2005 Statistical Report for the Information and Privacy Commissioner/Ontario on

Personal Health Information Requests

Please return by February 1, 2006 to:

Information and Privacy Commissioner/Ontario 2 Bloor Street East Suite 1400 Toronto, Ontario M4W 1A8

Or Fax to: 416-325-9195

All institutions or **health information custodian**s that are part of an institution covered by the *Personal Health Information Protection Act* must return a report to the Information and Privacy Commissioner. If no requests for access to **personal health information** or requests for correction of **personal health information** were received, the institution or **health information custodian** must still complete and return Sections 1 and 2.

PERSONAL HEALTH INFORMATION STATISTICAL REPORT

SEC	TION 1: Identification			
1.1	Organization Name			
	Formal Contact Person under PHIPA/Title _			
	Contact Person under PHIPA E-mail Address	5		
	Phone No.	Fax No)	
	Mailing Address			
			Postal Code	
	Content Contact Person for this report/Title_			
	Content Contact E-mail Address			
	Date Report Completed:MM	DD	VV	
		DD		
1.2	Specify the type of institution:			
	MUNICIPAL			
	Municipal Corporation Conservation Authority Electrical Entity Local Housing Corporation Other:	Health Local Road Local Services Planning Public Library Police Services School	Commission:	Transit
	PROVINCIAL			
	Is the Minister the head of your institution?	Yes □ No □		
	Ministry Agency, Board or Commission of a Minis Name of Ministry:			

1.3	Specify t	the type of health information custodian:
	Under PF (1) (2) (3) (4)(i)	HIPA s.3(1) Health care practitioner Service provider under the Long Term Care Act, 1994 Community care access corporation under the Community Care Access Corporations Act, 2001 Hospital under the Public Hospitals Act Private hospital under the Private Hospitals Act Psychiatric facility under the Mental Health Act Independent health facility under the Independent Health Facilities Act
	(4)(ii)	Charitable home for the aged under the Charitable Institutions Act Placement co-ordinator described in subsection 9.6(2) of the Charitable Institutions Act Home or joint home under the Homes for the Aged and Rest Homes Act Placement co-ordinator under subsection 18 (2) of the Homes for the Aged and Rest Homes Act Nursing home under the Nursing Homes Act Placement co-ordinator under subsection 20.1(2) of the Nursing Homes Act Care home under the Tenant Protection Act, 1997
	(4)(iii) (4)(iv) (4)(v) (4)(vi) (4)(vii) (5)	Pharmacy under Part VI of the <i>Drug and Pharmacies Regulation Act</i> Laboratory or a specimen collection centre in section 5 of the <i>Laboratory and Specimen Collection Centre Licensing Act</i> Ambulance services under the <i>Ambulance Act</i> Home for special care under the <i>Homes for Special Care Act</i> Centre, program or service for community health or mental health whose primary purpose is the provision of health care Evaluator under the <i>Health Care Consent Act, 1996</i> Assessor under the <i>Substitute Decisions Act, 1992</i>
	(6) (7) (8)	 Medical officer of health under the Health Protection and Promotion Act Board of health under the Health Protection Act Minister, together with the Ministry of the Minister if the context so requires. Any other person or group is a health care custodian if they have custody or control of personal health information as a result of or in connection with performing the person's or organization's powers, duties or work.
SE	CTION 2:	Uses or Purposes of Personal Health Information
2.1	where the	e number of uses or purposes for which personal health information was disclosed use or purpose is not included in the written public statement of information practices PersonalHealth Information Protection Act (PHIPA) subsection 16(1).
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Пу		n: eive any requests for access or correction, please <u>STOP HERE</u> and return only page one y fax to us at (416) 325-9195.
	Received ac	ccess requests, please continue to section 3.1.
	Received or	ally requests for correction of personal health information, please continue to section 9.

Section 3: Number of Requests Completed

S of the State of		3.1	Number of requests that have been completed during reporting year	
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Section 4: Time to Completion

How long did your institution take to complete all requests for information? Enter the number of requests in the appropriate category.

