

# Personal Health Information Protection Act, 2004 REPORT

FILE NO. HI-050036-1

A Medical Clinic in a Rural Setting

## Personal Health Information Protection Act, 2004

## **REPORT**

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TILE NO.	111-030030-1
INVESTIGATOR:	Gillian Judkins
HEALTH INFORMATION CUSTODIAN:	Medical Clinic in a Rural Setting

### SUMMARY OF INFORMATION GIVING RISE TO REVIEW:

A member of the public contacted the Office of the Information and Privacy Commissioner/Ontario (the IPC) after discovering that they had been provided with a receipt containing the personal health information of another individual from a medical clinic (the clinic) they had attended. The clinic worked with the IPC to address its obligations under the *Personal Health and Information Protection Act*, 2004 (the *Act*) including the notification of affected patient.

### **RESULTS OF REVIEW:**

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The IPC immediately contacted the clinic to advise them of the incident. The clinic's President investigated the matter and provided the following information.

On the date in question, the individual who contacted the IPC (patient A) had been at the clinic for an appointment and had left following a disagreement with staff regarding the payment for a medical certificate. When patient A returned to the clinic following his departure, he paid for his certificate and was issued a receipt in the name of another patient (patient B). The President advised that staff had been feeling anxious about the previous disagreement with patient A and in an effort to quickly expedite his request, they unfortunately provided him with patient B's receipt.

According to the President, patient A returned to the clinic a third time to point out the error on the receipt to the staff. The staff advised patient A that they would mitigate the error by replacing the erroneous receipt with the correct version and advised that they would shred the incorrect receipt. According to the President, patient A refused to return patient B's receipt.

The President advised that they have a high standard for hiring and training staff at the clinic and that all staff are trained regarding appropriate disposal of information that contains personal health information. The President advised that they have a shredding policy that is strictly adhered to by all staff. In addition to the above information, the President advised that staff have been reminded to double check the names on all receipts before handing them to patients.

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.

June 20, 2006

Ann Cavoukian, Ph.D. Commissioner