



Information and Privacy  
Commissioner/Ontario

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

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*Personal Health Information Protection Act, 2004*

REPORT

FILE NO. HI-050029-1

A Provincial Government Program

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# *Personal Health Information Protection Act, 2004*

## **REPORT**

**FILE NO.**

**HI-050029-1**

**INVESTIGATOR:**

**Gillian Judkins**

**HEALTH INFORMATION CUSTODIAN:**

**A Provincial Government Program**

### **SUMMARY OF INFORMATION GIVING RISE TO REVIEW:**

During a move of one of its branch offices last Fall, a provincial government program (the program) contacted the Office of the Information and Privacy Commissioner/Ontario (IPC) to advise that files containing the personal health information of 27 patients were missing. The IPC proceeded to conduct an investigation into this matter.

### **RESULTS OF REVIEW:**

The investigator immediately contacted the program who provided the following information.

The program advised that following a move to a new location, it was discovered that 20 files were missing. Of the 20 files missing, 11 of them included the personal health information of 27 patients. Specifically, the files contained all or some of the following information; physician name and billing number, payment history, provider birth date, address, group affiliation, remittance advice documenting repayment, threshold summary file transcripts and adjustment information, correspondence with provider and/or lawyer, calculation package (which included patient information in a number of files), copies of cheques, memos to supply & financial services regarding repayment, repayment calculations if paid over a period of months, emails, notes documenting times staff talked to a provider or his/her lawyer, and repayment details

The program further advised that an additional file with respect to a fraud case was returned to the branch after it was discovered in a surplus filing cabinet by a staff member from another provincial government program. The file had not previously been noted as missing.

Specifically, this file contained: verification letters to patients who had received services from a physician, physician name, billing number, billing data and the fee paid for a specific service, patients' names and health card numbers. This file was returned in its entirety. The program advised that the scope of the disclosure involved only one staff member of the other program. All staff of the two provincial government programs sign confidentiality agreements.

The program advised that they initiated an internal investigation into the above missing files. As part of the investigation, the program stated that the following steps were undertaken:

- Unit staff conducted a search of the immediate area and the central file room;
- All staff within the unit were asked to search their desks;
- Filing cabinets which were declared surplus were requested to be checked;
- External secure storage was also checked;
- A branch-wide internal search for the files was initiated by unit administration staff; and
- Another program area was moving at the same time from the second floor of the same building from which the branch office moved. This program area was contacted to make sure that a box of files from the branch office was not moved with their files.

The program also provided the following information regarding the move of the unit:

- The branch office hired a vendor of record moving company which was familiar with government moving standards. They were used to pack files in preparation for the move;
- The movers packed the majority of the files for the branch office;
- Staff members within the branch office were individually responsible for culling duplicate and transitory records that were not subject to a retention period. These records include: miscellaneous notes, memos, preliminary drafts of documents and duplicate copies of documents. All such records were shredded in accordance with retention schedules, applicable policy and guidelines for the protection of privacy;
- A limited number of files were packed by individual staff of the branch office (not including those that are missing) and were tagged and moved by the moving company;
- All the filing cabinets were checked for files by three program staff and the supervisor of the moving company prior to being closed off;
- The files were moved to the loading dock using the designated elevator. Boxes were immediately moved onto the moving truck;
- Once the truck was moved away from the loading dock, a police officer locked and tagged the moving truck;
- Off duty police officers and commissionaires were hired to secure both sites and stayed with the truck until it was loaded and unloaded at the new site; and
- Program staff were present at both sites during the move.

In an attempt to ensure that this does not occur in the future, the program advised that they have taken a number of steps which include keeping all files in a secure room with limited access using coded photo ID passes. The branch office is located in a controlled access, 24 hour security guarded building with video surveillance. Information sessions have been held to ensure awareness of privacy protocols and compliance requirements and legal staff have updated branch staff on new legislative requirements arising out of privacy legislation. Current security protocols have been reviewed, specifically with regard to retrieval, use and return of files to the secure room.

The program reported that almost all of the patients have been notified by telephone or in writing with the exception of a few who they were unable to reach as these individuals had not maintained up to date contact information on ministry databases, as required by law. The program advised they have also notified the physicians in writing about the loss.

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: \_\_\_\_\_  
Ann Cavoukian, Ph.D.  
Commissioner

\_\_\_\_\_ June 20, 2006