PRIVACY & SECURITY + YOUR EMR



Ariane Siegel General Counsel & Chief Privacy Officer June 13, 2019



DISCLOSURE

PRESENTER: ARIANE SIEGEL

General Counsel & Chief Privacy Officer, OntarioMD

- No Relationship with Commercial Interests
- No Financial Support
 - This program has not received financial support or in-kind support from any organization
- No Conflict of Interest
 - Ariane Siegel has not received payment or funding from any organization supporting this program AND/OR organization(s) whose product(s) are being discussed in this program
- No Bias
 - There are no potential sources of bias



OUTLINE

- **1. THE ROLE OF ONTARIOMD**
- 2. RELATIONSHIPS WITIN THE HEALTHCARE SYSTEM
- 3. MANAGING THE COMPLEXITIES OF THE HEALTHCARE SYSTEM AND THE LAW
- 4. CLINICIAN OBLIGATIONS
- 5. DATA GOVERNANCE
 - A. How to handle PHI
- 6. ACCESS v. OWNERSHIP
- 7. ACCOUNTABILITY: HOW TO CREATE AN ACCOUNTABLE PRACTICE
- 8. PROTECT YOUR PRACTICE
 - A. Safeguards
 - **B.** Privacy Breach Management Protocol
 - C. Privacy & Security Training



THE ROLE OF ONTARIOMD

- **Health Information Network Provider.**
- Serves as an **Agent** to Health Information Custodians (HICS).
- **Mission:** Make Privacy & Security Training more accessible and help clinicians better understand their obligations.

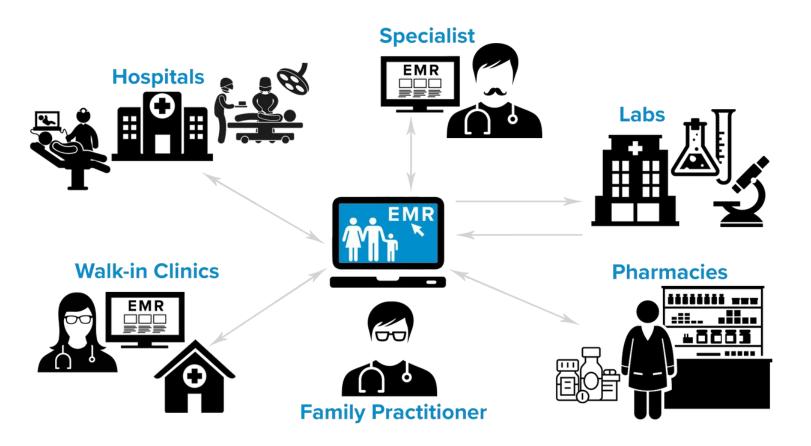




CIRCLE OF CARE

Depending on Patient Tim's health, **Dr. Chris may refer Patient Tim to other** health care professionals. These professionals will form part of Patient Tim's Circle of Care.

How do OHTS fit in?





PRIVACY: COMPLEXITIES & THE LAW

Dr. Chris' and Patient Tim's relationship is governed by complex legislation & confidentiality requirements.

The demands to preserve privacy & confidentiality are complicated by the pressure to ensure:

- Better health information sharing
- Increased efficiency of health care





PERSONAL HEALTH INFORMATION PROTECTION ACT

- "PHIPA" has stood as the statutory framework for collection, use, & disclosure of PHI since 2004.
- Under PHIPA, physicians & healthcare providers are healthp information custodians (HICs)

Key Principles:

