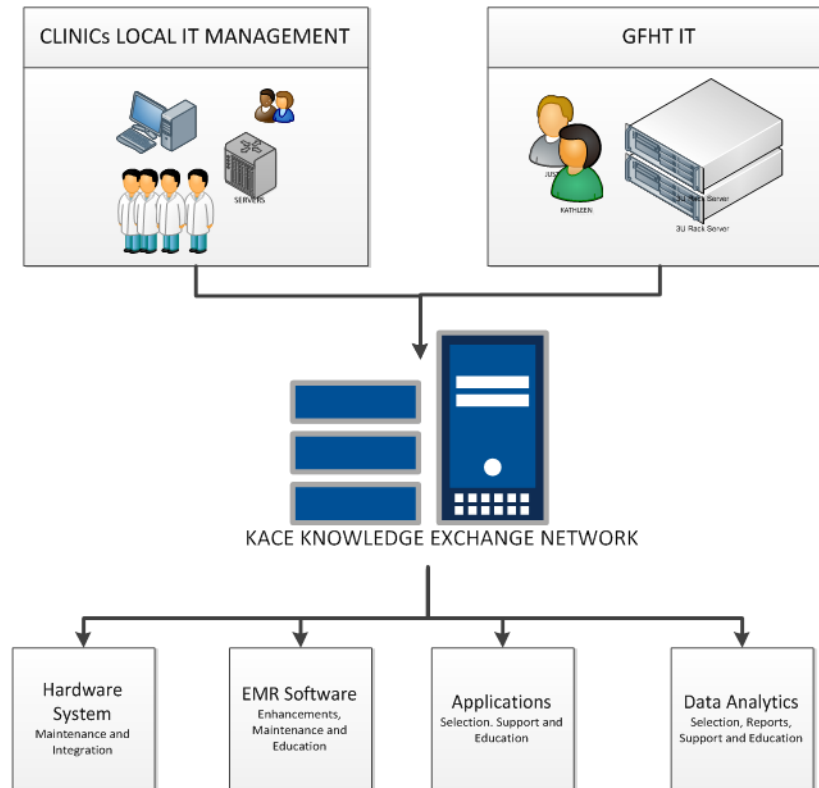


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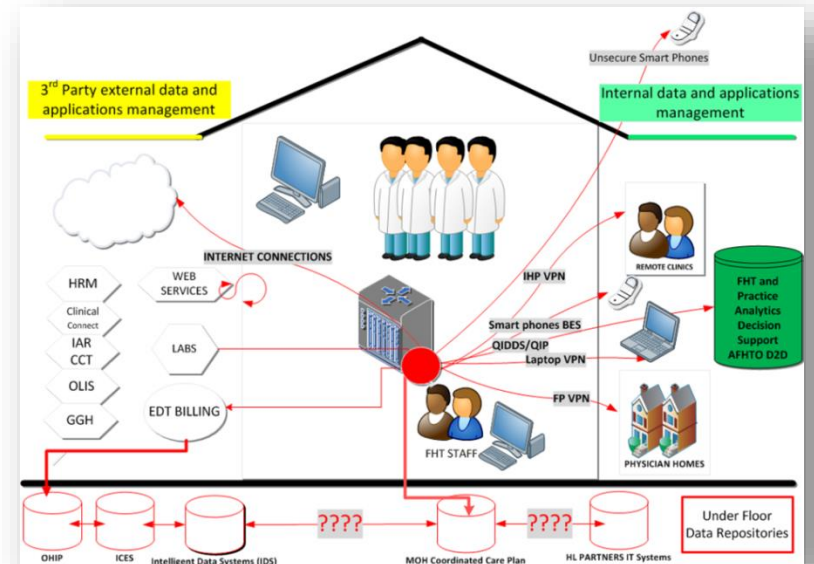
A PLAN TO SUPPORT PERFORMANCE AND ACCOUNTABILITY



INCREMENTAL STEPS TO IMPLEMENTATION

Priority Action: Improve privacy risk management

- Examine and protect our technical vulnerabilities
- Protect liability with effective cyber insurance
- Use Stewardship Agreement to cement GFHT agent relationship with our clinics
- Get real about training personnel on privacy behaviours



Threat Risk Assessment (TRA)

Risk Assessment Check List

Information Security Policy

	Yes	No	In Progress
1. Information security policy document			
Does an Information security policy exist, which is approved by the management, published and communicated as appropriate to all employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does it state the management commitment and set out the organizational approach to managing information security?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Review and Evaluation			
Does the Security policy have an owner, who is responsible for its maintenance and review according to a defined review process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the process ensure that a review takes place in response to any changes affecting the basis of the original assessment, example: significant security incidents, new vulnerabilities or changes to organizational or technical structure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Organizational Security

Information security infrastructure

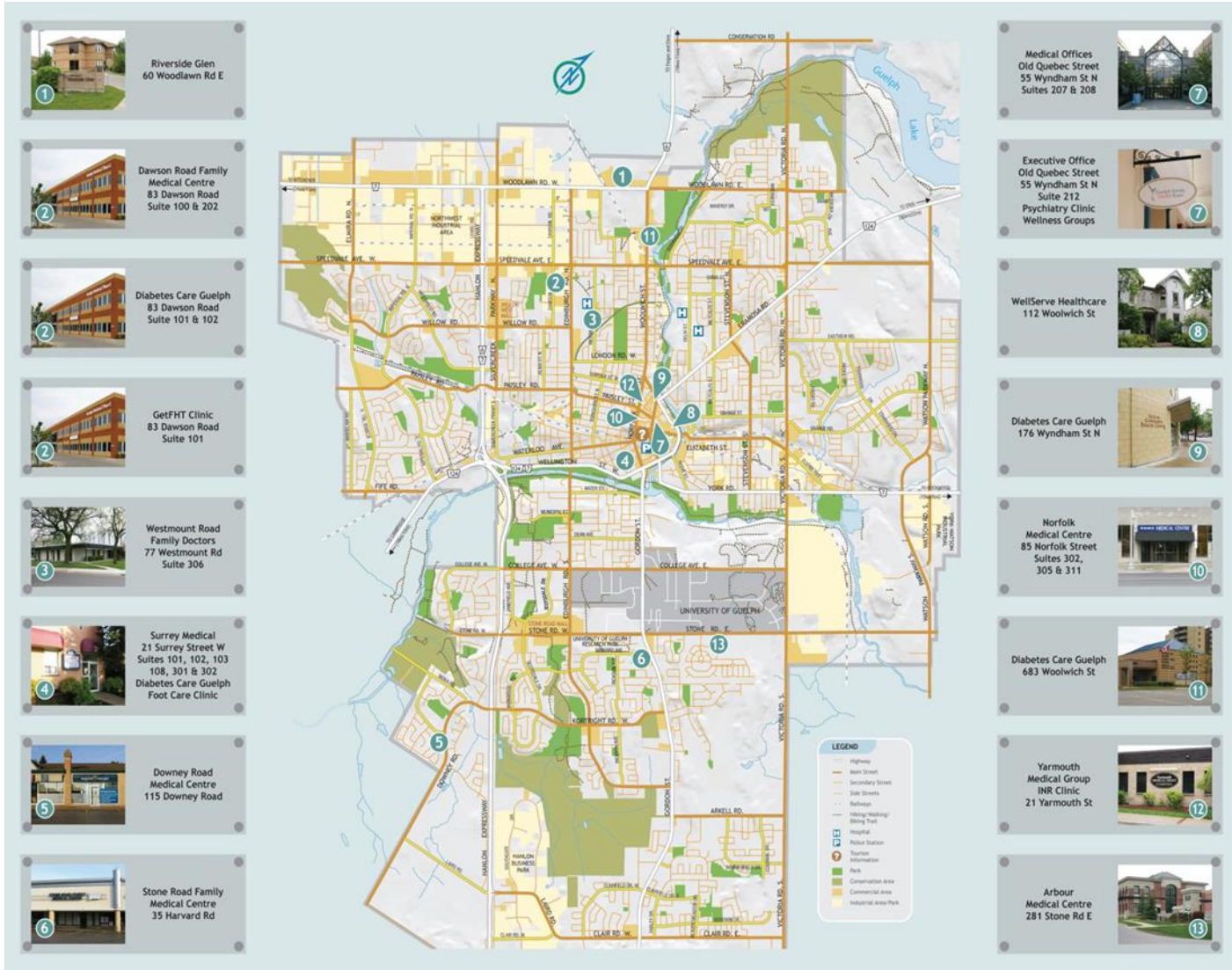
1. Allocation of information security responsibilities			
a. Are responsibilities for the protection of individual assets and for carrying out specific security processes clearly defined?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Co-operation between organizations			
a. Are the appropriate contacts with law enforcement authorities, regulatory bodies, utility providers, information service providers and telecommunication operators maintained to ensure that appropriate action can be quickly taken and advice obtained, in the event of an incident?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Independent review of information security			

