

About Privacy

There are three fundamental constructs to bear in mind when considering the privacy of personal information strictly from the viewpoint of the individual:

1. The individual described by the personal information controls it – not the organization holding the information.
2. Privacy is not about preventing access to an individual's information. It is about allowing information to be collected, used and disclosed in accordance with the specific wishes of the individual.
3. Privacy, Security and Confidentiality are not the same thing. Although there is some overlap in definition, their individual meaning and intent must not be confused.
 - *Privacy* relates to people, process and accountability. It gives individuals control over their personal information, and requires them to grant permission to an organization for the collection, use, disclosure and retention of that information.
 - *Security* is the essential component for preventing inadvertent release of personal information. Security also relates to the availability and integrity of personal information.
 - *Confidentiality* addresses only the disclosure of personal information.

Definition of Personal Information (PIPEDA)

For the application of this policy, **personal information** means:

1. The personal address, telephone number or email address of the individual.
2. Any identifying number assigned to an individual which can lead to their identification (e.g. Social Insurance Number).
3. Information about an individual's income and assets.
4. Bank account and credit card information.
5. Information about rent payment history.
6. Information relating to the race, national or ethnic origin, citizenship status, colour, religion, age, sex, sexual orientation, marital or family status of the individual.
7. Information relating to the education, medical, psychiatric, psychological, criminal or employment history of the individual.
8. Credit and rental history reports.
9. Financial information for the purposes of establishing Rent-Geared-to-Income Assistance.
10. An individual's blood type or fingerprints.
11. Information about an individual's personal or political opinions.

12. Correspondence sent to Alpha Court that is of a private or confidential nature, and any replies from Alpha Court that would reveal contents of the original correspondence.
13. The individual's name if it appears with other confidential information (e.g. rental arrears reports)
14. Employee information including résumés, salary and benefits, disciplinary action, bank account information, tenant complaints about the individual, and problems between staff.

Personal information **does not** include:

- the name, position and business phone number of employees
- statistical data, which is summarized in such a way as to not identify any individuals.
- Business contact information and certain publicly-available information such as name, address and telephone number (as published in telephone directories)

DEFINITION OF PERSONAL HEALTH INFORMATION (PHIPA)

Personal health information includes identifying information about an individual that:

- Relates to his or her physical or mental health
- Relates to providing health care, including identifying a provider of health care
- Is a plan of service within the meaning of the Long-Term Care Act
- Relates to the donation of a body part of bodily substance
- Is a health number
- Identifies a substitute decision-maker of that individual
- Is in a record where the record contains any of the above information

Personal health information **does not** include identifying information about an employee or Alpha Court or other health care providers.

Health Information Custodian (HIC)

Alpha Court is a designated HIC under PHIPA. As such we may share a client's personal health information with other HIC's involved in the provision of health care. This concept is referred as to the "**circle of care**", which refers to those custodians and agents with whom personal health information can be shared on the basis of an implied consent. (Refer to 3.0 Consent)

Agents

Individuals employed by or volunteering for the health care custodian are considered "agents" of the custodian. Agents act with the authority of the HIC. Provision of personal health information to or by an agent is considered to be done to or by the health records custodian,

HIC's include:

- A person providing health care for pay
- A long term care provider
- Community care access centers

- Community health or mental health clinic, center program or service
- Hospital, nursing home or independent health facility
- Pharmacy, ambulance service or laboratory
- Home for special care

Excluded from the list of health care custodians are:

- An Aboriginal healer
- Midwife
- A person who treats solely by prayer or spiritual means
- Persons acting as agents * of a HIC

Privacy Policies

Principle 1 – Accountability

1.0 Alpha Court is responsible for personal information under its control and will designate an individual who is accountable for the organization’s compliance with the following principles.

The Board of Directors is considered the Health Records Custodian (PHIPA) and as such, holds ultimate accountability for protecting the personal information of clients and residents. The Board will be supported in this activity by delegating the day-to-day operational privacy responsibilities to the Executive Director. All staff share responsibility for adhering to Alpha Court’s policies and procedures

1.1 The Executive Director has been designated Information Officer by the Board of Directors to oversee Alpha Court’s compliance with the principles and will respond to all complaints or inquiries with respect to individual privacy and confidentiality. (see Addendum # 1, Role of Information Officer)

1.2 Alpha Court is responsible for personal information in its possession or custody, including information that has been transferred to a third party for processing. Alpha Court will use contractual or other means to provide a comparable level of protection while the information is being processed by the third party.