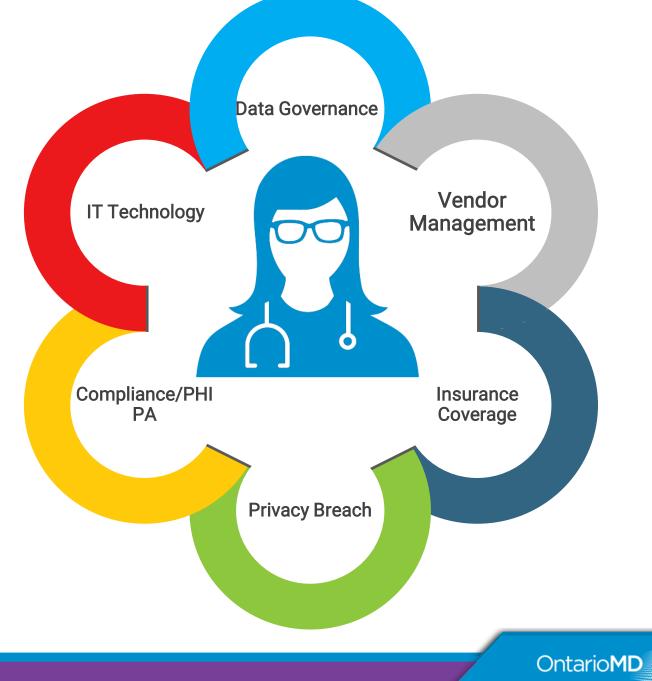
- Physician-patient relationship is built on trust
- "Consent-based" legislation





THE DOCTOR WILL SEE YOU NOW...

In addition to providing patient care, Dr. Chris, as a HIC, has many obligations to fulfill.





DATA GOVERNANCE

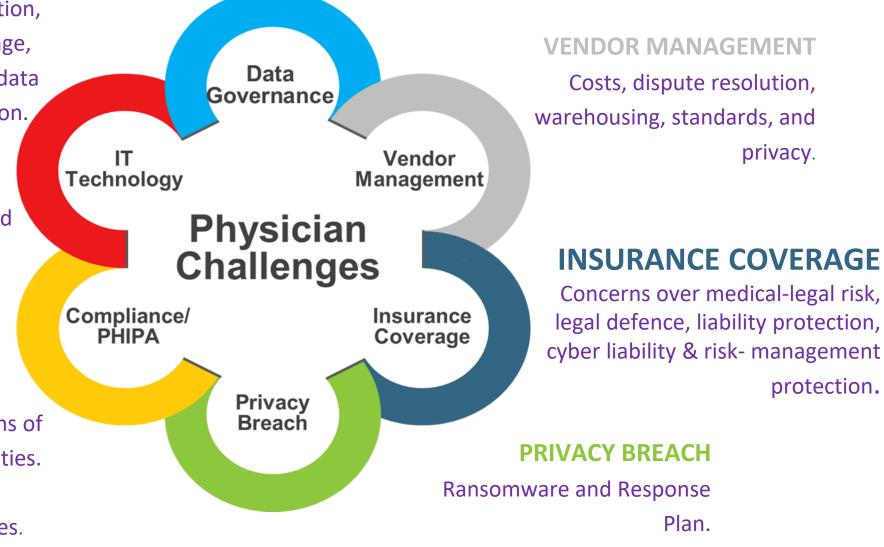
Issues related to data deletion, data ownership, data storage, data use, data portability, data retention and data migration.

IT TECHNOLOGY

Management, adoption and implementation of new technologies.

COMPLIANCE/PHIPA

Understanding the implications of the law, & HIC signing authorities. New IPC rules regarding notification of Privacy Breaches.





protection.

DATA GOVERNANCE

- Federal and Provincial Laws
- Privacy Commissioner's Requirements and Findings
- Professional Obligations as per the CPSO



CONSENT

What forms of consent does Dr. Chris need to obtain from Patient Tim in order to collect and use his PHI?

> Express Implied Assumed Implied



USE- VIEWER

What would a reasonable physician do?

In the context of that particular provision of care

Review relevant prescribing data (i.e., NMS/HQO).

Evolving expectations egreview information in digital tools- **Digital Health Drug Repository** when available/accessible.



DISCLOSURE

Once Patient Tim's PHI is in DR. Chris' EMR, can Dr. Chris share this the data with other parties?



IMPORTANT RECENT IPC DECISIONS

EQUIFAX FEDERAL OPC

- Disclosing party of PI remains accountable, even after 3rd party collects and uses data.
- Disclosure of data across borders requires consent.
 - Form of consent depends on sensitivity of information and risk of harm.