<http://www.wvdhhr.org/han/security/riskchecklist.pdf>



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Riverside Glen
60 Woodlawn Rd E



Dawson Road Family Medical Centre
83 Dawson Road
Suite 100 & 202



Diabetes Care Guelph
83 Dawson Road
Suite 101 & 102



GetFHT Clinic
83 Dawson Road
Suite 101



Westmount Road Family Doctors
77 Westmount Rd
Suite 306



Surrey Medical
21 Surrey Street W
Suites 101, 102, 103
108, 301 & 302
Diabetes Care Guelph
Foot Care Clinic



Downey Road Medical Centre
115 Downey Road



Stone Road Family Medical Centre
35 Harvard Rd



Medical Offices
Old Quebec Street
55 Wyndham St N
Suites 207 & 208



Executive Office
Old Quebec Street
55 Wyndham St N
Suite 212
Psychiatry Clinic
Wellness Groups



WellServe Healthcare
112 Woolwich St



Diabetes Care Guelph
176 Wyndham St N



Norfolk Medical Centre
85 Norfolk Street
Suites 302,
305 & 311



Diabetes Care Guelph
683 Woolwich St



Yarmouth Medical Group
INR Clinic
21 Yarmouth St



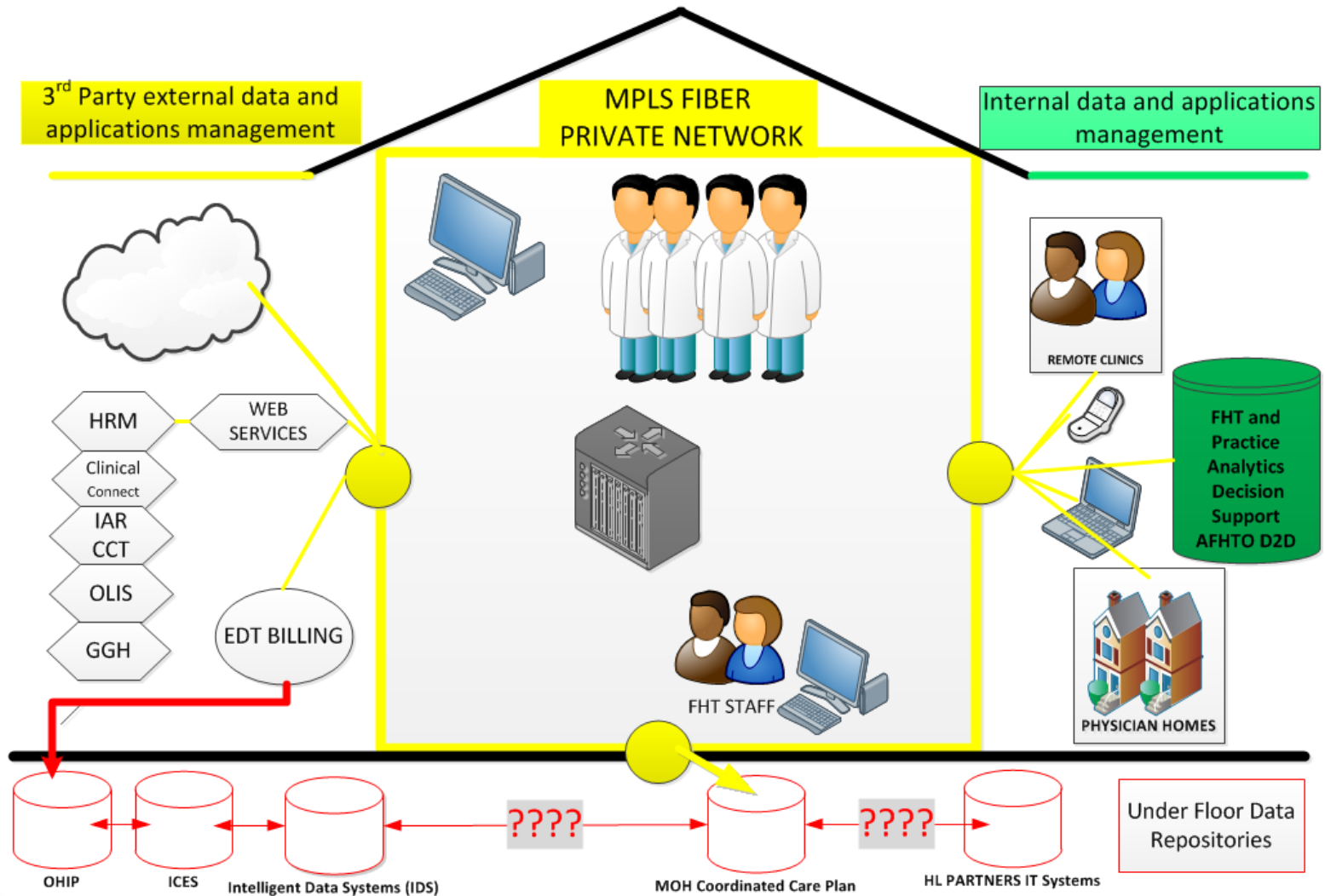
Arbour Medical Centre
281 Stone Rd E



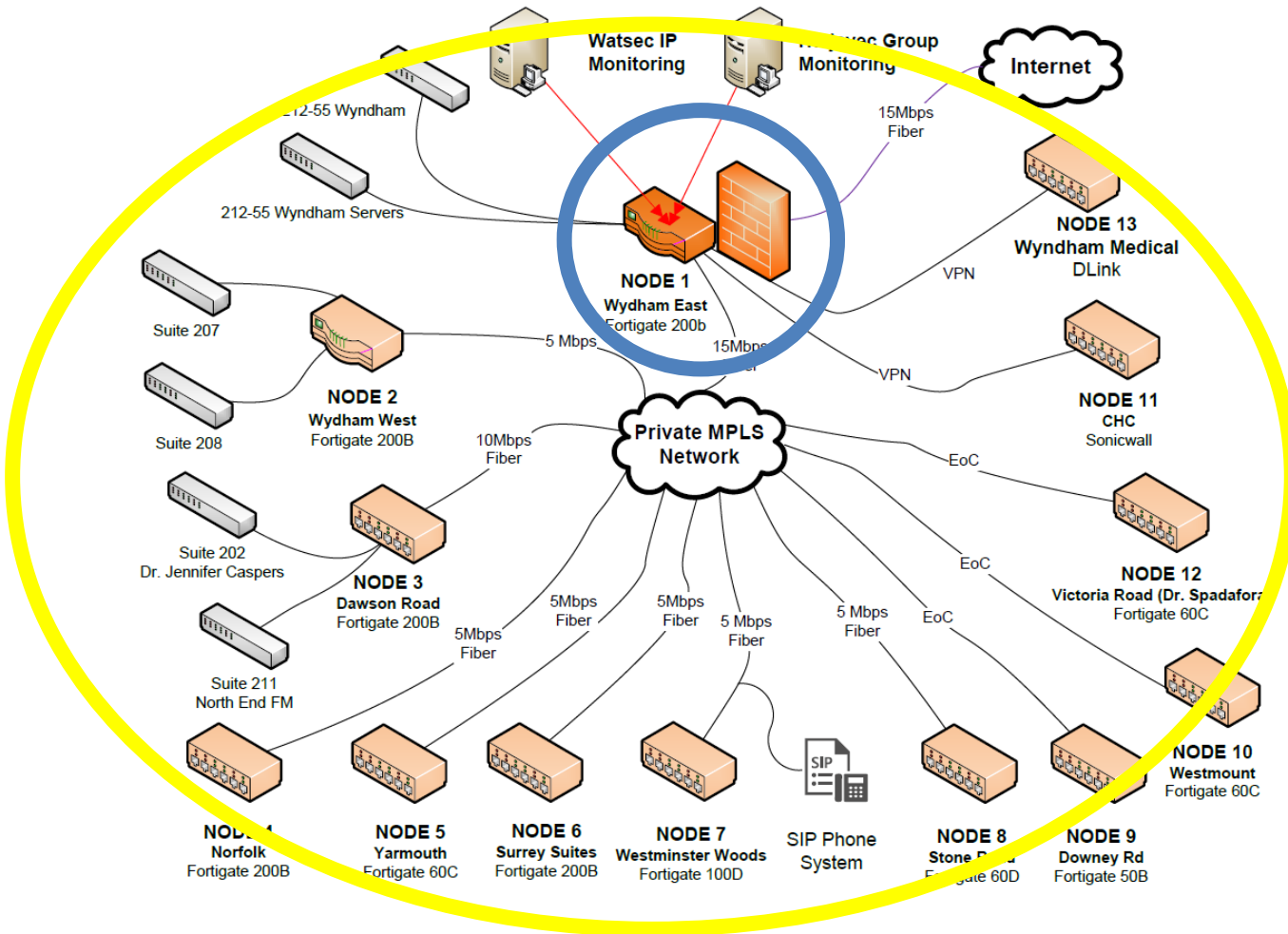
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2015

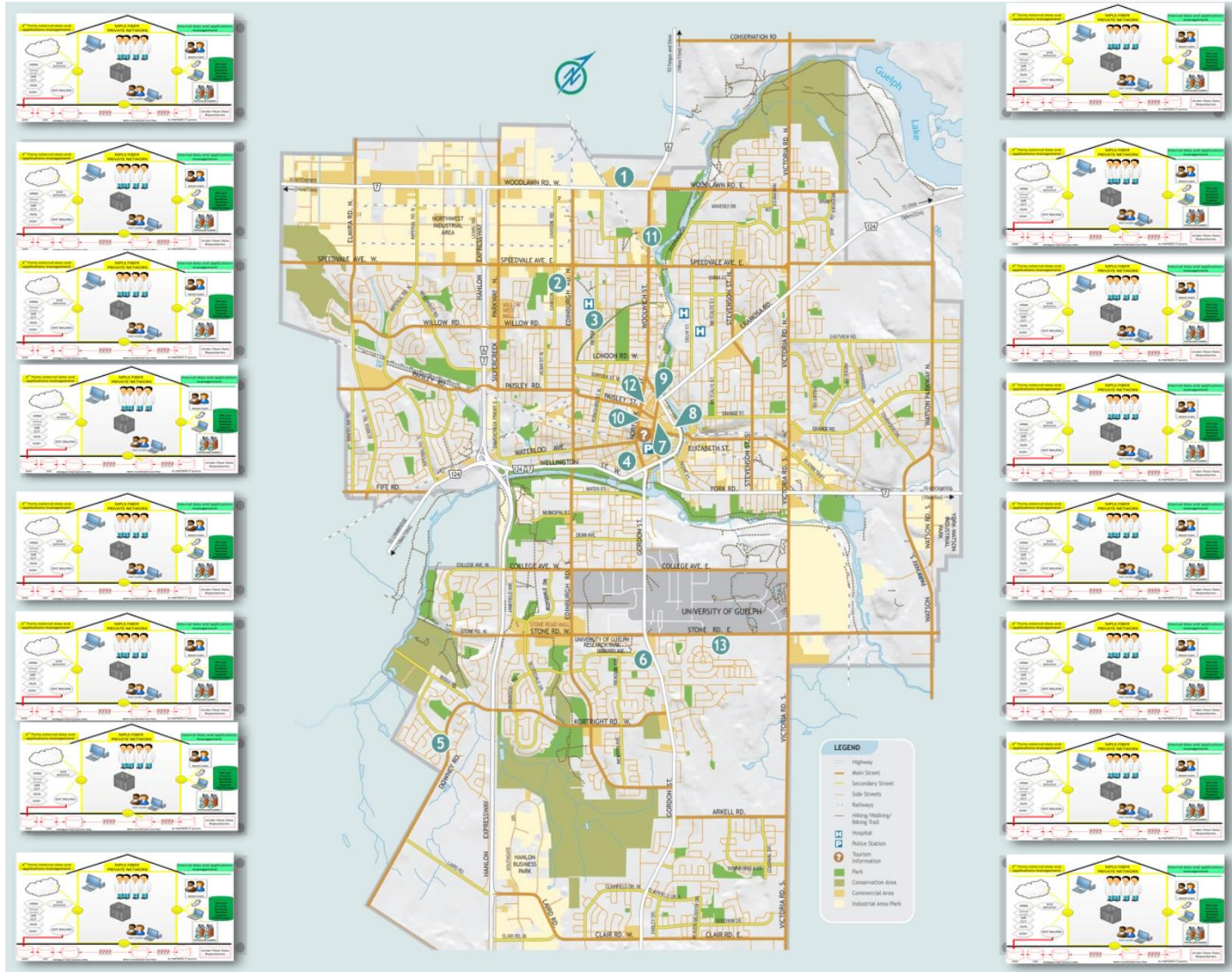


GFHT MPLS Network



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CYBER LIABILITY INSURANCE

a) Each Participant, while a Participant, shall maintain in full force and effect general liability insurance that shall name each of the other Participants as an additional insured but only with respect to this Agreement, and shall include at least the following:

(i) products and completed operations;

(ii) data liability;

(iii) personal injury;



55 University Avenue Suite 550 Toronto, Ontario M5J 2H7
Telephone: (416) 601-2155 Fax: (416) 601-2166 info@creechurch.com
www.creechurch.com

CYBERPLUS INFORMATION SECURITY & PRIVACY INSURANCE APPLICATION

FOR PURPOSES OF THE *INSURANCE COMPANIES ACT (CANADA)*, THIS DOCUMENT WAS ISSUED IN THE COURSE OF LLOYD'S UNDERWRITERS' INSURANCE BUSINESSES IN CANADA.

ALL QUESTIONS MUST BE ANSWERED COMPLETELY. DO NOT LEAVE ANY SPACE BLANK. INDICATE [N/A] IF A QUESTION IS INAPPLICABLE. IF THE SPACE PROVIDED IS INSUFFICIENT TO ANSWER A QUESTION FULLY, PLEASE ATTACH DETAILS ON A SEPARATE SHEET.

1. GENERAL INFORMATION

A) Name of Applicant: Guelph Family Health Team

(Please show complete name as you wish it to appear on the policy)

Guelph FHT has a specific \$1 million policy for cyber liability insurance



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CYBER LIABILITY INSURANCE

- "This is the fastest growing area of commercial insurance in the world right now," said Michael Peterson, a managing director at Marsh Canada Limited.
- "Organizations are realizing that the risk is real, that they're not quite as secure as they thought and, therefore, they're taking steps to transfer that exposure to insurance companies."
- Brokers, like Aon and Marsh, estimate there are about two dozen Canadian insurers who provide stand-alone cyber network policies. Most of these underwriters provide cafeteria-style policies, in which clients can pick which losses they want to protect against.