4.1	1-30 days	
4.2	31-60 days	
4.3	61-90 days	
4.4	91-120 days	
4.5	121 days or more	
4.6	TOTAL REQUESTS $(4.1 \text{ to } 4.5 = 4.6)$	Box 4.6 must equal Box 3.1

Section 5: Compliance with the Act

In this section, please indicate the number of requests completed, within the statutory time limit and in excess of the statutory time limit, under each of the two different situations:

- A. **NO** Time Extension Notices issued;
- B. **ISSUED** a Time Extension Notice (subsection 54(4))

Please note that the two different situations are mutually exclusive and the number of requests completed in each situation should add up to the total number of requests completed in Section 3.5. ((5.3+5.6=5.7) and (5.7 must equal 3.1))

A. No Time Extension Notices Issued		
5.1	Number of requests completed within the statutory limit (30 days) where a	
	Time Extension Notice (subsection 54(4)) was not issued.	
5.2	Number of requests completed in excess of the statutory limit (30 days)	
	where a Time Extension Notice (subsection 54(4)) was not issued.	
5.3	Total $(5.1 + 5.2 = 5.3)$	

B. Issued a Time Extension Notice (PHIPA subsection 54(4))		
5.4	Number of requests completed within the time limit permitted under the Time Extension Notice (subsection 54(4)).	
5.5	Number of requests completed in excess of the time limit permitted under the Time Extension Notice (subsection 54(4)).	
5.6	Total $(5.4 + 5.5 = 5.6)$	

C. Total Completed Requests (sections A and B)		
5.7	OVERALL TOTAL [(5.3 + 5.6 = 5.7) and (5.7 must equal 3.1)]	

D. Ex	D. Expedited Access Requests, subsection 54(5)		
5.8	Number of completed requests from the total reported in box 5.7 that were requests for expedited access and completed within the requested time period.		
5.9	Number of completed requests from the total reported in box 5.7 that were requests for expedited access and were completed in excess of the requested time period.		
5.10	Total $(5.8 + 5.9 = 5.10)$		

Section 5(a): Contributing Factors

Please outline any factors that may have contributed to your institution not meeting the 30-day time limit.

If you anticipate circumstances will improve your ability to comply with the PHIPA in the future, please provide details in the space below.

Section 6: Disposition of Requests

What course of action was taken for each of the requests completed? Please enter the number of requests into the appropriate category.

6.1	Full access provided	
6.2	Partial access provided: provisions applied to deny access	
6.3	Partial access provided: no record exists or outside of <i>PHIPA</i>	
6.4	No access provided: provisions applied to deny access	
6.5	No personal health information accessed: no record exists or cannot be found	
6.6	Other completed requests, e.g. withdrawn or never accessed	
6.7	Number of requests from box 6.6 that were not accessed following a fee estimate	
6.8	TOTAL REQUESTS (EXCLUDING 6.7) (6.1 to 6.6 = 6.8)	E b ti
6.9	TOTAL REQUESTS denied access in whole or part where a provision of <i>PHIPA</i> was applied $(6.2 + 6.4 = 6.9)$	E C C E

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SECTION 7: Provisions Applied to Deny Access

For the **TOTAL REQUESTS** where a provision was applied to deny access in full or in part, how many times did you apply each of the following? (Please note that more than one provision may be applied to each request.)

7.1	Section 51(1)(a) – Quality of Care Information	
7.2	Section 51(1)(b) – Quality Assurance Program (Regulated Health Professions Act, 1991)	
7.3	Section 51(1)(c) – Raw Data from Psychological Tests	
7.4	Section 51(d) – Prescribed Personal Health Information	
7.5	Section 52(1)(a) – Legal Privilege	
7.6	Section 52(1)(b) – Other Acts or Court Order	
7.7	Section 52(1)(c) – Proceedings with Appeals have not been concluded	
7.8	Section 52(1)(d) – Inspection, Investigation or Similar Procedure	
7.9	Section 52(1)(e) – Risk of Harm to or Identification of an Individual	
7.10	Section 52(1)(f) – MFIPPA subsections 38(a) or (c) or FIPPA subsections 49 (a),(c) or (e) apply	
7.11	Section 54(6) – Frivolous or Vexatious	
7.12	TOTAL (7.1 to 7.11) (must be greater than or equal to Box 6.9)	

SECTION 8: FEES

8.1	Number of personal health information requests where fees were collected	
8.2	Number of requests where fees were waived – in full	
8.3	Number of requests where fees were waived – in part	
8.4	Total number of requests where fees were waived $(8.2 + 8.3 = 8.4)$	
		<u> </u>
8.5	Total dollar amount of fees collected	\$
8.6	Total dollar amount of fees waived	\$

SECTION 9: Corrections and Statements of Disagreement

9.1	Correction requests completed	

What course of action was taken for each request received to correct personal health information?

9.2	Correction(s) made in whole	
9.3	Correction(s) made in part	
9.4	Correction(s) refused	
9.5	Correction(s) withdrawn by requester	
9.6	Total (9.2 to 9.5 = 9.6)	

Box 9.6 must equal Box 9.1

9.7	Number of statements of disagreement attached where corrections were refused in whole or in part	
9.8	Number of times notifications sent	

By submitting this report, the institution or health information custodian verifies the information is accurate and correct to the best of its knowledge.