Decision 80 – DISCLOSING INFORMATION TO THE MEDIA

- Hospital responded to media request about a deceased patient. The patient had been the subject of an HPARB decision. While the name of the patient was not disclosed during communications with the media, IPC found the disclosure was inappropriate as the patient's PHI was disclosed without consent.
- **Rule**: To determine if the information being disseminated includes PHI, one must consider whether it is reasonably foreseeable, in the circumstances, that others without that special knowledge of the situation, could identify the patient by combining the information provided by the [individual] with other available information.



SECONDARY USE OF DATA

- **PHI Complicated**
- **De-identification of PHI and use for secondary**
- purposes
- Unclear
- SCC Case: British Columbia v. Philip Morris International, Inc
 - Healthcare databases not compellable
 - Phillips Morris cannot see de-identified raw data (s.2(5)(B) of the Tobacco Damages and Health Care Costs Recovery Act)



RETENTION, RELOCATION & DESTRUCTION

Physicians are responsible for retaining patient records, regardless of whether they are continuing to provide care to the respective patient(s):

- Adults: 10 years from date of last entry in record
- Children: **10 years from day patient** reached or would have reached **18**
- Transferring custody & control of patient records is governed by transfer & retention regulations.







WHO OWNS THE MEDICAL RECORD?

Physical or Digital Medical Record(s)

• Clinician or Entity that created the Medical Record (i.e. hospital or clinic)

Shared Custody and Control

The Principle: Patients have a right to reasonable access to examine and copy their records.

A Some Exceptions

likelihood of harm to patient (IPC Decision 52)





RIGHTS TO POSSESSION

Fiduciary Duty

 an obligation to place patients' interests ahead of physicians

Physicians must:

- Protect the security of patients' PHI; &
- Ensure that patients' have access to their PHI
- It is important to define who has the right to possess medical records in any physician-clinical contractual relationship





SCENARIO: RECORDS IN A SHARED PRACTICE

Contractual obligations may:

- Delegate responsibility for maintaining & transferring patient records;
- Govern custody & control;
- Limit access to the content of medical records;
- Control transfer & possession rights.

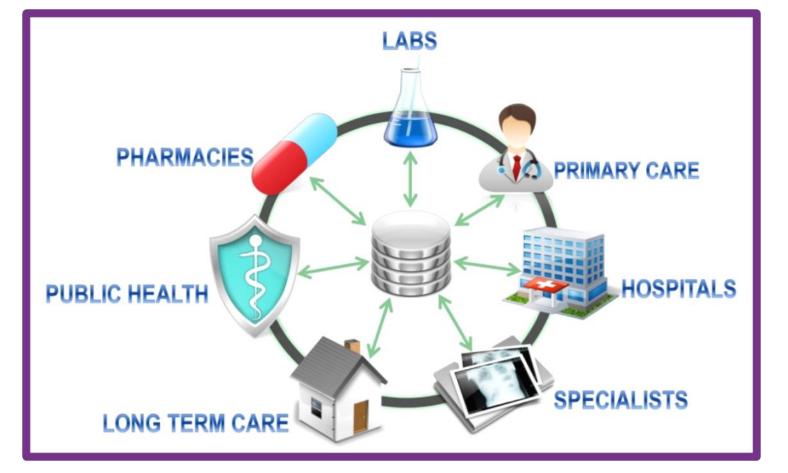
Legal Question:

Who has the ultimate right to possession over shared, EMR-hosted records? The physician, or the clinic (the EMR host – through contract)?





CREATING AN ACCOUNTABLE PRACTICE





BEST PRACTICES: TO BE ACCOUNTABLE

Identify responsibilities & create a structure of accountability

Implement staff training that covers the responsibilities, restrictions, confidentiality, spoofing, process for any data sharing, social media, security & privacy measures

