



Information and Privacy
Commissioner/Ontario

Commissaire à l'information
et à la protection de la vie privée/Ontario

Personal Health Information Protection Act

REPORT

FILE NO. HI-060033-1

A Corporation



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INVESTIGATOR: Cathy Hamilton

HEALTH INFORMATION CUSTODIAN: A Corporation

SUMMARY OF INFORMATION GIVING RISE TO REVIEW:

A member of the public contacted the Office of the Information and Privacy Commissioner/Ontario (the IPC) to advise that she had accompanied her father, a resident of a long-term care facility (the facility), to a medical appointment with an envelope provided by the facility containing portions of his health record. She noted that three original laboratory reports relating to three other residents of the facility were also contained in the envelope. The IPC notified the facility of the incident, and opened a file. The facility is owned by the health information custodian (HIC), a corporation. The IPC worked with the HIC to fulfill its obligations under the *Personal Health Information Protection Act* (the Act).

RESULTS OF REVIEW:

The Privacy Lead of the HIC provided the following information.

Upon notification of the incident by the IPC, the facility's Director of Care immediately retrieved the original laboratory reports from the resident's daughter and verified with her that she did not make copies of the reports.

The HIC and representatives from the facility conducted an internal investigation. The HIC was not able to determine how the three other residents' laboratory reports became co-mingled with the resident's personal health information, and speculated that the resident's daughter may have accidentally picked up the laboratory reports off the desk at the nursing station when she picked up her father's envelope.

The facility advised that their usual practice relating to medical appointments located outside the facility is to prepare a brown manila envelope containing a transfer form, a notation of the reason for the appointment, a copy of the quarterly drug review, photocopies of any relevant laboratory reports and a physician's order sheet. Original copies of laboratory reports are not sent with the resident. All original laboratory reports are received by the facility in white envelopes that are clearly marked "Name of Lab."

In a discussion with the resident's daughter, she informed the IPC that she could not have inadvertently picked up the laboratory reports off the desk at the nursing station, because she clearly recalled that she found the laboratory reports inside her father's brown manila transfer envelope.

Although the cause of the error could not be determined, as a result of this incident, the facility reminded its staff members of the laboratory report procedures, reinforced the process related to preparing reports and information for outside appointments, and the requirement to ensure the security and confidentiality of residents' personal health information.

The HIC also provided a written notification to all Executive Directors and Directors of Care at its Ontario facilities, which served as a reminder to everyone of their obligations to protect residents' personal health information when preparing documents for outside medical appointments. The notice also included the following practices: "never re-use the envelopes which are used to deliver copies of personal health information to outside appointments; ensure the information in the envelope belongs to the resident in question and is not mixed in with other residents' information; and never leave information easily accessible at the nursing station for pick-up. Always hand deliver to the resident or their appointment companion as they are leaving for the appointment."

In addition, the HIC is in the process of finalizing a privacy policy that provides more detailed guidance to its facilities on the issue of the protection of personal health information. The Privacy Lead will report back to the IPC in order to advise that the above-noted policy has been incorporated into its policy and procedure manual.

Finally, in order to fulfill its obligations with respect to the notification requirements under section 12(2) of the *Act*, the HIC provided written notification of the details of the extent of the breach, the specifics of the personal health information at issue and the steps taken to address the breach to one resident and to the substitute decision makers of the two other residents, who are incapable of making their own decisions.

On the basis of all of the above, it was determined that further review of this matter was not warranted and the file was closed.

Original signed by: _____
Brian Beamish
Assistant Commissioner

December 11, 2006 _____