HARMONIZED PRIVACY POLICY

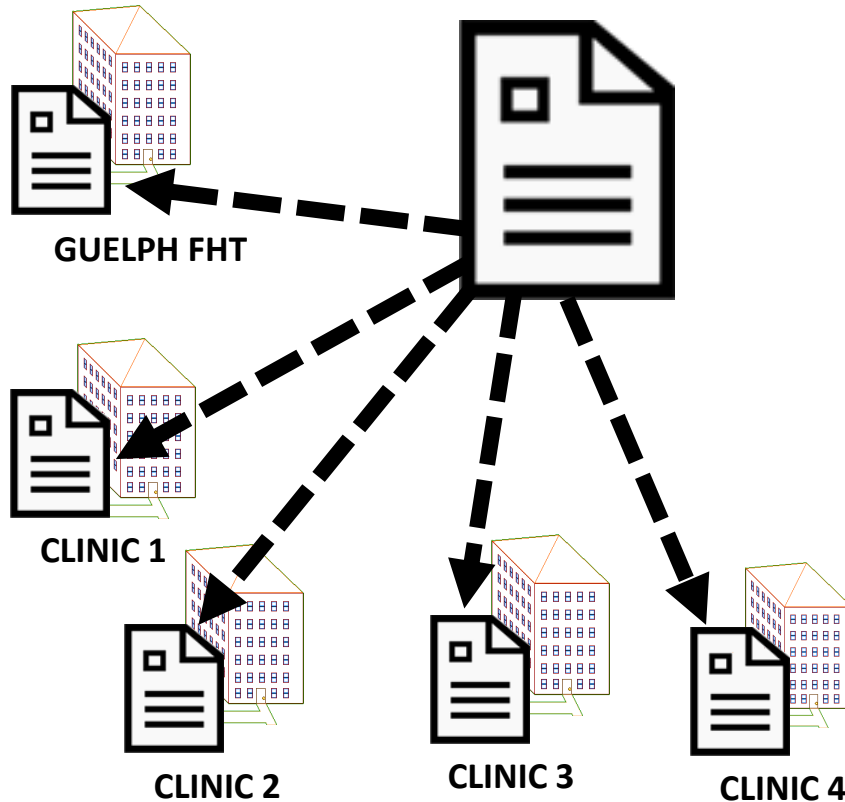
- TAKING ADVANTAGE OF THE COMMON THEMES IN PRIVACY RISK MANAGEMENT
- ENSURING WE CAN ALL WORK FROM THE SAME PAGE



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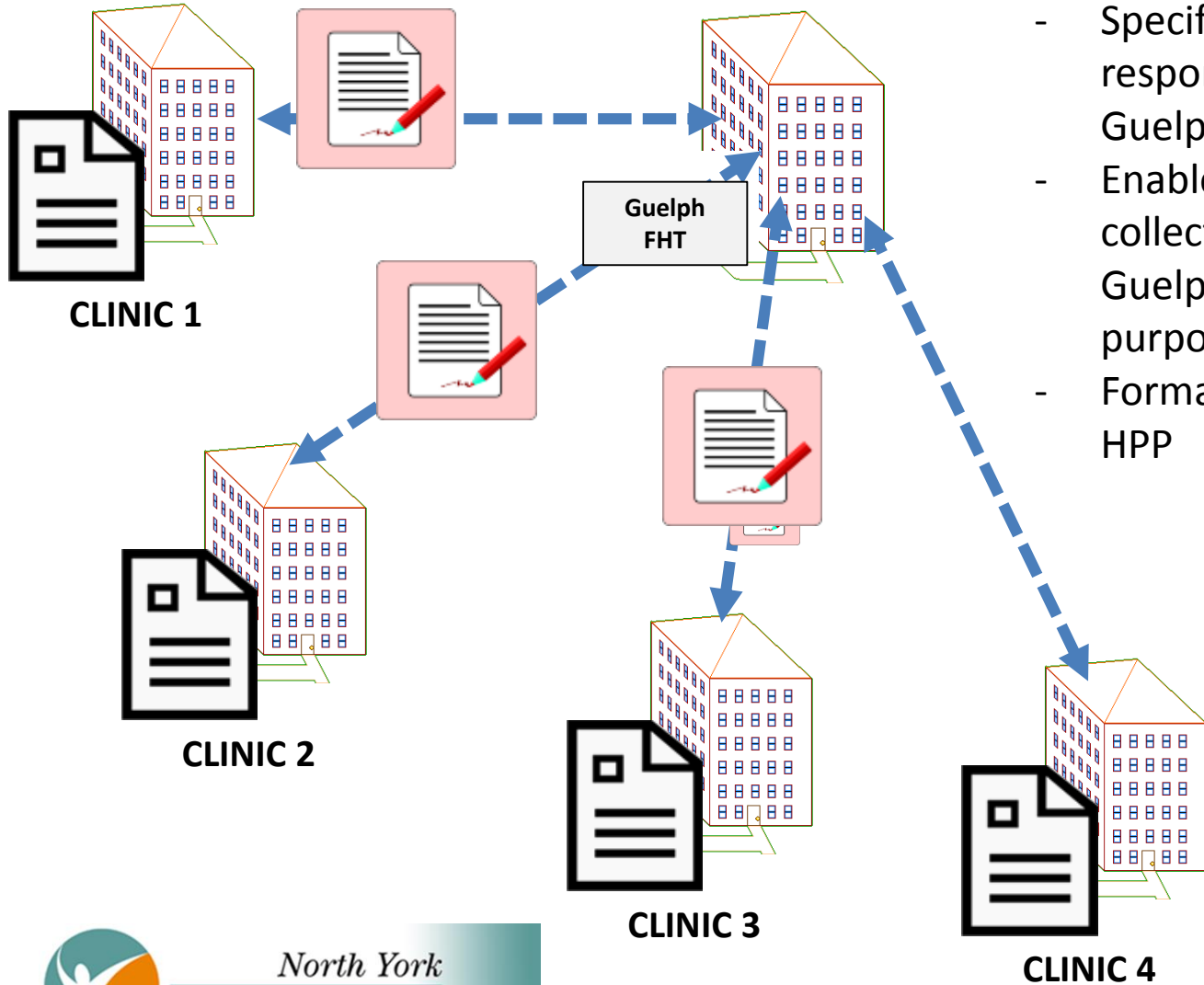
Harmonized Privacy Policy (HPP)



- The HPP is a common set of privacy policies and procedures
- All clinics should adopt the HPP to ensure consistency
- The HPP is lawyer-reviewed and approved, and meets all PHIPA obligations



