



First Nations & Inuit Health Branch Alberta Region

Policy Number: 1.1.2

Nursing Policies & Guidelines

Section: **Corporate Policies: Administration**

Subject: **Confidentiality**

Distribution: **All Nursing Facilities**

Issued: May 1, 2018	Policy Number: 1.1.2
Revised: -	
Approved by:  Shawn Grono, Director of Nursing	Effective Date: May 2018 Through April 2020

1. Policy:

- 1.1 Client information shall be collected, accessed or disclosed only by authorized individuals in accordance with relevant policies, procedures and legislation. Personal, family and community information obtained in the context of a professional relationship is considered confidential and shall be respected, communicated and maintained in a manner that safeguards privacy (Treasury Board, 2017).
- 1.2 Personal employee information shall not be released externally or internally without employee authorization, except when provisions of a collective agreement, legislation, or a FNIHB-AB Human Resources policy allows.
- 1.3 Immediate supervisors shall educate all new employees on methods of safeguarding information and necessary authorizations for the collection, use and disclosure of personal or health information. All employees are required to sign an *Oath of Office and Secrecy* form.

2. Principles

- 2.1 Every individual has a legal right to control the collection, use, access and disclosure of their personal health information. The *Health Information Act* (1999) describes the provisions for the management of personal health information and the client's rights regarding their personal health information
- 2.2 Nurses have ethical and legal responsibilities to maintain the confidentiality and privacy of all client health information obtained while providing health care services to clients.
- 2.3 When health services are required, access to confidential information in the workplace occurs intentionally on a "need to know" basis among members of the health care team. Breaches of confidentiality occur when personal information is accessed without a "need to know" or disclosed without proper authorization.
- 2.4 Health care staff will not abuse their access to information by accessing health records, including their own, a family member's or any other person's, for purposes inconsistent with their professional obligations (*Access to Information Act*, 2017).



2.5 Any questions about the release of information should be referred to the immediate supervisor. The *Access to Information and Privacy (ATIP) Coordinator* for Indigenous Services Canada may be consulted as required.

2.6 Proper keeping and handling of health records shall be in accordance with the provisions of the *Access to Information Act (2017)*.

2.7 All nurses are expected to attend the ATIP training (“Privacy 101”) or similar workshop at the earliest availability.

3. Definitions:

3.1 **Nurse:** Nurse refers to a Registered Nurse, a Nurse Practitioner and a Licensed Practical Nurse.

3.2 **Information Privacy:** The client’s right to control how his/her personal health information is controlled, used and disclosed (CARNA, 2011).

3.3 **Personal Health Information:** Refers to any identifying information about clients that is in verbal, written or electronic form. Such information relates to the following:

- a. Physical or mental health (including family health history);
- b. Care previously provided;
- c. A plan of service;
- d. Payments or eligibility for health care;
- e. Donation of body parts or substances, or information gained from testing these body parts or substances;
- f. A person’s personal health number (PHN); or
- g. The name of a client’s substitute decision-maker.

4. Procedure:

4.1 Much of the information that nurses come in daily contact with is considered confidential and may be generated from the health record, the computer system, reports, hospital correspondence, conversations, and/or normal daily operations.

4.2 Each staff member shall collect, use, access and disclose client personal health information on a “need-to-know” basis with the highest degree of anonymity possible and in accordance with the CARNA (2005) *Nursing Practice Standards*, CARNA (2011) *Privacy and Management of Health Information*; and, the CLPNA *Standards of Practice for Licensed Practical Nurses in Canada* (2013).

4.3 When the nurse is required to disclose information for a particular purpose, he/she is only to disclose the amount of information necessary for that purpose and to inform only those necessary. Please refer to the ISC Policy *Consent to Release of Information* to find specific instances where information may be released.

4.4 Recommended strategies for maintaining privacy and confidentiality include, but are not limited to:

Verbal Communications

4.4.1 Client information should not be discussed where others can overhear the conversation, e.g. in hallways, on elevators, in the employee lounge, on any form of public transportation, and at social events.

4.4.2 The nurse will ensure discussions of clinical cases are respectful and does not identify those persons receiving care unless appropriate.