The following policies and practices give effect to this policy, including:

- procedures to protect personal information
- procedures to receive and respond to complaints and inquiries
- training staff and communicating to staff information about the PHIPA

Principle 2 – Identifying Purposes

2.0 The purposes for which personal information is collected will be identified by Alpha Court at or before the time the information is collected. The primary purposes include the delivery of care and services, quality management, research, and meeting legal and regulatory requirements.

- 2.1) Identifying the purposes for which personal information is collected at or before the time or collection allows Alpha Court to determine the information they need to collect to fulfill these purposes.
- 2.2) The identified purposes are specified at or before the time of collection to the individual from whom the personal information is collected. Depending upon the way in which the information is collected, this can be done orally or in writing.
- 2.3) When personal information that has been collected is to be used for a purpose not previously identified, the new purpose shall be identified prior to use. Unless the new purpose is required by law, the consent of the individual is required before information can be used for that purpose.
- 2.4) Persons collecting personal information should be able to explain to individuals the purposes for which the information is being collected.

Principle 3 – Consent Consent Requirements

3.0) The cornerstone of privacy legislation is that the person described by the personal information must be able to control it. The individual named must provide consent for collection, use and disclosure of his/her personal information.

- 3.1) In order to consent to the collection, use, and disclosure of personal information, consent must be informed. Alpha Court will make a reasonable effort to ensure that clients are informed:
- Regarding services typically included in the Circle of Care
 - How personal health information is collected, shared and used
 - How Alpha Court ensures that personal health information is secure
 - That the individual may withhold or withdraw their consent for collection and use of personal health information at any time.

Elements of Consent

Consent must:

- Be capable and knowledgeable
- Relate to the information
- Not be obtained by deception or coercion

- assumes that the individual may provide or withhold consent and understands the purpose for gathering, using and disclosing

When is consent obtained

3.2) Express Consent is obtained:

- as part of the application for service process
- annually thereafter and
- when there is a change in purpose, use or disclosure of the information collected.

Types of Consent

3.3) Express Consent is explicit and direct. It may be given verbally, in writing or electronically. Express consent involves expressly asking the individual for consent to collect, use or disclose the information. The response can be verbal, or written (the individual signs a consent form addendum #2 **Notice and Consent Form**). When verbal consent is used the worker should note the response on the application form.

3.4) PIPEDA requires that “Express” consent should be obtained for sensitive information. Personal information collected by Alpha Court Property Management Services such as: physical or mental health, health services provided, psycho social and financial information is considered sensitive. (addendum # 7 **Housing Consent Form**)

3.5) Use of Express Consent

Express consent must be obtained from the client in the following situations

- 1) collection from or disclosure to services/individuals outside of the circle of care or to a non-custodian (addendum #3 **Consent to Disclose Personal Health Information**)
- 2) disclosure to another custodian for a purpose other than of providing or assisting in the provision of health care
- 3) collection, use or disclosure of information for fundraising of information beyond the name and mailing address
- 4) collection for market research
- 5) collection for research unless certain criteria are met
- 6) for the collection and use of sensitive personal information of a tenant of Alpha Court

3.6) Implied Consent is inferred from the surrounding circumstances that the client would reasonably agree to the collection, use and disclosure of their personal health information (that they would provide express consent if asked to do so)

3.7) Ensuring the Assumption of Implied Consent

- 1) Alpha Court will post notices and include a section in their brochures explaining our practices with respect to the collection, retention, use and disclosure of personal health information.
- 2) At the point of intake, Alpha Court staff will explain in detail to clients our practices with respect to collection, retention, use and disclosure of information

- 3) Printed information (notices and brochures Addendum #4 & #5) and privacy practices explained by staff will endeavor to ensure that the client is made aware of and understands their right to withhold or withdraw their consent with respect to the collection and dissemination of their personal health information

3.8) Implied Consent related to the collection, use and disclosure of personal health information permits:

- 1) Information to be shared between custodians within the circle of care for the purpose of providing direct health care
- 2) names and addresses to be used for the purpose of fundraising
- 3) providing information to a representative of the client's religious organization if the client has provided information related to their religious affiliation