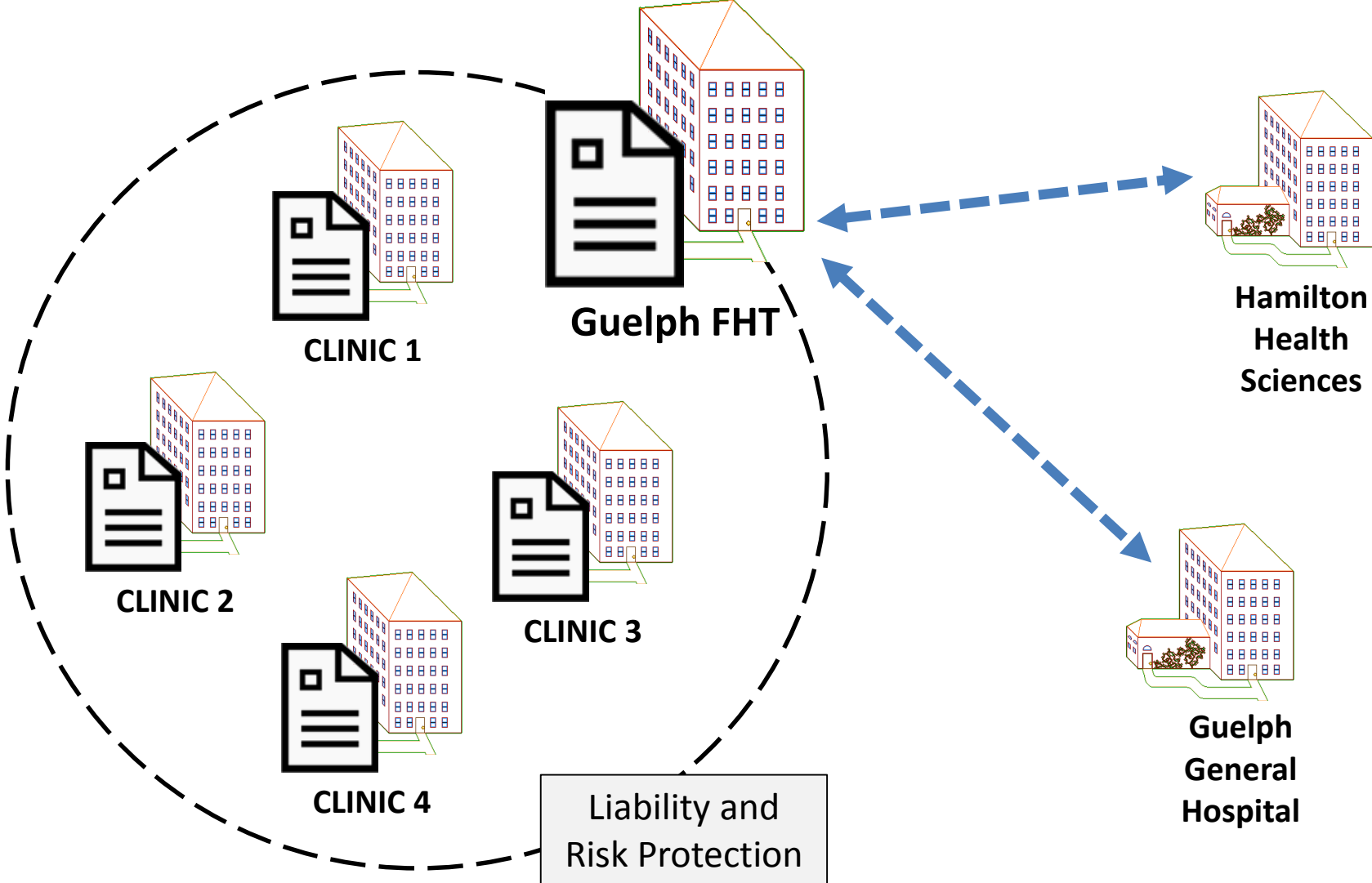
Stewardship Agreement



- Specifies roles and responsibilities between the Guelph FHT and clinics
- Enables and legitimizes the collection of data by the Guelph FHT, for specified purposes, as an agent
- Formalizes the adoption of the HPP

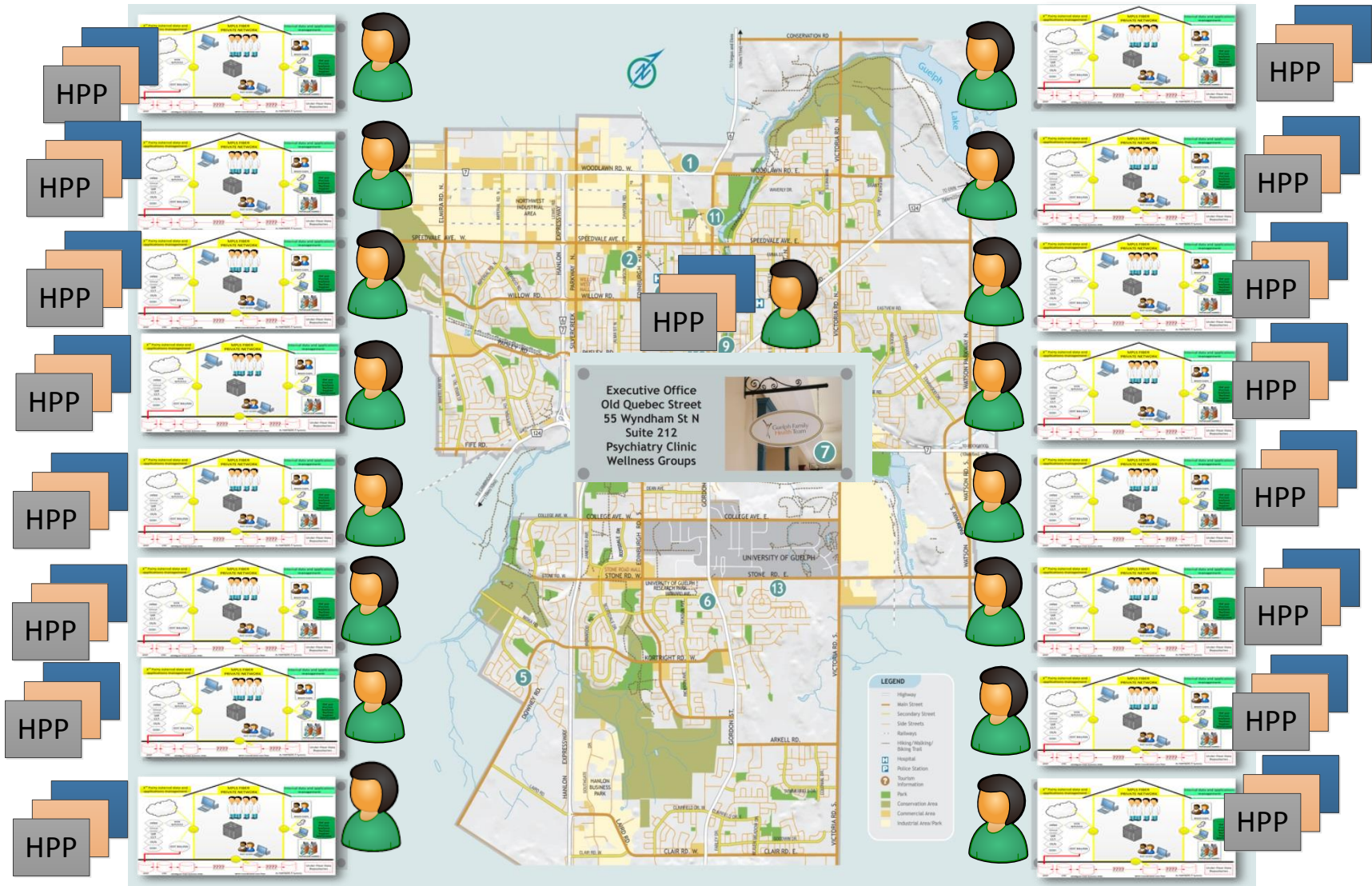


Through the adoption of the HPP and the Stewardship agreement, clinics are able to participate in data exchange programs, maintain their legal commitments under PHIPA and benefit from liability and risk protection





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Guelph Family Health Team and Member Clinics Harmonized Privacy Policy (HPP)

DETAILED POLICIES FOR THE PROTECTION OF PERSONAL HEALTH INFORMATION

1. Privacy Principle 1: Accountability

The physicians associated with the Guelph Family Health Team are designated as personal health information custodians (**HICs**) under the *Personal Health Information Protection Act* (PHIPA).

GFHT acts as a privacy steward on behalf of our physicians in their role as HICs with PHIPA. For the purposes of PHIPA, GFHT and GFHT staff are acting as agents of the individual physicians.

However, in situations where GFHT provides allied health services, and is not rostered to individual physicians, GFHT acts as the HIC for those services. This HPP shall be interpreted to give GFHT the accountability for those services.

