



The **Clarence-Rockland Family Health Team (CRFHT)** is committed to patient privacy and the confidentiality of the personal health information (“PHI”) it holds. This notice describes how health information about you may be used, collected, and disclosed; and how you can access this information, in compliance with Ontario’s Personal Health Information Protection Act, 2004.

## **Your Health Record**

Your health record includes information relevant to your health including your date of birth, contact information, health history, family health history, details of your physical and mental health, the care and support you received during your visits, results from tests and procedures, and information from other health care providers. The information in your health record belongs to you, but the health record itself is the property of **CRFHT**.

Your health record is stored in our electronic medical record system (EMR) which is protected by multiple passwords and a firewall. All members of our healthcare team have access to the EMR.

All staff sign a privacy and confidentiality agreement at time of employment and annually thereafter as part of their evaluation. In addition, all staff receives mandatory privacy training during orientation and on an ongoing basis. The EMR is audited regularly for unauthorized use and/or access.

With limited exceptions, you have the right to access the health information we hold about you, whether in the health record or elsewhere. If you request a copy of your record, one will be provided to you at a reasonable cost. If you wish to view the original record, one of our staff members must be present, and a reasonable fee may be charged for this access. If you need a copy of your health record, please ask your care provider or contact our Privacy Officer. In rare situations, you may be denied access to some or all of your record (with any such denial being in accordance with applicable law).

We make every effort to ensure that all of your information is recorded accurately. Please let us know if there is something that is incorrect. You have a right to ask for a correction to your record if you disagree with what is recorded. In most cases we will be able to make the requested correction but if not, we will ask you to prepare a statement of disagreement to be attached to the record.



## **Our Practices**

We collect, use and disclose (i.e. share) your health information to:

- Treat and care for you
- Deliver our programs
- Plan, administer and manage our internal operations
- Be paid or process, monitor, verify or reimburse claims for payment
- Provide appointment reminders to you
- Conduct risk management, error management and quality improvement activities
- Educate our staff and students
- Respond to or initiate proceedings
- Compile statistics
- Comply with legal and regulatory requirements
- Fulfill other purposes permitted or required by law

Our collection, use and disclosure of your personal health information is done in accordance with Ontario law.

## **Your Choices**

You have a right to make choices as to how your health information at **CRFHT** is collected, used, and disclosed.

For most purposes, your consent to use your health information is implied as a result of your consent to treatment unless you tell us otherwise. We may also collect, use and disclose your health information in order to communicate or consult with other health care providers about your care unless you tell us you do not want us to do so.

You have the right to ask that we not share some or all of your health record with one or more of our staff members, or ask us not to share your health record with one or more of your external health care providers (such as a specialist). This is known as asking for a “lockbox”. It is important to note that there may be an impact on our ability to provide you with the best care if our healthcare professionals cannot access your health record. For this reason, we ask that you discuss this with your family doctor first.

There are other circumstances where we are not allowed to assume we have your consent to share information. For example, we must have your permission to give your health information to people who do not provide you with health care including health professionals in **CRFHT** not involved in your care, your insurance company or your



employer. We may also need consent to communicate with any family members or friends with whom you would like us to share information about your health unless one or more of these individuals is your substitute decision-maker.

When we require and ask for your consent, you may choose to say no subject to some restrictions under applicable law. If you say yes, you may change your mind at any time subject to the requirement for you to provide us with reasonable notice. Once you say no, we will no longer share your information unless you say so.

There are cases where we may collect, use or disclose your health information without your consent, as permitted or required by law. For example, we do not require your consent to use your information for billing, risk management or error management, quality improvement purposes; or to disclose personal health information in a number of permitted or required circumstances, including to eliminate or reduce a significant risk of serious bodily harm; or to fulfill mandatory reporting obligations under other laws such as for child protection or safe operation of a motor vehicle.

### **For More Information or Complaints**

If you would like a copy of our Privacy Policy, please ask us.

We encourage you to contact us with any questions or concerns you might have about our privacy practices. Our Privacy Officer is:

Harry Jones  
Executive Director  
Clarence-Rockland FHT  
2741 Chamberland Street  
Rockland, Ontario  
K4K 0B4

Telephone: (613) 446-7677  
Fax: (613) 446-5737

If, after contacting us, you feel that your concerns have not been addressed to your satisfaction, you have the right to complain to the Information and Privacy Commissioner of Ontario. The Commissioner can be reached at:



Équipe de santé familiale **Clarence Rockland** Family Health Team

2741, rue Chamberland Street, Rockland, Ontario K4K 0B4

Information and Privacy Commissioner of Ontario  
2 Bloor Street East, Suite 1400  
Toronto, Ontario M4W 1A8  
1-800-387-0073  
1-416-325-9195 (fax)  
or visit the IPC website via [www.ipc.on.ca](http://www.ipc.on.ca)

Tél. : 613-446-7677 Tel  
Télééc. : 613-446-5737 Fax

www.ESFCR.ca  
www.CRFHT.ca