3.9) Withholding Consent

- 1) Clients have the right to withhold or withdraw their consent with respect to the collection and dissemination of their personal health information. The withdrawal or withholding of consent can be done so verbally, in writing or electronically. Direction provided by the client to restrict the collection or use of information should be noted in the client's file by the worker.
- 2) In situations where some of the information is being withheld when Alpha Court discloses information to another health records custodian, the receiving custodian must be advised that, consistent with the client's wishes, the information provided them is not complete.
- 3) Where withholding of information may pose a risk to the client, or others, information can be disclosed

3.10) Withdrawal of Consent

Individuals have the right to withdraw consent. However, this provision is dependent on whether the withdrawal may impede the provision of services. Alpha Court's ability to respond to a request for withdrawal of consent must be viewed in the context of the organization's ability to continue to provide services. If services cannot be provided as a result of consent is withdrawal, the individual should be advised that doing so would effectively terminate our service.

3.11) Age of Consent

Capable clients of all ages are entitled to make their own health care decisions. If the child is 15 years of age they can limit the disclosure of information to their parents.

3.12) Capacity

The Substitute Decisions Act identifies specific people who can make decisions on behalf of an individual. The rules outlined in the Substitute Decisions Act should be followed when obtaining consent for the collection, use, disclosure and retention of personal information .

The Health Care Consent Act outlines rules for consent with respect to consent for treatment. These same rules may be applied to the consent for the collection, use, disclosure and retention of personal information.

There is always a presumption of capacity of the individual to make a knowledgeable decision to provide or withhold consent.

3.13) The person is capable if:

- 1) They understand the information relevant to the collection, use and disclosure
- 2) They appreciate the reasonable foreseeable consequences of giving or withholding consent

If there is concern raised with regards to the client's capacity to make a decision they should be referred to a psychiatrist for a capacity assessment.

3.14) Substitute Decision Maker(SDM)

If the decision is not one noted under the Health Care Consent Act, and no attorney or guardian has been appointed the substitute decision maker is the highest ranking qualified person from the following list:

- A representative of the Board
- A spouse or partner
- A parent guardian, or CAS if so empowered
- A parent with only right to access
- A sibling
- Any other relative
- The Public Guardian and Trustee

If the person is deceased, the SDM is the estate trustee or person who assumed responsibility to administer the estate.

Exceptions to Consent

3.15) PIPEDA

Alpha Court may **COLLECT** personal information without the individual's knowledge or consent only:

- If it is clearly in the individual's interest and consent is not available in a timely manner
- If knowledge and consent would compromise the availability or accuracy of the information and collection is required to investigate a breach of an agreement
- If it is publicly available as specified in the regulations

3.16) PHIPA

Personal Health Information may be collected without consent:

- for research allowed under the Act
- As required or permitted by law
- As required for health planning

3.17) Alpha Court may **USE** personal information without the individual's knowledge or consent only:

PIPEDA

- If Alpha Court has reasonable grounds to believe the information would be useful when investigating a contravention of a federal, provincial or foreign law **and** the information is used for that investigation
- For an emergency that threatens an individual's life, health or security
- For statistical or scholarly study or research (the organization must notify the Privacy Commissioner of Canada before using this information)
- If it is publicly available as specified in the regulations
- If the use is clearly in the individual's interest and consent is not available in a timely manner
- If knowledge and consent would compromise the availability or accuracy of the information **and** collection was required to investigate a breach of an agreement

3.18) PHIPA

Personal Health Information may be used without the client's consent

- For risk, error management and quality improvement for Alpha Court
- For staff education
- For court/tribunal matters in which the client is a party
- For processing, monitoring and verifying or reimbursing claims for Ministry of Health and Long-Term Care programs

3.19) PIPEDA

Organizations may **DISCLOSE** personal information without the individual's knowledge or consent only:

- To a lawyer representing the organization
- To collect a debt the individual owes to the organization
- To comply with a subpoena, a warrant or order made by a court or other body with appropriate jurisdiction
- To a government institution that has requested the information, identified its lawful authority and indicates that disclosure is for the purpose of enforcing, carrying out an investigation, or gathering intelligence relating to any federal, provincial or foreign law; or suspects that the information relates to national security or the conduct of international affairs; or is for the purpose of administering any federal or provincial law
- To an investigative body named in the Regulations of the Act or government institution on the organization's initiative when the organization believes the information concerns a breach of an agreement, or a contravention of a federal, provincial or foreign law, or suspects the information relates to national security or the conduct of international affairs.
- If made by an investigative body for the purposes related to the investigation of a breach of an agreement or a contravention of a federal or provincial law.
- In an emergency threatening an individual's life, health, security (the organization must inform the individual of the disclosure).
- For statistical, scholarly study or research (the organization must notify the Privacy Commissioner before disclosing the information).
- To an archival institution.
- Twenty years after the individual's death or 100 years after the record was created .
- If it is publicly available as specified by the regulations.

