FNIHB-OR Nursing Policy and Procedure

Section: **Professional Nursing Practice**

Subject: Confidentiality

Distribution: All Nursing Facilities

Policy Number: II - 05

Issued: March 31, 2015 Revised:

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.
- 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-OR Human Resources policy.
- 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 *Personal Health Information Protection Act* (*PHIPA*) (2004) describes the provisions for the management of personal health information and the client's rights regarding their personal health information
- 2.2 Personal health information is stored in a variety of Personal Information Banks. These banks provide descriptions about how personal information is used, and for how long the information is being retained.
- 2.3 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.
- 2.4 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.

- 2.5 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.
- 2.6 Any questions about the release of information should be referred to the immediate supervisor. The Access to Information and Privacy (ATIP) Coordinator for Health Canada may be consulted as required.
- 2.7 Proper keeping and handling of health records shall be in accordance with the provisions of the *Privacy Act*. (R.S.C., 1985, c. P-21).
- 2.8 All nurses are expected to attend the ATIP training ("Privacy 101") or similar workshop at the earliest availability.

3. DEFINITIONS:

- 3.1 **Nurse:** For the purpose of this policy, Nurse refers to Registered Nurses, Nurse Practitioners and Registered Practical Nurses.
- 3.2 **Information Privacy:** The client's right to control how his/her personal health information is controlled, used and disclosed (CNO, 2009).
- 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 health number; or
 - g. The name of a client's substitute decision-maker. (PHIPA, 2004)

4. PROCEDURE:

- 4.1 Much of the information that nurses comes in contact with daily is considered confidential and may be generated from the health record, the computer system, reports, hospital correspondence, conversations, and normal daily operations.
- 4.2 Each staff member shall collect, use, access and disclose all client personal health information on a need-to-know basis with the highest degree of anonymity possible and in accordance with the CNO Practice Standard Personal Health Information.

- 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. Under no circumstances may the aforementioned resources be accessed for personal or non-work related activities.
- 4.4 Recommended strategies for maintaining privacy and confidentiality include, but 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 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 must be stored in locked area.
- 4.4.5 Client's health records to be closed 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 recycling and confidential containers.
- 4.4.8 Fax machines are the least controllable technology when one transmits client information. Refer to the policy: *Transmitting Health Information by Fax*.

Computerized Information

4.4.9 Protecting your computer access is important to maintain privacy, confidentiality and your accountability for access to our systems.

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 POLICES AND PROCEDURES:

College of Nurses of Ontario. *Practice Standard: Personal Health Information* College of Nurses of Ontario. *Practice Standard: Documentation* College of Nurses of Ontario. *Practice Standard: Ethics Personal Health Information Protection Act (PHIPA)* (2004)

6. **REFERENCES**:

Canadian Nurses Association (2008) *Code of Ethics for Registered Nurses*. Ottawa: On Canadian Nurses Association (2001). Privacy of Personal Health Information Position Statement. Ottawa, ON. The College of Nurses of Ontario (2009). Practice Standard: Confidentiality and Privacy – Personal health information. *Privacy Act.* (R.S.C., 1985, c. P-21) *Personal Health Information Protection Act.*

Approved by:		Effective Date:
		March 31, 2015
Director of Nursing, Ontario Region	Date:	
Regional Executive, Ontario Region	Date:	