



Information and Privacy
Commissioner of Ontario
Commissaire à l'information
et à la protection de la vie privée de l'Ontario

October 31, 2011

VIA ELECTRONIC AND REGULAR MAIL

Michael Sherar, Ph.D., President and CEO
Cancer Care Ontario
620 University Avenue
Toronto, Ontario
M5G 2L7

Dear Dr. Sherar:

RE: Review of the Report on the Practices and Procedures of Cancer Care Ontario in respect of the Ontario Cancer Screening Registry

Pursuant to subsection 13(2) of Regulation 329/04 of the *Personal Health Information Protection Act, 2004* ("the *Act*"), my office is responsible for reviewing the practices and procedures implemented by each prescribed person to protect the privacy of individuals whose personal health information it receives and to protect the confidentiality of that information.

The practices and procedures of Cancer Care Ontario (CCO) in respect of the Colorectal Cancer Screening Registry were initially approved on May 1, 2008. The Colorectal Cancer Screening Registry has now been expanded and consequently renamed the Ontario Cancer Screening Registry (OCSR).

Given that the practices and procedures of CCO in respect of the Colorectal Cancer Screening Registry, a prescribed person within the meaning of the *Act*, were last approved on October 31, 2008, my office was again required to review these practices and procedures, as amended to cover the OCSR, on or before October 31, 2011.

In accordance with the new process as set out in the *Manual for the Review and Approval of Prescribed Persons and Prescribed Entities* ("the *Manual*"), CCO, as a prescribed person which was seeking the continued approval of its practices and procedures, submitted a detailed written report and a sworn affidavit to my office. These documents were to conform to the requirements set out in the *Manual*.

My office has now completed its review of your report and affidavit. Based on this review, I am satisfied that CCO in respect of the OCSR continues to have in place practices and procedures that sufficiently protect the privacy of individuals whose personal health information it receives and that sufficiently maintain the confidentiality of that information and that continue to meet the requirements of the *Act*.

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Accordingly, effective October 31, 2011, I am pleased to advise that the practices and procedures of CCO in respect of the OCSR continue to be approved for a further three-year period.

Attached is an Appendix containing recommendations to further enhance the practices and procedures of CCO in respect of the OCSR, which must be implemented prior to the next legislated review or earlier as noted.

I would like to extend my gratitude to you and your staff for the cooperation provided during the course of the review, including your diligence and timeliness in submitting the requested report and in responding to requests by my office for further information and in making the amendments requested.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Ann Cavoukian', written in a cursive style.

Ann Cavoukian, Ph.D.
Commissioner

Attach.

cc: Pamela Spencer, VP Corporate Services, General Counsel and Chief Privacy Officer
Swapna Petrelli, Director, Privacy and Access

Appendix

1. Provide a full report to the Information and Privacy Commissioner of Ontario on the advantages and disadvantages of transferring screening reports in electronic format via the OntarioMD web portal, as compared to the proposed CCO web portal. This report is to include a complete assessment of the security and privacy protective measures that will be built into the architecture of the proposed CCO web portal. It should also contain a comparison of those measures against the existing and potentially enhanced security and privacy measures of the OntarioMD web portal. CCO must obtain the approval of the Information and Privacy Commissioner of Ontario prior to resuming the transfer of screening reports to primary care physicians.
2. Review the *Privacy Breach Management Procedure* and any related policies and procedures to clarify and ensure that those having an employment, contractual or other relationship with CCO are fully aware of their responsibility to immediately report any privacy breaches, suspected privacy breaches and/or privacy risks to appropriate individuals at CCO with responsibility for privacy issues and provide the Information and Privacy Commissioner of Ontario with proof of compliance by January 13, 2012.
3. Conduct additional training with those having an employment, contractual or other relationship with CCO to ensure that they are fully aware of their duties and responsibilities under the *Privacy Breach Management Procedure*, and provide the Information and Privacy Commissioner of Ontario with proof of compliance by January 13, 2012.
4. Develop and implement a policy and procedures for the secure transfer of records of personal health information in a manner consistent with the *Manual* and Order HO-011.
5. Develop and implement a policy and procedures for the secure retention of records of personal health information on mobile devices in accordance with the requirements of the *Manual*.
6. Develop and implement a comprehensive and integrated corporate risk management framework in accordance with the requirements of the *Manual*.