PHIPA

- Disclosures relating to providing health care
- Disclosures by a facility that provides health care
- Disclosures relating to deceased individuals
- Disclosures for health or other programs
- Disclosures related to risks
- Disclosures related to care and custody
- Disclosures for proceedings
- Disclosures to a successor
- Disclosures for research
- Disclosures for planning and management of health systems
- Disclosures with the Commissioner's approval

Principle 4 – Limiting Collection

The collection of personal information is limited to that which is necessary for the purposes identified by Alpha Court. Information is to be collected by fair and lawful means.

1. Alpha Court will not collect personal information indiscriminately. Both the amount and the type of information collected will be limited to that which is necessary to fulfill the purposes identified including but not limited to:
 - Delivery of care and services
 - Quality management
 - Research
 - Meeting legal and regulatory requirements
2. The requirement that personal information be collected by fair and lawful means is intended to prevent Alpha Court from collecting information by misleading or deceiving individuals about the purpose for which information is being collected. (This requirement implies that consent with respect to collection must not be obtained through deception.)

Principle 5 – Limiting Use, Disclosure, and Retention

POLICY #5.1

All information regarding people using services provided by Alpha Court is confidential and must be treated as such. All personnel (including students) with access to confidential information must use it only in their line of duty. This information must never be discussed with anyone, including other staff members, except for work purposes.

POLICY #5.2

Scope

- a) Access by Alpha Court employees to confidential consumer files shall be based on the "need to know" of those employees in order that they carry out their duties.

That is, relevant consumer information will be available to individual employees for purposes of consumer assessment or treatment, internal administration, audit and quality control, research, statistical compilation or education, dependant on the role of the employee.

- b) Confidential consumer information is accessible to supervisory personnel of the program from which the record of information originated. The information will be available, through the supervisory personnel, to members of that program and to supervisory personnel of other programs as needed.

POLICY #5.3

Breach

Confidentiality is considered to be breached when personnel release or discuss client matters with any third party, unless a court order to do so, without consent from the client to disclose such information.

Disciplinary action may be taken against any personnel who breaches confidentiality. Disciplinary action may range from verbal reprimand, written reprimand, suspension to dismissal, dependent upon degree and severity of the breach, subject to the discretion of the Executive Director.

POLICY #5.4

Consent to Release Information to a Third Party

- a) All personnel shall obtain consent to release information from the consumer before the requested information is released to any third party. (This would include individuals or organizations not considered to be a part of the circle of care, including family members of the consumer.)
- b) All release of information forms whether for receiving or transmitting of consumer information are valid for the period identified on the form. After the time period has elapsed, new forms are required. (addendum # 3 **Consent to Disclose Personal Health Information**)

POLICY #5.5

Third Party Requests

All requests from a third party for consumer information should be made in writing. An exception to this would be a request originating from a family member, which if received verbally, must be documented in the client's file. Information is not released in verbal or written form unless accompanied by a release of information form signed by the consumer. (Addendum #3 **Consent to Disclose Personal Health Information**)

POLICY #5.6

Consumer Access to Files

- a) Consumers may review or access their files upon review of their file by the Program Manager, to assess whether disclosure of contents of a file, or any part of that file would cause harm to the treatment or recovery of the consumer, or cause physical or emotional harm to a third party.

Requests must be made in writing and attached to the consumer's file. Within three working days of receiving the request, the Executive Director shall respond to the consumer in writing, informing the consumer whether or not their request was granted and giving a rationale for that decision. A copy of such letter shall be attached to the consumer's file as well.

- b) The Executive Director will decide on a case-by-case basis if staff need to be present when a consumer reviews his/her file.

If given access to his/her file, under the right to copy/photocopy any or all of their material on their file, the consumer shall absorb the cost for this expense.

- b) Consumer's who are denied total or partial access to files will be given the opportunity to restate their request in person to the Executive Director.
- c) If the consumer is not satisfied with the outcome of the meeting with the Service Director, he/she can appeal in writing to the Chair, Board of Directors.

