

Policy and Procedure

Title:	Correction Of Personal Health Information
Policy Number:	06.002
Effective Date:	March 18, 1999
Revised Date:	March 11, 2019
Approving Body:	President and CEO
Authority:	CancerCare Manitoba Act
Responsible Officer:	President and CEO
Delegate:	Director, Cancer Clinical Information Management
Contact:	Cancer Clinical Information Management and CCMB Privacy Officer
Applicable to:	CCMB Staff and Physicians

1.0 **BACKGROUND:**

Not Applicable

2.0 **PURPOSE:**

- 2.1 To establish procedures to enable individuals to request a correction to their personal health information including demographic information as set out under *The Personal Health Information Act (PHIA)*.
- 2.2 To establish procedures to process requests to correct personal health information and to accept or refuse those requests.

3.0 **DEFINITIONS:**

- 3.1 **Access:** The right of an individual, or a person permitted to exercise the rights of that individual, to examine (view) and receive a copy of the individual's personal health information maintained by the trustee.
- 3.2 **Complaint:** A complaint made to a trustee by an individual and/or by the provincial ombudsman about collection, access, correction, use, disclosure, protection, and privacy of personal health information.
- 3.3 **Demographic Information:** An individual's name, address, telephone number and email address.
- 3.4 **Disclosure of Personal Health Information:** Revealing the personal health information outside the trustee, i.e. to other trustees, to family and friends of the individual, or to other persons legally entitled to have personal health information released to them.
- 3.5 **Health Care:** Any care, service or procedure provided to diagnose, treat or maintain an individual's health; provided to prevent disease or injury or promote health care; or that affects the structure or a function of the body and includes the sale or dispensing of a drug, device, equipment or other item pursuant to a prescription.
- 3.6 **Health Care Facility:** A hospital, personal care home, psychiatric facility, medical

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clinic, laboratory, CancerCare Manitoba and community health centre or other facility in which health care is provided and that is designated in the PHIA regulations.

- 3.7 **Health Professional:** A person who is licensed or registered to provide health care under an Act of Legislature or who is a member of a class of persons designated as health professionals in the PHIA regulations.
- 3.8 **Individual:** A patient, client or resident receiving health care services within the health care facility. For the purposes of access, correction, use and disclosure of personal health information, includes persons permitted to exercise the rights of an individual.
- 3.9 **Information Manager:** A person or body (corporation, business, or association) that processes, stores or destroys personal health information or provides information management or information technology services for the trustee.
- 3.10 **Maintain:** In relation to personal health information, to have custody or control of the information.
- 3.11 **Personal Health Information:** Recorded information about an identifiable individual that relates to:
- the individual's health, or health care history, including genetic information about the individual;
 - the provision of health care to the individual; or
 - payment for health care provided to the individual;

and includes:

- the PHIN (personal health identification number) and any other identification number, symbol or particular assigned to an Individual; and
- any identifying information about the individual that is collected in the course of, and is incidental to, the provision of health care or payment for health care;

and for further clarity includes:

- personal information such as financial position, home conditions, domestic difficulties or any other private matter relating to the individual which have been disclosed to the trustee.

and for the purpose of the confidentiality policy:

- any personal health information exchanged verbally about an identifiable individual.

- 3.12 **Persons Associated with the Health Care Facility:** includes all contracted persons, volunteers, students, researchers, medical staff, educators, members of

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the boards of directors, information managers, employees, or agents of any of the above or other health agencies.

3.13 Persons Permitted to Exercise the Rights of an Individual:

3.13.1 includes,

- a) any person with written authorization from the individual to act on the individual's behalf;
- b) a proxy appointed by the individual under *The Health Care Directives Act*;
- c) a committee appointed for the individual under *The Mental Health Act* if the committee has the power to make health care decisions on the individual's behalf;
- d) a substitute decision maker for personal care appointed for the individual under *The Vulnerable Persons Living with a Mental Disability Act*, if the exercise of the right relates to the powers and duties of the substitute decision maker;
- e) the parent or guardian of an individual who is a minor, if the minor does not have the capacity to make health care decisions;
- f) if the individual is deceased, his or her personal representative.

3.13.2 If it is reasonable to believe that no person listed in any clause of 3.13.1 exists or is available, the adult person listed first in the following who is readily available and willing to act may exercise the rights of an individual who lacks the capacity to do so:

- a) the individual's spouse or common-law partner, with whom the individual is cohabitating;
- b) a son or daughter;
- c) a parent, if the individual is an adult;
- d) a brother or sister;
- e) a person with whom the individual is known to have a close personal relationship;
- f) a grandparent;
- g) a grandchild;
- h) an aunt or uncle;
- i) a nephew or niece.

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Ranking: The older or oldest of two or more relatives described in any clause of 3.13.2 is to be preferred to another of those relatives.