In the HPP, we use the language of **"Team Members"** to refer to all GFHT staff, students and shared commitment to protecting personal health information.

GUELPH FHT AND PHYSICIANS OF THE DAWSON ROAD FAMILY MEDICAL CORPORATION

PRIVACY STEWARDSHIP AND PHIPA AGENCY AGREEMENT

THIS AGREEMENT is dated as of * day of *, 2015

BETWEEN:

Guelph Family Health Team
an Ontario non-share corporation located at
55 Wyndham Street North, Suite 212
Guelph, Ontario N1H 7T8

(the "FHT")

- and -XXXXXXX

(individually referred to as a "Physician" and collectively referred to as the "Physicians")

Background

- A. The Physicians are funded by the Ministry of Health & Long Term Care ("MOHLTC") to provide primary care services. The Physicians work together as a Family Health Organization ("FHO") operating as Dawson Road Family Medical Clinic (the "Clinic") located at 83 Dawson Road, Guelph, Ontario.



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PERSONNEL TRAINING

Online videos that include learning assessment questions are increasingly available

Introduction

Objectives

- Provide understanding of your privacy and security obligations related to the cSWO Regional Clinical Viewer, ClinicalConnect™

Agenda

- Definitions ✓
- Viewing Personal Health Information and Consent ✓
- Protecting Personal Health Information ✓
- Privacy Breaches and Security Incidents ✓



ClinicalConnect™

CONNECTING SOUTH WEST ONTARIO



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PERSONNEL TRAINING



ClinicalConnect
Secure Sign In

Online
resources
now
available

- About
- For Patients
- Get Connected
- Resources
- LRAs
- Privacy Officers
- Contact
- Forum

Privacy Officers

This information is for ClinicalConnect Participating Organizations' Privacy Officers who have been given log in access to the Privacy SharePoint site.



[Privacy Officers SharePoint](#)

This secure SharePoint site is designed to provide Privacy Officers with access to Minutes of Upcoming and Past Privacy Meetings, Resources and Tools for Privacy Members, Policies and Procedures, Calendar of upcoming events and a forum to have electronic discussion of current and relevant topics for our group.



[Auditors SharePoint](#)

This secure SharePoint site is designed to provide authorized Auditors access to Audit education resources, a members discussion forum and calendar of events.



[Privacy & Security Self-Assessment through AGS](#)

For prospective Privacy Officers looking for instructions on how to use the Access Governance System to submit the Privacy & Security Self-Assessment, please click the link above.

> About ClinicalConnect

- Testimonials
- Integration Status
- Participating Organizations
- Technical Specifications
- Monthly eUpdates
- News & Events
- Privacy
- Supporting Health Links

> For Patients

> Get Connected

- Partnered Health Service Providers
- Non-Credentialed Physicians
- Becoming a Participating Organization
- Physicians Sponsoring Their Staff
- Physicians: Download to EMR

> Resources

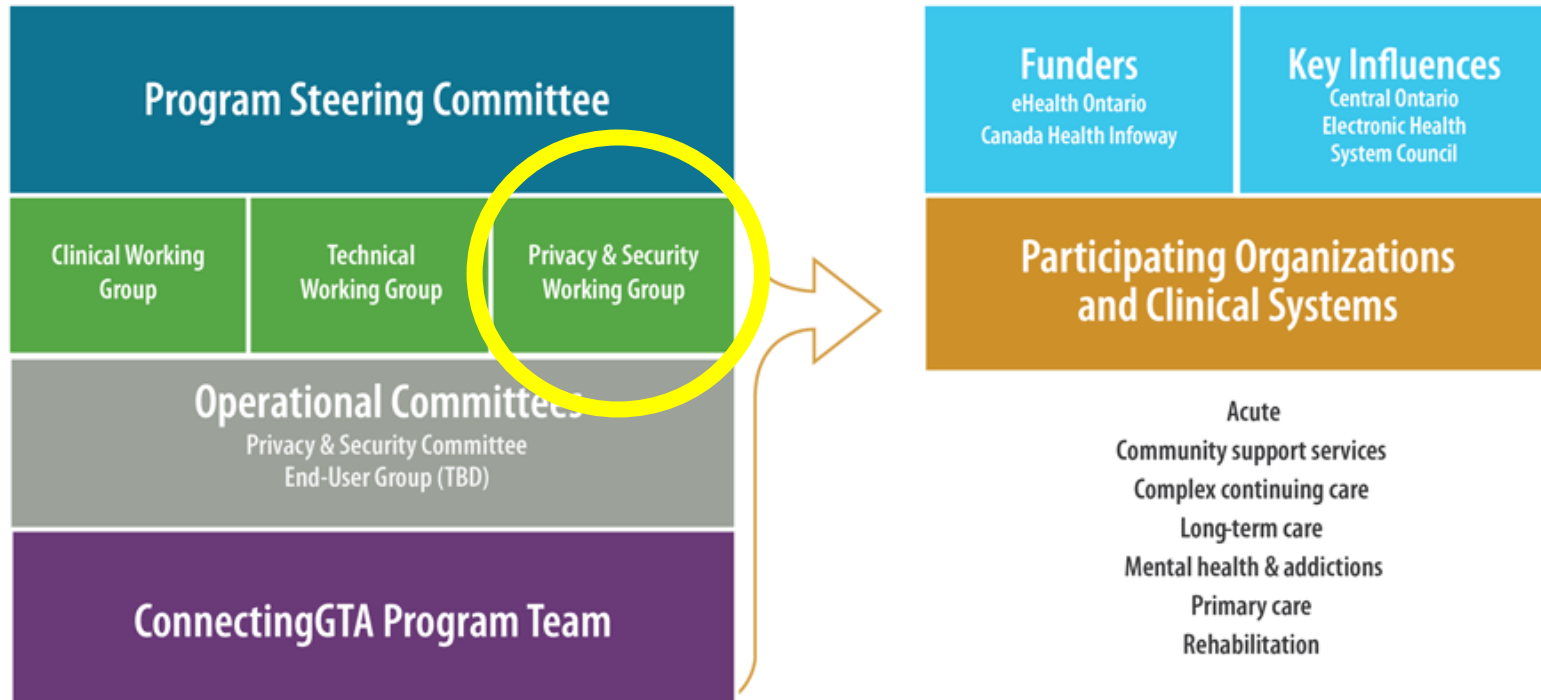
- Overview Materials
- Modules & Functionality
- eLearning Tutorials
- Reference Guides
- Access Governance System (AGS)
- EMR Download
- Other Resources



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PRIVACY TRAINING RESOURCES



<http://www.ehealthontario.on.ca/en/regional-partners/view/cgta/committees/#wave>



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Process, Tools and Techniques to Minimalize Risk in Privacy and Security Management

