



Information and Privacy
Commissioner of Ontario

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

VIA ELECTRONIC MAIL

October 30, 2020

Robert Maclsaac
President and CEO
Hamilton Health Sciences – King West Site
P.O. Box 2000
Hamilton, ON L8N 3Z5

Dear Mr. Maclsaac:

RE: Review of the Report on the Practices and Procedures of the Hamilton Health Sciences Corporation in respect of the Critical Care Information System

Pursuant to subsection 13(2) of Regulation 329/04 under the *Personal Health Information Protection Act, 2004* (“the *Act*”), the Office of the Information and Privacy Commissioner of Ontario (IPC) is responsible for reviewing and approving, every three years, the practices and procedures implemented by an organization designated as a prescribed person under clause 39(1)(c) of the *Act*. Such practices and procedures are required for the purposes of protecting the privacy of individuals whose personal health information such organizations receive, and maintaining the confidentiality of that information.

Given the practices and procedures of the Hamilton Health Sciences Corporation (HHSC), in respect of the Critical Care Information System (CCIS), were last approved on October 31, 2017, the IPC was required to review these practices and procedures again and advise whether they continue to meet the requirements of the *Act* on or before October 31, 2020.

In accordance with the process set out in the *Manual for the Review and Approval of Prescribed Persons and Prescribed Entities* (“the *Manual*”), HHSC, in respect of CCIS, as a prescribed person seeking the continued approval of its practices and procedures, submitted a detailed written report and sworn affidavit to the IPC. These documents were to conform to the requirements set out in the *Manual*.

The IPC has now completed its review of your report and affidavit. Based on this review, I am satisfied that HHSC, in respect of CCIS, continues to have in place practices and procedures to protect the privacy of individuals whose personal health information it receives and to maintain the confidentiality of that information in accordance with the requirements of the *Act*.

Accordingly, effective October 31, 2020, I hereby advise that the practices and procedures of HHSC, in respect of CCIS, continue to be approved for a further three-year period.



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Attached is an Appendix containing recommendations to enhance the practices and procedures of HHSC, in respect of CCIS. My staff will continue to monitor HHSC's progress towards implementing these recommendations. Please be advised that these recommendations are to be addressed prior to the next cyclical review of the practices and procedures of HHSC, or sooner, if and as indicated in the attached Appendix.

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

Yours sincerely,

A handwritten signature in black ink, appearing to read "Kosseim", with a horizontal line underneath the name.

Patricia Kosseim
Commissioner

cc: Ms. Christine Moon, Interim Privacy Lead, CritiCall Ontario
Ms. Isabel Hayward, Executive Director, CritiCall Ontario
Mr. Michael Campbell, VP Legal Services and General Counsel, HHSC

Appendix

1. It is recommended that HHSC enter into a written agreement with Ontario Health (formerly eHealth Ontario) documenting the services that Ontario Health provides as a third party service provider to HHSC in respect of the CCIS. This recommendation should be addressed as soon as reasonably possible, providing written confirmation to the IPC of this no later than April 30, 2021.
2. It is recommended that HHSC ensure that the following policies are updated to align with the requirements set out in the *Manual*:
 - *P12: Policy and Procedures for Disclosure of Personal Health Information for Purposes Other Than Research*
 - *P13: Policy and Procedures for Disclosure of Personal Health Information for Research Purposes and the Execution of Research Agreements*This recommendation should be addressed as soon as reasonably possible, providing written confirmation to the IPC of this no later than April 30, 2021.
3. It is recommended that HHSC ensure that the following policies are updated to reflect the current governance structure at HHSC in respect of the CCIS:
 - *O.1: Privacy Governance and Accountability Framework*
 - *O.2: Security Governance and Accountability Framework*This recommendation should be addressed as soon as reasonably possible, providing written confirmation to the IPC of this no later than April 30, 2021.
4. It is recommended that HHSC continue to take steps to ensure that no more personal health information is collected by HHSC in respect of the CCIS than is reasonably necessary to meet the purpose of the CCIS. This recommendation should be addressed as soon as reasonably possible, providing written confirmation to the IPC of this no later than April 30, 2021.
5. It is recommended that HHSC ensure that the frequency with which it performs the following practices aligns with the frequency set out in its relevant policies:
 - Auditing agreements with third party service providers in accordance with *P19: Policy and Procedures for Executing Agreements with Third Party Service Providers in Respect of Personal Health Information*;
 - Auditing compliance with *P24: Policy and Procedures with Respect to De-Identification and Aggregation*; and
 - Reviewing the CCIS Risk Register in accordance with *O4: Corporate Risk Management Framework*.