- 3.14 **Privacy:** The fundamental right of the individual to control the collection, use and disclosure of their personal health information.
- 3.15 **Privacy Officer:** An employee designated by the health care facility whose responsibilities include dealing with requests from individuals who wish to examine and copy or to correct personal health information collected and maintained by the trustee and facilitating the trustee's compliance with PHIA. The definition is intended to mean the privacy officer and/or their designate. At CCMB it is the Medicolegal Correspondent; acts as the designate and processes the daily requests for release of information.
- 3.16 **Record or Recorded Information:** A record of information in any form, and includes information that is written, photographed, recorded or stored in any manner, on any storage medium or by any means, including by graphic, electronic or mechanical means, but does not include electronic software or any mechanism that produces records.
- 3.17 **Trustee:** A health professional, health care facility, public body, or health services agency that collects or maintains personal health information.
- 3.18 **Use:** Involves revealing personal health information to someone within the trustee's own organization who needs to know the information to do their job. Use includes processing, reproduction, transmission and transportation of personal health information.

4.0 **POLICY:**

- 4.1 The trustee shall maintain and adhere to standards to ensure the right of individuals to request a correction to their personal health information previously accessed by the individual.
- 4.2 The trustee shall respond as promptly as possible, but no later than 30 days after receiving the written request.
- 4.3 The trustee shall not charge a fee in connection with a request for a correction to Personal Health Information.

5.0 **PROCEDURE:**

- 5.1 Persons associated with the health care facility who receive a request from an individual for the correction of personal health information shall:
- 5.1.1 Provide the individual with the Release of Information package available in Clinic; or
- 5.1.2 Provide the individual with the Medicolegal Correspondent's contact

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information business card; or

5.1.3 Refer the individual to the Privacy Office, in this case the Medicolegal Correspondent, Room ON2092; or

5.1.4 If a written request has been completed, forward it to the Medicolegal Correspondent, Room ON2092.

5.1.5 Document the action taken to facilitate an individual's request for correction in the individual's health record, where applicable.

5.2 The Medicolegal Correspondent shall:

5.2.1 Obtain the request in writing, using the Request to Correct Personal Health Information form.

5.2.2 Respond as promptly as possible, but no later than 30 days after receiving the written request.

5.2.3 Consult with any of the following when considering the request for correction:

- Health care professionals who are or have provided health care to the individual;
- The person who documented the personal health information in the individual's health record;
- Administrative or managerial staff responsible for the service/discipline in question.

5.2.4 Respond in one of four ways:

- a) Add the corrected information to the record of the personal health information in such a manner that it will be read with and form part of the record or be adequately cross-referenced to it;
- b) Inform the individual in writing if the information does not exist or cannot be found;
- c) Inform the individual in writing that the trustee does not maintain the personal health information and provide them with the name and address of the Trustee who maintains it;
- d) Inform the individual in writing that the request is refused, in whole or in part, the reason for refusal and advise the individual of their right to:
 - add a statement of disagreement to the record, and

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- make a complaint about the refusal to the Manitoba Ombudsman.

5.2.5 When a correction is made or a statement of disagreement is added, the Medicolegal Correspondent shall notify any other trustee or person to whom the personal health information has been disclosed within the past year.

5.2.6 The notice of correction or statement of disagreement shall be added to any record of personal information maintained by the trustee.

6.0 **REFERENCES:**

6.1 Correction of Personal Health Information Policy, WRHA 10.40.080.

6.2 *The Personal Health Information Act (Manitoba)*

6.3 *The Personal Health Information Act Regulations*

Policy Contact:

All enquiries relating to this policy should be directed to:

Name:

Title/Position: Director, Cancer Clinical Information Management and Privacy Officer

Phone: 204-792-2535

E-mail:

Address:
(if required):

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DOCUMENTATION

Policy Location:

This policy is located (hard and e-copy formats):

1. The original signed and approved policy is on file in the Executive Office, CCMB
2. The e-copy is on file in the CCMB Governing Documents Library, SharePoint
- 3.

Revision History:

Date	Version	Status	Author	Summary of Changes
dd/mm/yyyy	#	Initial, Draft Final Minor/Major revision		
18/03/99	1	Initial		
13/12/11	2	Revision		
19/06/14	3	Minor revision	L. Costa Policy Team	Adapt WRHA Policy, minor revisions
29/03/2018	3	Minor revision	S.Friedenberger	Reformatted to new template
11/03/2019	4	Minor revision	CCIM Manager	Changes to Dept. Head and Privacy Officer

Approvals Record:

This Policy requires approval by:

Approval	Date	Name / Title	Signature
		Not required.	

FINAL APPROVAL:

Date	Name / Title	Signature
11/03/19	Dr. S. Navaratnam President and CEO, CCMB	<i>Original signed by Dr. S. Navaratnam</i>