Follow industry standards, best practices, & ethical standards

Develop prevention & breach response plans

If breach occurs: manage responsibly & mitigate

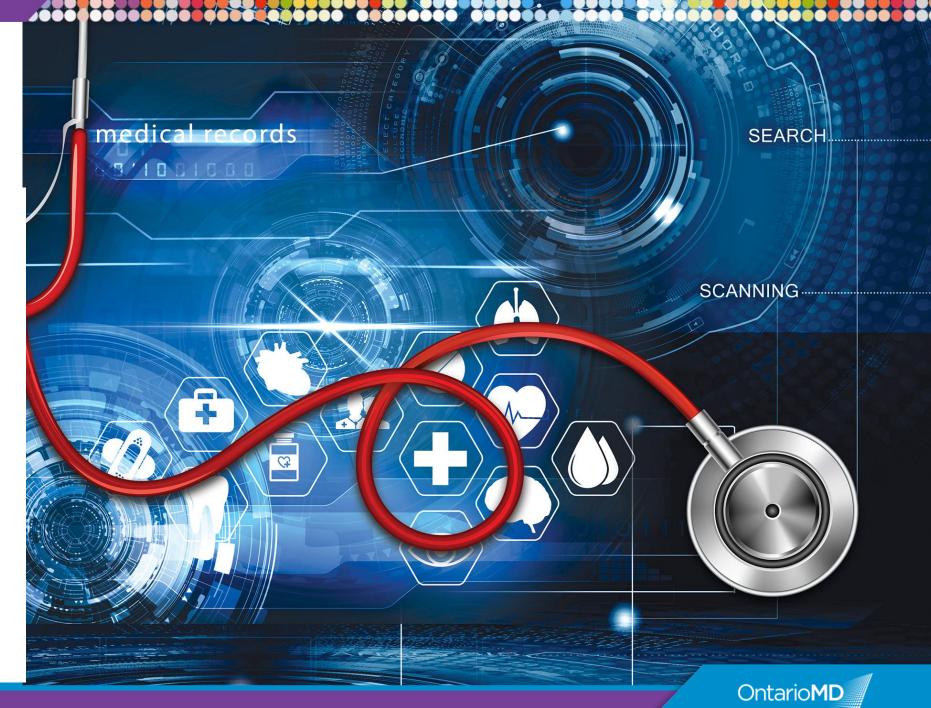
Establish audit trails with random & targeted auditing

Limit PHI collection to strictly necessary purposes



PROTECT YOUR PRACTICE





SAFEGUARDS

Update Technology

• Windows 7

Encryption

Password





PHYSICAL SAFEGUARDS

	Firewall, encryption	Credential-based access (2 factor authentication), password protection, masking, encryption, time outs
	Daily Back Up	Local and cloud
	Out of public view	Away from public view, don't store devices in car, encrypted USB keys, establish secure areas, sign in and badges, server in secure area, log out
	Audit Logs	Authentication, warning flags for consent directives
	Anti-virus	Operating System/Software - automatic updates, active firewall on networks (WINDOWS 7- 2020 ISSUE)
	ADMINISTRATIVE/	PROCESS SAFEGUARDS
	Confidentiality Agreement	
	Patient Education	Informed consent. Implied consent for sharing within circle of care. Record of consent
	Staff Training	Responsibilities, restrictions, confidentiality, spoofing, process for any data sharing, social media
	Security, TRA	Regular audits, security & threat risk assessment annual-2 years



IMPLEMENTATION

LOCAL EMR		
Encryption		
Daily Back Up	2 levels of back up = local and cloud	
Physical & Administrative Security	Audit logs	
Training	Staff	
Process	Designate, confidentiality agreements	
ASP EMR		
Ask provider	Relying on provider- ask questions	
Connectivity	Internet connectivity may be interrupted, redundant connection to the Internet from alternative supplier	
Central Storage		
PHI local jurisdiction		



THE PRIVACY BREACH MANAGEMENT PROTOCOOL

SIX Steps HICs Must Address



- Response Plan
- Cyberliability Insurance





PRIVACY & SECURITY TRAINING MODULE

ANYTIME, ANY PLACE, ANY DEVICE







THE BENEFITS

Complimentary Comprehensive Current Accredited Accessible Mobile Certificate of Completion



Learn and understand your obligations for protecting patient data.

Complete the OntarioMD Privacy and Security Training now!





PRIVACY AND SECURITY ENHANCES AND ENABLES PATIENT CARE



Questions and Discussion? Follow us on social media!

www.ontariomd.ca

- <u>twitter.com/ontarioemrs</u>
- in <a>www.linkedin.com/company/ontariomd
- ontariomd.blog
- f <u>facebook.com/ontariomd</u>
- vimeo.com/ontariomd





Thank You!

Ariane. Siegel@OntarioMD.com

