



STANDARD GUIDELINE: **Disclosure of Personal Health Information for Review by Health Care Professionals and/or a Professional Regulatory Body**

Program Area: **Health Information Services**
Section: **Privacy and Access**
Reference Number: **ORG.1411.SG.002**
Approved by: **Regional Lead – Corporate Services & Chief Financial Officer**
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PURPOSE:

To protect Personal Health Information and personal information under The Personal Health Information Act (PHIA) and The Freedom of Information and Protection of Privacy Act (FIPPA).

To outline the procedures to follow when responding to requests to disclose Personal Health Information, without consent from the individual the information is about, for the following purposes:

- the purpose of peer review by health professionals,
- the purpose of review by a standards committee established to study or evaluate health care practice in a health care facility or health services agency,
- the purpose of a body with statutory responsibility <https://www.gov.mb.ca/health/regulators.html> for the discipline of health professionals, or
- the purpose of risk management assessment.

This guideline is not applicable to the use of Personal Health Information for purposes permitted under *The Personal Health Information Act*.

DEFINITIONS:

Professional Regulatory Body: A body that has been delegated the authority to govern the professional practice of its members in the public interest.

Disclosure: Revealing the Personal Health Information outside the Trustee, i.e. to other Trustees, to family and friends of the Individual, insurance companies or other similar businesses or to other persons legally entitled to have Personal Health Information released to them.

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

Health Care Professional (HCP): Refers to all Health Care Professionals, including those regulated by the Regulated Health Professionals Act (RHPA), engaged in actions whose primary intent is to enhance health, including those who promote and preserve health, those who diagnose and treat disease, manage health and includes professionals with specific areas of competence.

IMPORTANT POINTS TO CONSIDER:

Requests must be made in writing to the site Privacy Officer or program delegate and include a description of the type of information required (i.e. a list of health records).

Requests made using email should NEVER be submitted using a personal email account and must be sent from an employer provisioned email account and in accordance with ORG.1411.SG.001 Emailing Confidential Information.

Persons provided access to physical records or an electronic health system may be required to read and sign ORG.1411.PL.201.FORM.03 Confidentiality Agreement for Contractors/Vendors.

The request and the record of disclosure shall be retained by the site Privacy Officer or program delegate in a secure file, separate from the client health record, for a minimum of seven (7) years.

The following steps relate to the disclosure of personal health information, including to HCPs no longer associated with Southern Health-Santé Sud.

Requests to disclose personal health information to a HCP for the purpose of responding to a complaint or other college matter must be done in consultation with the site Privacy Officer or the program delegate.

Under Subsection 22(2)(j) of PHIA, Southern Health-Santé Sud may use its discretion to disclose personal health information to the HCP's legal counsel if requested and deemed appropriate. The Privacy and Access Specialist, site Privacy Officer or program delegate must be consulted before making such a disclosure. Any disclosure made under this section must be reasonable and made in good faith. The disclosure must not exceed what was originally provided to the HCP.

Where a HCP is a Southern Health-Santé Sud staff member, the use of Personal Health Information for purposes related to college matters is permitted.

Any request from a HCP to access and receive copies of Personal Health Information must be supported by a letter from their perspective College. The Disclosure of Personal Health Information for Review by Health Care Professionals and/or a Professional Regulatory Body Letter Template - ORG.1411.SG.002.SD.01 for correspondence with the program or health information services will serve as a guideline.

PROCEDURE:

1. On-site Review of Personal Health Information in Paper Format

- Locate the health record(s) to be reviewed and identify the relevant documents or visit encounter using a Post-it filing tab or other method.
- Provide a secure private area to review the Personal Health Information.
- Remain present during the review of the paper records.
- Where requests are received to reproduce (copy, scan, print etc.) records, follow section 3 of this guideline.

2. Review of Personal Health Information in Electronic Health Information Systems

- Reviews may be done on-site or remotely using MS Teams where necessary. When using MS Teams, DO NOT record the session, DO NOT share any Personal Health Information in a chat and DO NOT send Personal Health Information as attachments.
- Arrange for a manager or system administrator, accustomed to the electronic health information system, to assist with the review.
- Where requests are received to reproduce records, follow section 3 of this guideline.
- Complete an audit of user activity for the period of the review to support access.

3. Disclosure of Personal Health Information for Review Off-site

- Review the correspondence to determine the method chosen for the transfer of Personal Health Information.
- Identify and reproduce only the *minimum amount of Personal Health Information necessary* to accomplish the purpose for the disclosure.
- Any removal, sharing and/or transportation of Personal Health Information must be in accordance with ORG.1411.PL.404 Security and Storage of Confidential Information including Transportation.
- Advise that when the records are no longer required for the purpose, all copies must be disposed of securely or returned to the site Privacy Officer and/or program delegate for management in accordance with ORG.1410.PL.201 Retention and Destruction of Personal Health Information.
- File sharing using a college's OneDrive may be permitted upon written confirmation from the college assuring the security of the system. This includes the implementation of administrative and technical security safeguards, system audits and regular reviews of the system by an internal or external Information Technology Specialist.

SUPPORTING DOCUMENTS:

[ORG.1411.SG.002.SD.01](#) - Disclosure of Personal Health Information to Health Care Professionals and/or a Professional Regulatory Body Letter Template

REFERENCES:

Shared Health Guideline: Disclosure of PHI to licensed health professionals & Template letter
The Personal Health Information Act
ORG.1411.PL.502 Use and Disclosure of Personal Health Information