

## KINGSTON GENERAL HOSPITAL

### Basic Rules of Confidentiality

1. Patient confidentiality is a statutory requirement of the Personal Health Information Protection Act (PHIPA) of Ontario.
2. Kingston General Hospital, like all health care facilities in Canada, has policies for the protection of patient and administrative information:
  - Personal Health Information Protection - #09-055
  - Access to Personal Health Information - #09-140
  - Disclosure of Personal Health Information - #09-050
  - Collection and Use of Personal Health Information Outside of the Hospital - (new)
  - Office Records – Patient Files - #09-045
  - Duplication of PHI - # 9-150
  - Email Usage - #01-046
  - Remote Access (to be developed)
3. Each staff must be aware of the importance of confidentiality and his/her role with respect to this issue. Before beginning employment, each new staff must read and sign the hospital Confidentiality Agreement.
4. Confidentiality is everyone's responsibility, all of the time.
5. If you are aware of a breach of confidentiality in your department or in another department, you must follow up; contact your Department Head, or the Privacy Office.
6. Health information should be accessed only on a need-to-know basis by those directly involved in the care of the patient, or only as your job requires.
7. All staff should exercise additional caution with their conversations in high-risk areas, i.e. cafeteria, elevators, hallways, front lobby, general public.
8. All personal health information used for Rounds, Research, case summaries, etc., must be de-identified and when being disposed of should be put in confidential shredding or thrown in the recycling bin.
9. Personal health information must be maintained in a secure area, and accessed or disclosed only in accordance with hospital policy.
10. Release of personal health information from the patient record (paper or electronic) is to be processed through the Patient Record Department.
11. Requests for information from outside institutions should be directed through the Patient Record Department who will advise staff as to what authorizations are required.
12. If you have copies of information, either paper or electron, which you maintain for your own use, you are the custodian and are bound by the requirements identified in PHIPA.
13. No personal health information that can identify a patient can be stored on devices such as personal digital assistants (PDA's), cell phones, laptops, memory sticks, etc., unless the information is encrypted.
14. No personal health information that identifies a patient can be transmitted by email internally or external.
15. When in doubt about any matter regarding access to health information, contact the Privacy Officer.