North York Family Health Team's Experience



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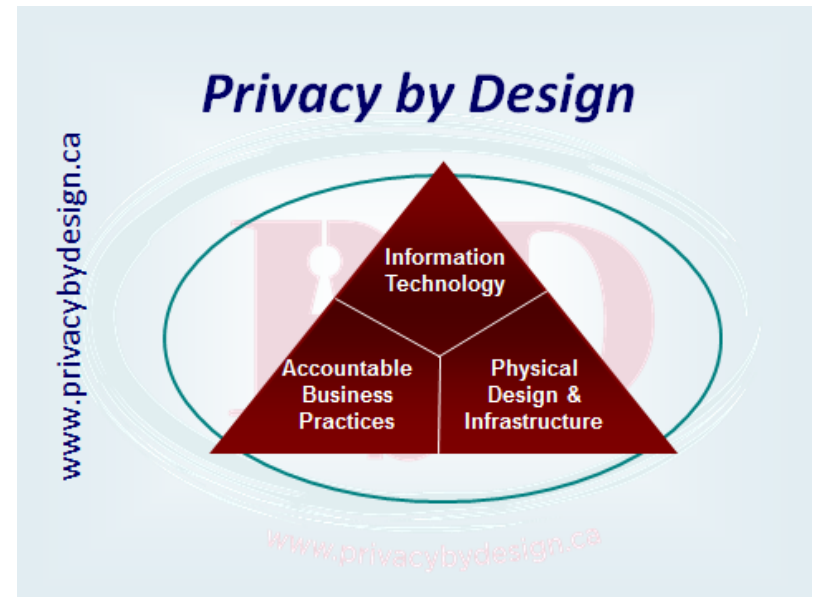
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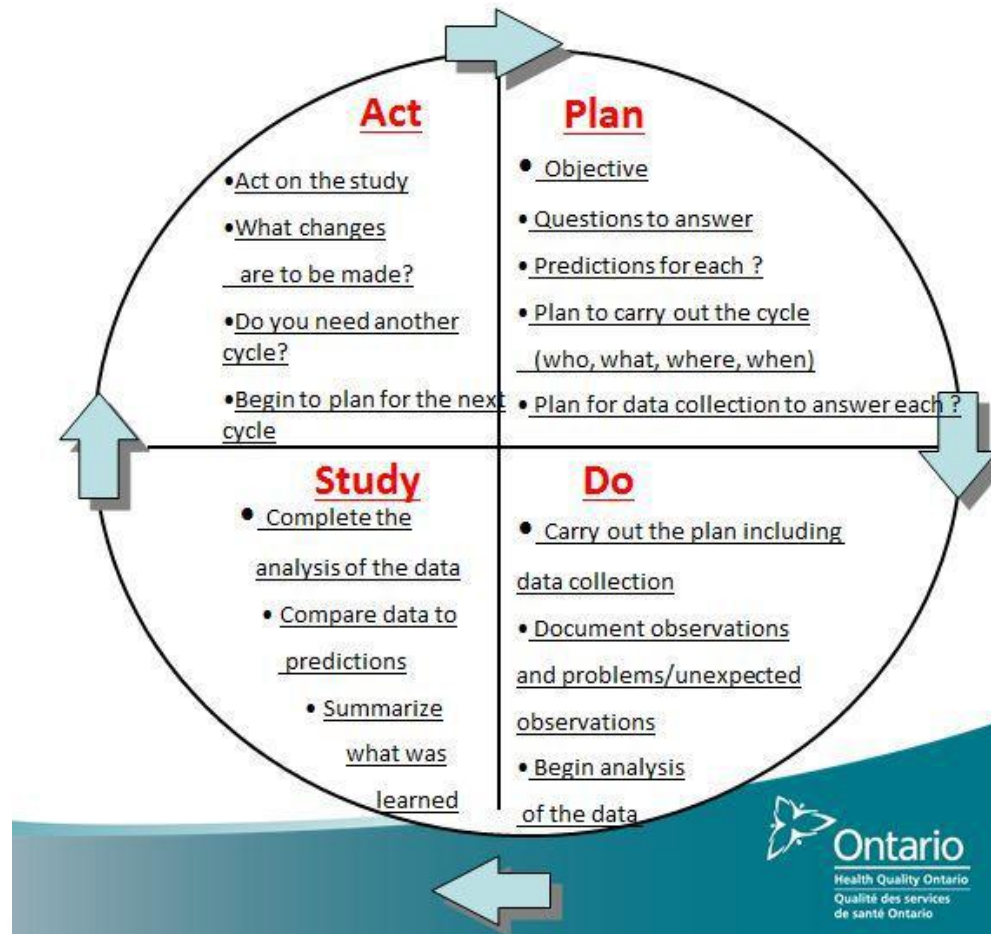
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Privacy by Design

- 7 principles
 - Data minimization
 - Controllability
 - Transparency
 - User friendly systems
 - Data confidentiality
 - Data quality
 - Use limitation

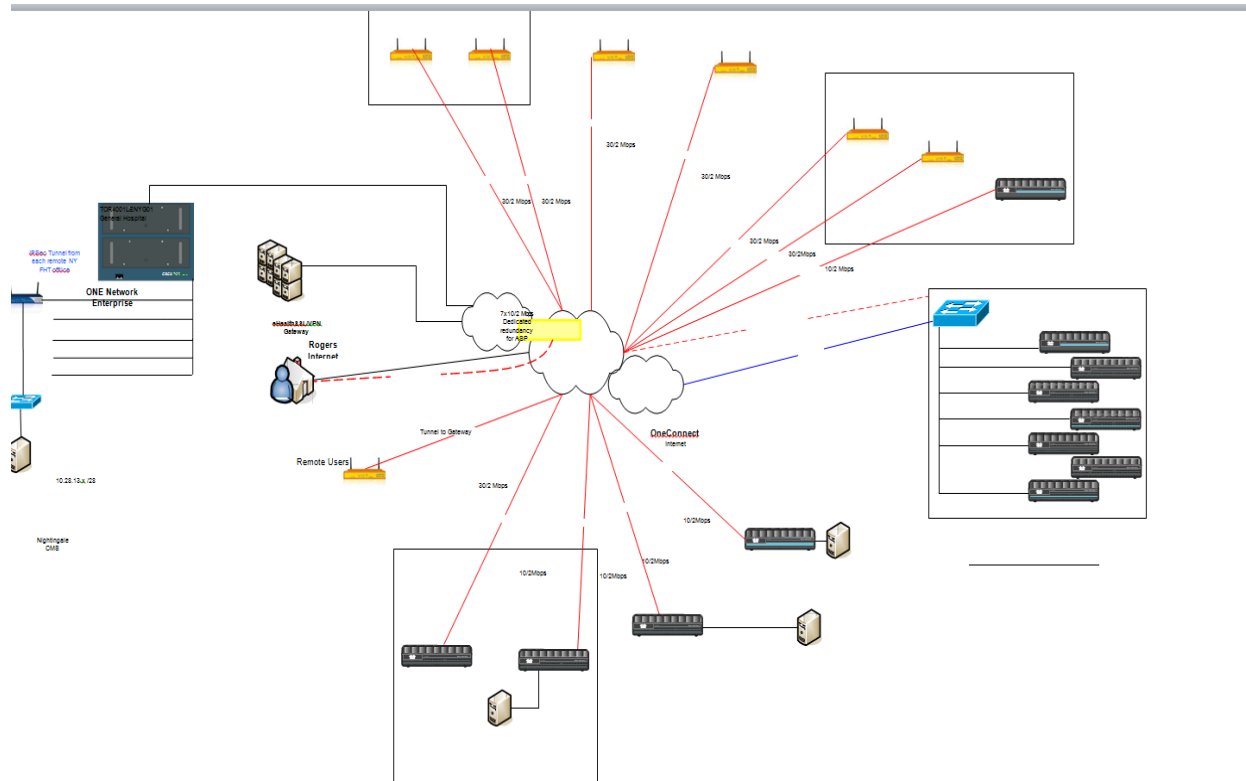


The PDSA Cycle for Learning and Improvement



Network Infrastructure


- 74 physicians
- 49 employees
- 80,000 patients



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Governance and Accountability

 <p>North York Family Health Team</p> <p>BOARD POLICIES & PROCEDURES</p>	Policy Number: GP – ***
	Approval Date:
	Date Reviewed: Review – 3 Years
SECTION: NYFHT Medical Staff – Policies and Procedures	
SUBJECT: Medical Staff Contract Policy and Procedures	

A. Introduction

The Board of Directors is responsible for contracting annually with Medical Staff for the Corporation, in accordance with the Corporation's by-law.

In order to access and/or receive NYFHT Services, an eligible physician must complete and submit a signed copy of the Contract and must be admitted by NYFHT's Board as a member of NYFHT's Medical Staff.

