

Alexandra Marine & General Hospital	MANUAL: Freedom of Information & Privacy	Revision Date: June-30-2014
Approved by: Corporate Leadership	Confidentiality Agreement Policy	Original Date: August-26-2012

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Policy

Alexandra Marine and General Hospital (AMGH) has a legal and ethical responsibility to protect the privacy of patients / residents /clients, their families, and staff / affiliates, and ensure confidentiality is maintained.

AMGH considers the following types of information to be confidential:

- Personal information and personal health information regarding patients / residents/ clients (hereafter referred to as "patients") and their families;
- Personal information, personal health information, employment information, and compensation information regarding staff and affiliates; and
- Information regarding the confidential business information of the organization, which is not publicly disclosed by the organization.

This policy applies whether this information is verbal, written, electronic, or in any other format. Audits are performed to determine compliance.

In addition to standards of confidentiality, which govern Regulated Health Professionals, staff and affiliates are bound by the organization's responsibility to maintain confidentiality. The organization expects staff / affiliates to keep information, which they may learn or have access to because of their employment/affiliation, in the strictest confidence.

It is the responsibility of every staff/affiliate to:

- Be familiar with and follow the organization's policies and procedures regarding the collection, use, disclosure, storage, and destruction of confidential information; including privacy policies, E-mail policy and release of information policy.

Refer to:

- **E-Mail (Electronic Mail) Use Policy**
- **Privacy Policy**
- **Release of Information Policy**
- Collect, access, and use confidential information only as authorized and required to provide care or perform their assigned duties;
- Continue to respect and maintain the terms of the Confidentiality Agreement after an individual's employment / affiliation with the organization ends;
- Discuss confidential information only with those who require this information to provide care or perform their duties and make every effort to discuss confidential information out of range of others who should not have access to this information;
- Divulge, copy, transmit, or release confidential information only as authorized and needed to provide care or perform their duties;
- Identify confidential information as such when sending E-mails or fax transmissions and to provide direction to the recipient if they receive a transmission in error;
- Participate in the organization's Privacy and Confidentiality education program, review this policy, and sign a Confidentiality Agreement before commencing work or the provision of service at AMGH as a condition of employment / appointment / contract / association for staff / affiliates at AMGH
- Report to their Supervisor suspected breaches of confidentiality or within the organization that compromise confidential information. If the Leader is the individual suspected of the breach, staff / affiliates may contact Privacy Officer or Human Resources / Chief of Service.

- Safeguard passwords and/or any other user codes that access computer systems and programs.

Misuse, failure to safeguard, or the disclosure of confidential information without appropriate approvals may be cause for disciplinary action up to and including termination of employment / contract or loss of appointment or affiliation with the organization.

Procedure

General

- Supervisors must review any department specific information or procedures related to confidentiality with new staff and affiliates.
- Staff / affiliates may consult their Supervisor, Privacy Officer, Human Resources or Risk Management regarding confidentiality issues or inquiries.

Confidentiality Agreement

- Confirmation of the successful completion of the educational program and the signed Confidentiality Agreement will be kept on the individual's file in:
 - CEO's office for physicians, residents, medical students, dentists, and midwives, secretaries who are privately employed by physicians, Medical Department Administrative Officers;
 - Human Resources for staff;
 - Human Resources for volunteers, contract staff, consultants, and students; and

It is the responsibility of applicable Supervisor and Human Resources to stipulate in Education Affiliation Agreements with education institutions, the obligation to ensure that students and faculty abide by the organization's standards of confidentiality.

Investigating Alleged Breaches of Confidentiality

It is the responsibility of Supervisors in conjunction with Human Resources, Risk Management, and Privacy Officer, to investigate alleged breaches of confidentiality.

Definitions

Affiliates - Individuals who are not employed by the organization but perform specific tasks at or for the organization, including appointed professionals (e.g., physicians / midwives / dentists), students, volunteers, researchers, contractors, or contractor employees who may be members of a third-party contract or under direct contract to the organization, and individuals working at the organization, but funded through an external source.

Confidential Business Information of the Organization - Information regarding the organization's business, which is not publicly disclosed by the organization that individuals may come across during the performance of their roles at the organization that is not generally known by the public. Examples of this would be:

- legal matters that involve the organization that are not public knowledge;
- financial information that would not be available in the organization's Annual Report;
- contractual agreements with vendors, third parties, consultants (many times the confidentiality of this information is written within the contract e.g., nondisclosure of how much we paid for service);
- information related to intellectual property, e.g., patents pending, research and development of new technology and treatments; and
- information related to the organization's information technology security and access to systems, including:
 - information leading to improper access to the organization's computing resources, both internal and external to the hospital network (e.g., "guest" access to systems, remote access credentials);
 - information pertaining to negotiated product discounts with partner vendors that is considered confidential and proprietary to the vendor; and

- hardware and software vendor names for products which may be vulnerable to external access attacks, or products that are part of our security infrastructure.

Personal Health Information - Personal information with respect to an individual, whether living or deceased and includes:

- information concerning the physical or mental health of the individual;
- information concerning any health service provided to the individual;
- information concerning the donation by the individual of any body part or any bodily substance of the individual;
- information derived from the testing or examination of a body part or bodily substance of the individual;
- information that is collected in the course of providing health services to the individual; or
- information that is collected incidentally to the provision of health services to the individual.

Personal Information - Information about an identifiable individual, but does not include the name, title or business address or business telephone number of staff member of an organization.

Related Information

Statement of Confidentiality

Reference Documents	<ul style="list-style-type: none"> • LHSC Confidentiality Policy, Correspondence and Personal Communication; 2008 • Lakeridge Health Confidentiality Agreement, 2012
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