POLICY #5.7

Research

Access to confidential consumer records by persons external to Alpha Court who are carrying out research shall be granted by the Executive Director, dependent on the following criteria:

- i) information will be transmitted only with the consent of the consumer or in such a form as to mask the identity of the consumer;
- ii) requests for information for external researchers will be in the written form and include the aims or objectives of the research and the method of conducting the research;

- iii) external researchers receiving confidential information must be informed of Alpha Court's policy "Confidential Information" and must be informed of sanctions resulting from any misuse of information.

POLICY #5.8

External Information

Documents, correspondence or reports received from outside of Alpha Court shall not be forwarded to any third party. Such information shall be shared with the written consent of the consumer.

POLICY #5.9

In the event that confidential consumer information is requested for legal use, staff members shall abide by the following considerations:

- i) Consumer files shall be released to a police force only if a search warrant has been presented or if written consent has been received from the consumer.

Notwithstanding the above, the Executive Director, speaking with an officer of the law, may answer "yes" or "no" to the question whether the agency has specific information about a named person.

- ii) Upon receipt of a subpoena or any other process requiring an employee of Alpha Court to attend to give evidence, authorization of the consumer to disclose confidential information shall be obtained in advance of or in preparation for attendance as a witness in the proceedings.
- iii) When a claim is made or an action is brought against Alpha Court by a consumer or a former consumer regarding the care given to the consumer, the Executive Director may disclose the contents of that client's file to the board's liability insurer and solicitor to enable them to ascertain the circumstances giving rise to the claim or action and, where appropriate, to defend the board's position.
- iv) In matters of third party liability, the Executive Director shall deal only with licensed insurance adjusters, insurance companies or solicitors and not with private investigators. Verification of the identity of the person seeking the information shall be sought and consent of the consumer shall be obtained before releasing the information.

POLICY #5.10

PROCEDURE

Alpha Court will ensure that there is a systematic control over the creation, use, maintenance, retention, protection and preservation of confidential information.

I. CONTROL OF OFFICE ACCESS:

- a) During working hours, the office support staff will control access to the premises and direct visitors to appropriate staff and office locations;
- b) After working hours, all office entrances and rooms containing confidential records will be locked;

II. CONTROL OF INFORMATION USE:

- a) At the end of each working day, confidential client files must be removed from desk tops and file trays and returned to appropriate storage areas;
- b) At the end of each working day, confidential waste material must be destroyed and reproduction equipment made inoperable;
- c) Confidential client files being used by authorized personnel is to be concealed from the view of visitors and other unauthorized persons.

III. USE OF STORAGE EQUIPMENT:

- a) Storage equipment containing confidential consumer files shall be secured either by combination and/or key lock or restricted access and the combination numbers and/or keys shall be available only to authorized personnel;
- b) Storage equipment containing confidential consumer files must be identified with confidential labels on their outside;
- c) Areas and storage equipment holding confidential consumer files will be inspected periodically to ensure security is intact.

IV. COMPUTER FILE SECURITY:

Staff are required to "password protect" all consumer files on their computers. Staff should give the password to their respective Program Manager to allow access.

V. CONVERSATIONS:

When staff members need to converse about matters of a confidential nature, discussion should not take place in public areas such as restaurants or hallways where others might overhear the conversation. Whenever possible, such information should be discussed in an office behind closed doors.

POLICY #5.11
Retention of Files

Confidential consumer files shall be retained according to established format and then destroyed in such a manner as to protect the confidentiality of the information contained in the records.

- a) Inactive* confidential consumer files will be put into storage to provide access by authorized personnel** during the retention period.
- b) The retention period for inactive/closed records shall be for 5 years.
- c) With the authorization of the Executive Director and under the supervision of the Administrative-Secretary, the destruction of records be carried out by shredding documents.

Inactive - is determined by type of record and its purpose.

Authorized Personnel - supervisory personnel; employees of a program through their Director.

Policy #5.12 Confidentiality Policy and Agreement
Confidentiality Policy

Clients/residents have the right to protection of all their personal information. Each organization must support the client's/resident's right to privacy. Staff in the organization must be committed to maintaining the privacy and confidentiality of clients and residents and their associated personal and personal health information. Breaches of privacy place the organization at risk.

- a) A condition of employment with Alpha Court is that all employees sign a confidentiality agreement. (Appendix # 6 **Employee Confidentiality Agreement**) This agreement will be placed in the employee's file.
- b) This agreement will be renewed at regular intervals, (with the annual performance review).
- c) Failure to hold the personal information of clients and residents confidential and private may lead to disciplinary action which may include termination of employment.