Supporting Rationales for this Policy

- Enable more efficient provision of NYFHT Services;
- Facilitate clear understanding and alignment of duties, roles and responsibilities; and
- Demonstrate appropriate attention to risk management considerations.

B. Definitions

In this Policy and Procedures,

(a) "EMR Records" means the records of personal health information relating to the Medical Staff member's patients, which records are held in the electronic medical record owned by the physician:

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Between North York Family Health Team (NYFHT) and NYFHT Medical Staff

You are responsible for completing this Application honestly and candidly. All answers must be provided. Incomplete Applications will be returned to the Applicant. Capitalized words and phrases are defined in NYFHT's Medical Staff Contract Policy and Procedures.

PART ONE – BASIC INFORMATION

(Please print name and address)

City: _____

Province: _____

Fax No: () _____

Apt. No.: _____

Postal Code: _____

Telephone Number: () _____

Home Fax: () _____

Suite Number: _____

City: _____

Province: _____

Fax No: () _____

Postal Code: _____

Telephone Number: () _____

E-Mail: _____



PART THREE – PRIVACY STATEMENT AND PHIPA AUTHORIZATION OF NYFHT AND NYFHT STAFF

PRIVACY STATEMENT

NYFHT is committed to receiving and treating personal information in confidence. The information in this Contract is collected and used by and on behalf of NYFHT for the purposes of evaluating the Applicant's eligibility to become a member of NYFHT's Medical Staff.

PHIPA AUTHORIZATION OF NYFHT STAFF

In submitting this Application, I confirm that I am the owner of the EMR Records relating to my patients. I further confirm that I am in compliance with my obligations as a health information custodian, as provided by the *Personal Health Information Protection Act* ("**PHIPA**"), and that I have taken all necessary and appropriate steps to safeguard the privacy and security of all records of personal health information for which I am responsible. If my Application is accepted by NYFHT:

- (a) I agree to indemnify NYFHT, its staff, agents, directors, and officers from all costs, damages, fines, penalties or other liabilities arising from a breach of my obligations under PHIPA or the confirmations provided in this Contract; and
- (b) NYFHT agrees to indemnify me from all costs, damages, fines, penalties or other liabilities arising from a breach of NYFHT and/or NYFHT staff obligations under PHIPA.

I understand that if NYFHT staff is to provide services to my patients, I, as the health information custodian of my patients' EMRs, must authorize NYFHT and NYFHT staff to act as my agents in accordance with PHIPA.

Accordingly, I hereby agree that NYFHT and NYFHT staff may access, collect, use, and/or disclose EMR Records for the following authorized purposes:

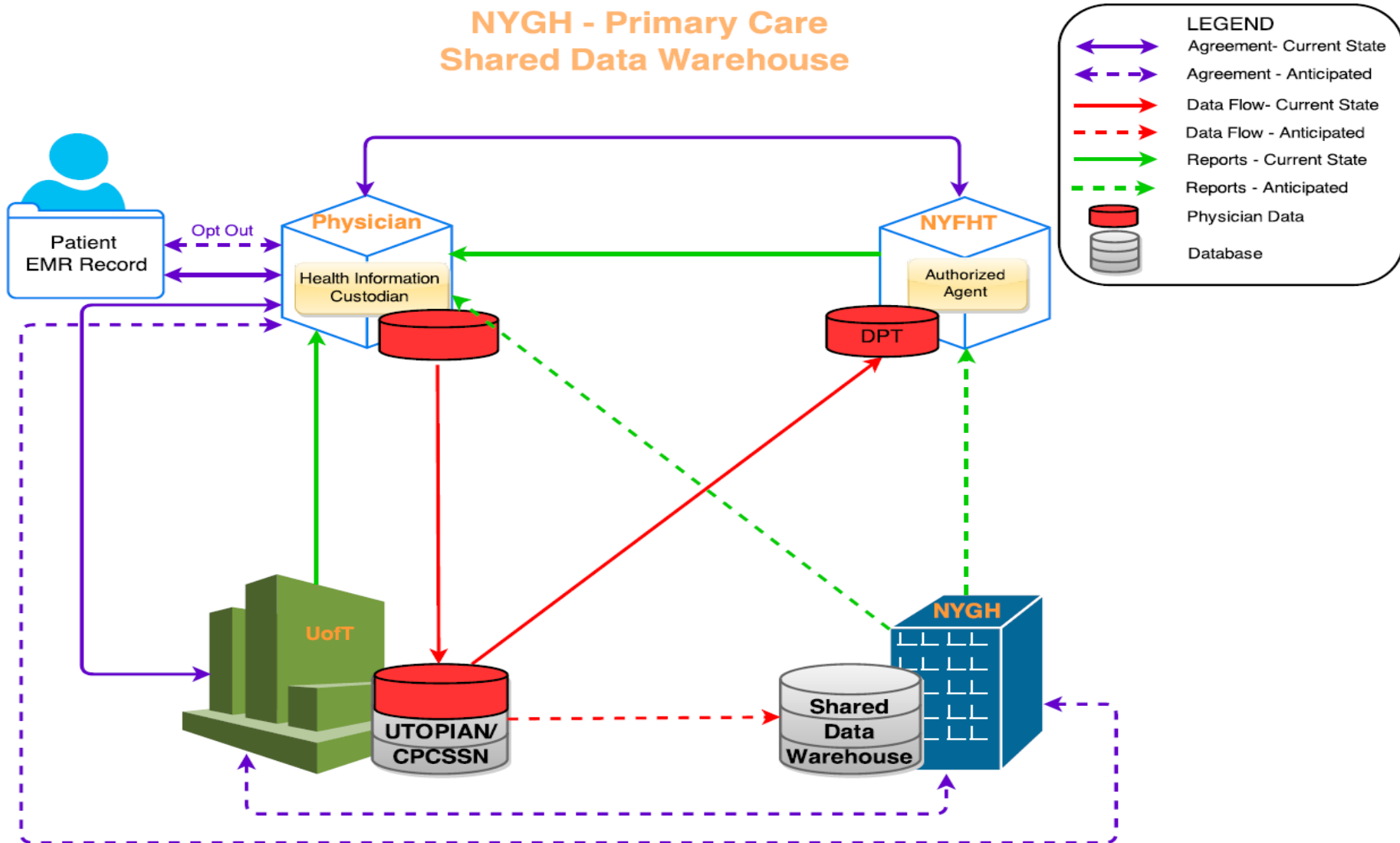
- (a) to fulfill their clinical and professional obligations to shared patients;
- (b) to fulfill their privacy obligations;
- (c) to fulfill their administrative functions;
- (d) to defend themselves in regulatory and/or other legal or administrative proceedings; and
- (e) to perform their own reasonable business functions as otherwise permitted or required by law (for example, for other permitted uses or disclosures recognized under PHIPA),

provided that all such access, collections, uses and or disclosures are in compliance with PHIPA.

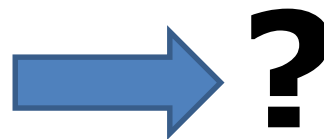


External Risk

NYGH - Primary Care Shared Data Warehouse



Internal Risk



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Assessing the Risk

- Employees completed a pre-training survey
- 83% response rate
- Areas of concern/focus identified from survey responses



Employee Development

- Consultation with privacy expert, Michelle Chibba (*Past Director, IPC, Ontario*)
- Training session created based on survey results
- All staff asked to attend a PHIPA training “Lunch and Learn”



Evaluating

- Post-training survey distributed to staff to complete
- What were the results?



Control and Monitor

- Review and develop internal policies
- Provide further opportunities for employee development
- Perform internal audits
- Annual review by all staff of privacy and confidentiality policies and procedures



Conclusions

- Privacy concerns are increasingly important
- Emerging electronic technology impacting privacy and security is a reality
- Educate your employees and ask for their assistance in legislation compliance
- Sound privacy management is sound risk management