4.4.3 Dictation of client information should occur in locations where others cannot overhear.



Written Information

- 4.4.4 Confidential papers, client health records, reports and computer printouts should be kept in secure areas. Client health records are not to be kept in the clinic rooms after hours – these must be stored in a locked area.
- 4.4.5 Client's health records (paper and electronic) are to be closed/secured when not in use or when the nurse needs to leave the clinic room.
- 4.4.6 Confidential papers should be picked up as soon as possible from copiers, mailboxes, conference room tables and other publicly accessible locations.
- 4.4.7 Confidential papers should be appropriately disposed of, e.g. shredded or deposited into the designated confidential containers.
- 4.4.8 Fax machines are the least controllable technology when one transmits client information and hence, local protocols should be put in place to ensure confidential faxed information is secured immediately upon receipt.

Computerized Information

- 4.4.9 Protecting your computer access is important to maintain privacy, confidentiality and your accountability for access to our systems ([Acceptable Use of Electronic Devices and Networks Standard](#)).

Employee Conduct

- 4.4.10 Staff members with access to information about clients, employees, or business matters may only obtain information that is necessary for their job functions. Regardless of the format in which this information is obtained, i.e. verbal, written, or electronic, it must be treated with the same level of confidentiality.

5. Related Policies and Procedures

ISC – FNIHB Policy Disclosure of Client Information

Canadian Nurses Protective Society. *Confidentiality of Health Information*.

College and Association of Registered Nurses of Alberta (CARNA). *Practice Standard-Privacy and Management of Health Information*.

Government of Canada. *Access to Information Act*.

Government of Canada. *Access to Information and Privacy*.

Province of Alberta. *Health Information Act*.

[Acceptable Use of Electronic Devices and Networks Standard](#)

6. REFERENCES:

Canadian Nurses Association. (2017). *Code of Ethics for Registered Nurses*. Ottawa, On: Author. Retrieved December 20, 2017. <https://www.cna-aiic.ca/~media/cna/page-content/pdf-en/code-of-ethics-2017-edition-secure-interactive>

Canadian Nurses Association. (2001). *Privacy of Personal Health Information Position Statement*. Ottawa, ON: Author.



Canadian Nurses Protective Society (October 2008). *Confidentiality of Health Information*. Retrieved 26 October 2017. <https://www.cnps.ca/index.php?page=104>.

College and Association of Registered Nurses of Alberta (CARNA). (2011). *Privacy and Management of Health Information*. Edmonton, AB: Author. Retrieved December 20, 2017. http://www.nurses.ab.ca/content/dam/carna/pdfs/DocumentList/Standards/CARNA_PrivacyHealthInfo_Sept2011.pdf

College and Association of Registered Nurses of Alberta (CARNA). (2005). *Nursing Practice Standards*. Edmonton, AB: Author. Retrieved January 29, 2018. http://www.nurses.ab.ca/content/dam/carna/pdfs/Guidelines/new_nps_with_ethics.pdf

College of Licensed Practical Nurses of Alberta (CLPNA). (2013). *Standards of Practice for Licensed Practical Nurses in Canada*. Edmonton, AB: Author.

Government of Canada. (2017). *Access to Information Act*. Ottawa, ON: Author. Retrieved December 20, 2017. <http://laws-lois.justice.gc.ca/eng/acts/A-1/>

Government of Canada. (2017). *Access to Information and Privacy*. Ottawa, ON: Author. <https://www.canada.ca/en/treasury-board-secretariat/topics/access-information-privacy.html>

Provincial Government of Alberta. (2016). *Health Information Act*. Edmonton, AB: Queens Printer. Retrieved March 28, 2018. <http://www.qp.alberta.ca/documents/Acts/H05.pdf>

Treasury Board Secretariat. (2017). *Access to information*. Ottawa, ON: Author. Retrieved December 20, 2017. <https://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=12453>

Treasury Board Secretariat. (2017). *Access to information and privacy*. Ottawa, ON: Author. Retrieved December 20, 2017. <https://www.tbs-sct.gc.ca/pol/topic-sujet-eng.aspx?ta=71>