All personal information of clients, family members, tenants, and staff is confidential and must be treated as such. All personal information requested for release requires a consent from the effected individual and must be released only for the purpose agreed upon.

Confidentiality is considered to be breached when personal information is released by Alpha Court staff/board members, volunteers or students without the consent of the affected individual. A breach will result in an undertaking of progressive discipline ranging from reprimand to

dismissal. Breaches of confidentiality include accessing personal information without authorization to do so and without a need-to-know.

All staff at the time of hiring, and students or volunteers in direct contact with clients/tenants will be required to sign a **Confidentiality Agreement** (addendum #6). Board members are required to sign a **Confidentiality Agreement** at the time of being voted on to the board and on an annual basis until their term on the board is complete. Staff, volunteers, students and board members are expected to keep in confidence all personal information gained during their involvement with Alpha Court until such time that they are given express permission to release that information by the effected person.

Principle 6 – Accuracy

6.1 Personal information shall be as accurate, complete, and up-to-date as is necessary for the purposes for which it is to be used.

1. The extent to which personal information shall be accurate, complete, and up-to-date will depend upon the use of the information, taking into account the interests of the individual. Information shall be sufficiently accurate, complete, and up-to-date to minimize the possibility that inappropriate information may be used to make a decision about the individual.
2. Alpha Court will not routinely update personal information, unless such a process is necessary to fulfill the purposes for which the information was collected.
3. Personal information that is used on an ongoing basis, including information that is disclosed to third parties, will generally be accurate and up-to-date, unless limits to the requirement for accuracy are clearly set out.
4. Security safeguards appropriate to the sensitivity of the information will protect personal information.
5. Security safeguards in place have been developed to protect personal information against loss or theft, as well as unauthorized access, disclosure, copying, use or modification. Alpha Court will protect personal information regardless of the format in which it is held.
6. The nature of the safeguards will vary depending on the sensitivity of the information that has been collected, the amount, distribution, and format of the information, and the method of storage. More sensitive information should be safeguarded by a higher level of protection.
7. Alpha Court will make their employees aware of the importance of maintaining the confidentiality of personal information.
8. Care shall be used in the disposal or destruction of personal information, to prevent unauthorized parties from gaining access to the information.

Personal information shall not be used or disclosed for purposes other than those for which it was collected, except with the consent of the individual or as required by law.

6.2 Safeguards

Alpha Court operates at multiple sites. We will ensure that there is systematic control over the maintenance, retention, transmission and preservation of personal information.

a) Office Security

- During working hours, visitors, including consumers and tenants will be provided controlled access to appropriate staff and office locations.
- Confidential client files (including computer screens) being used by authorized personnel shall be concealed from the view of visitors and other unauthorized persons.
- At the end of the working day, confidential client files shall be removed from desk tops and file trays and returned to secured storage areas.
- All staff are provided keys to enter all office sites but should not typically have access to individual offices. (This may be limited by office design).
- All staff have passwords to disarm electronic security at each office site. Security is further enhanced as the remotely monitored system records the password and date/time of entry.
- At the end of the working day, all office entrances will be locked and the electronic security system engaged.
- Computers will be turned off to limit potential access by unauthorized persons.

b) Storage of Personal Information

- Filing cabinets/desks containing confidential information shall be locked to secure/restrict access.
- Keys: one copy will be provided to authorized staff and one copy kept in the main office in the secured key cabinet.
- All electronically stored client files require password protection to access these files.
- All passwords created to protect access must be shared with the employee's immediate supervisor and the Executive Director.
- Client/tenant specific information/data should be stored on the hard drive of the worker's computer. These files should be routinely backed-up to provide a reference copy should the computer hard drive become inoperable.
- As is the case with hard copy information (paper storage), electronic data storage discs should not be removed from the office site.

c) Transmission of Personal Information

With reference to our policies on confidentiality and the release of personal information, prior approval must be sought from the individual. With respect to transmission of information the following should be noted:

- E-mail: Alpha Court makes every effort to ensure its Information Systems are protected from unauthorized access through the use of password encryption, firewall installation

and virus software which is routinely upgraded. Users should be aware that the security is not failsafe and use of this medium should be limited to sending information needed urgently. The recipient's e-mail address should be verified before sending. Should it be sent to an unauthorized recipient, this will be considered a breach of confidentiality.

- Fax: this provides a direct link to the recipient's site, however, wrong numbers can result in personal data being sent to an unauthorized site, resulting in a breach of confidentiality. This medium should be used only when information is required urgently and the receiver's number should be verified before sending.
- Mail: this is the most secure form of transmission.

d) Access to Client/Tenant Files

Only authorized staff have access to personal information and access is provided only on a need to know basis. The following categorizes personal information and defines access:

Information Area	Sub Category	Maintained by	Accessible to
Human Resources			
	Staff HR File	Executive Director	Executive Director Direct Supervisor Staff member on request
	Payroll	Mgr, Admin. Services	Executive Director Mgr, Admin. Services Finance Clerk
	Benefits	Mgr. Admin. Services	Executive Director Mgr, Admin. Services Finance Clerk
Property Management	Tenant Specific Information	Property Manager	Executive Director Property Manager Finance Clerk
Client Information	Client Specific Files	Case Manager	Executive Director Program Specific Manager/Coordinator Case Manager
	Inactive Client Files		Intake personnel Program Manager/ Coordinator Case Mgr specific

Principle 8 – Openness

An organization shall make readily available to individuals specific information about its policies and practices relating to the management of personal information.

Alpha Court will be open about their policies and practices with respect to the management of personal information. Individuals will be able to acquire information about an organization's policies and practices either through direct access or our website or upon request.

The information made available shall include:

- the name/title and address of the person (privacy officer) who is accountable for Alpha Court's policies and practices and to whom complaints or inquires can be forwarded;
- the means of gaining access to personal information held by Alpha Court;
- a description of the type of personal information held by Alpha Court, including a general account of its use;
- a copy of any brochures or other information that explains Alpha Court's policies, standards, or codes; and
- what personal information is made available to related organizations (eg, other healthcare providers).

Alpha Court will provide a written description in its brochures available in its place of business, provide online access and provide written/verbal information upon request.

Principle 9 – Individual Access

Upon request, an individual shall be informed of the existence, use and disclosure of his or her personal information and shall be given access to that information. An individual shall be able to challenge the accuracy and completeness of the information and have it amended as appropriate.

9.1 Upon request, Alpha Court will inform an individual whether or not the organization holds personal information about the individual. Alpha Court will indicate the source of this information. Alpha Court will allow the individual access to this information. Alpha Court will provide an account of the use that has been made or is being made of this information and an account of the third parties to which it has been disclosed. Alpha Court will limit information provided to that created by its staff; all third party information will be removed at the discretion of the creator.

9.2 An individual may be required to provide sufficient information to permit Alpha Court to provide an account of the existence, use, and disclosure of personal information. The information provided shall only be used for this purpose.

9.3 In providing an account of third parties to which it has disclosed personal information about an individual, Alpha Court will attempt to be as specific as possible. When it is not possible to provide a list of the organizations to which it has actually disclosed information about an individual, Alpha Court will provide a list of organizations to which it may have disclosed information about the individual.

9.4 When an individual successfully demonstrates the inaccuracy or incompleteness of personal information, Alpha Court will amend the information as required. Depending upon the nature of the information challenged, amendment involves the correction, deletion, or addition of

information. Where appropriate, the amended information shall be transmitted to third parties having access to the information in question.

9.5 Exceptions: Individuals may not be granted access to their personal Health Information under the following:

- a legal privilege restricting disclosure applies
- another law prohibits disclosure
- the information collected was for court proceedings
- information collected was during an inspection, investigation or similar procedure
- access could result in harm to any person

9.6 Alpha Court has 30 days to respond to a request for access. A 30 day time extension may be granted if additional time is required to determine the impact of granting access on the client and others potentially impacted by this action.

Principle 10 – Challenging Compliance

An individual shall be able to address a challenge concerning compliance with the above principles to the designated individual or individuals for the organization's compliance.

Alpha Court will put procedures in place to receive and respond to complaints or inquiries about their policies and practices relating to the handling of personal information. The complaint process should be easily accessible and simple to use.

Alpha Court will inform individuals who make inquiries or lodge complaints of the existence of relevant complain mechanisms. A range of these mechanisms may exist.

Alpha Court will investigate all complaints. If a complaint is found to be justified through the internal or external complaint review process, the organization shall take appropriate measures, including, if necessary, amending its policies and practices.

