

CATEGORY:	<b>ORGANIZATIONAL: INFORMATION MANAGEMENT</b>
SUB-CATEGORY:	<b>DISCLOSURE OF INFORMATION</b>
GROUP:	
DISTRIBUTION:	<b>ALL STAFF</b>
TITLE:	<b>DISCLOSURE OF INFORMATION – GOVERNMENT DEPARTMENTS/AGENCIES/THIRD PARTIES</b>

**PURPOSE**

To outline the process for responding to requests for clients/patients/residents’ personal information/personal health information from government departments and agencies.

**POLICY**

The privacy of all individuals who receive, or have received, services from Western Health must be maintained.

It is also recognized that government departments/agencies may request client/patient/resident personal information/personal health information (hereinafter referred to as information.) Information must only be disclosed as authorized or required by law or with the consent of the client/patient/resident. In instances where the information is authorized or required by law, the applicable legislation and section(s) must be provided by the requestor prior to the disclosure of information taking place.

When inquiries/requests for information are received from a government department/agency, all employees must immediately make their manager/leader aware of the inquiry/request.

The next three sections of this policy outline the specific direction that all employees must follow upon receipt of a request for personal information/personal health information to these requesters of information, namely:

- Members of the House of Assembly (MHAs)
- Department of Health and Community Services
- Department of Child, Youth and Family Services

### **Members of the House of Assembly (MHAs)**

All employees must refer to the policy *Disclosure of Information – Members of the House of Assembly (MHAs)* (#9-02-20) for direction.

### **Department of Health and Community Services**

The consent of the client/patient/resident is not required to disclose personal information/personal health information to the Department of Health and Community Services where the Department of Health and Community Services requests that such information be provided. In such cases, the applicable provincial legislation (e.g. *Regional Health Authorities Act*, *Regional Health Authorities Regulations* and/or *Personal Health Information Act*) permits or mandates disclosure.

### **The Department of Child, Youth and Family Services**

Disclosure of information to the Department of Child, Youth and Family Services must take place in accordance with policies *Child Protection Protocol: Suspected Need for Protective Intervention* (#6-02-20) which applies to all employees of Western Health as well as *Duty to Report* (#6-02-11) and *Consent for Service for Individuals* (#18-06-20) which applies to employees of the Population Health Branch. In addition to these policies, a Memorandum of Understanding (MOU) between Western Health and the Department of Child, Youth and Family Services permits the sharing of information between the two organizations where there is a suspected need for protective intervention as well as in the course of providing coordinated care to clients/patients/ residents of Western Health.

When information is disclosed to a government department/agency from a client/patient/resident record that also contains information pertaining to another individual, this information must be redacted from the record. Alternatively, where appropriate, the employee who is processing the disclosure of information request may notify this individual to obtain his/her consent to disclose the information. If the individual responds indicating that s/he does not want the information to be included in the disclosure of information or the individual cannot be notified, a copy will be made that must have the third party information redacted before it is disclosed to the government department/agency. The original information must not be altered or disclosed. The employee must document in the client/patient/resident's record either that the third party did not agree or was unable to be contacted.

When an employee of Western Health receives a request to disclose / obtain information, an original *Consent to Disclose/Obtain Information* form (#12-475) is required. Faxed authorizations may only be used in urgent or exceptional circumstances with the reason for doing so outlined in the record. Furthermore, the original authorization must follow. Photocopied consents are not acceptable. A *Consent to Disclose / Obtain Information* form may be sent (e.g. via mail) for the client/patient/resident to sign if necessary.

## DEFINITIONS

**Redact** - Censor or obscure (part of a text) for legal or security purpose, e.g. using a black permanent marker or dry line liquid paper.

**Third party** – For the purposes of this policy, third party includes:

- An individual whose personal information/personal health information is included in the record of a client/patient/resident of Western Health.
- An individual/organization that is requesting disclosure of information under this policy.

## PROCEDURE

### **The employee/manager/leader who is responding to the inquiry/request:**

1. Confirms with the requester that the client/patient/resident is aware of the request and that the requester has obtained consent from the client/patient/resident. (Please refer to p. 1 of this policy which addresses disclosure of information to Members of the House of Assembly, the Department of Health and Community Services and the Department of Child, Youth and Family Services.) If the requested information also pertains to another client/patient/resident, proceed to step #2 in the procedure. If this is not the case, proceed to step #3.
2. Obtains the name and section of the applicable law if the requester indicates that s/he is entitled to information without consent and discusses as necessary with the Regional Manager Information Access and Privacy.
3. Consults with the Regional Manager Information Access and Privacy as necessary if information is being requested that pertains to an individual other than the client/patient/resident about whom the inquiry/request is being made (eg. requester asks for information about the spouse of the individual and his/her consent has not been obtained for the purposes of the request).
4. Obtains a written request from the government department/agency that includes the following information:
  - a. The name and date of birth or MCP number of the client/patient/resident whose information is being requested,
  - b. The specific information (including the name of specific programs/services) being requested, and
  - c. The contact information for the representative of the government department/agency who is requesting the information.

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5. Documents in the client record the details of the request, the title and section(s) of the legislation under which the information may be disclosed without consent, any direction that was sought, to whom information was disclosed, and the specific information that was disclosed to the government department/agency.

**The leader/manager/director:**

1. Provides direction and discusses requests with relevant employees.
2. Consults with the Regional Manager Information Access and Privacy as necessary regarding any concerns relating to disclosure of information.

**The Regional Manager Information Access and Privacy:**

1. Provides direction to all managers who bring forward disclosure of information issues concerning inquiries/requests from government departments/agencies.

**LEGISLATIVE CONTEXT**

*Access to Information and Protection of Privacy Act (2004)*. Available at:  
<http://www.assembly.nl.ca/legislation/sr/statutes/a01-1.htm>

*Children and Youth Care and Protection Act (2010)*. Available at:  
<http://www.assembly.nl.ca/legislation/sr/statutes/c12-2.htm>

*Personal Health Information Act (2008)*. Available at:  
<http://www.assembly.nl.ca/legislation/sr/statutes/p07-01.htm>

*Regional Health Authorities Act (2006)*. Available at:  
<http://www.assembly.nl.ca/legislation/sr/statutes/r07-1.htm>

*Regional Health Authorities Regulations under the Regional Health Authorities Act (O.C. 2008-059) (2008)*. Available at:  
<http://www.assembly.nl.ca/Legislation/sr/Regulations/rc080018.htm>

**REFERENCES**

Health and Community Services Western. (2005 April). *Policy Manual: Disclosure of Information*

Western Health policy *Disclosure of Information – Members of the House of Assembly (MHAs)* (#9-02-20)

Western Health policy *Child Protection Protocol: Suspected Need for Protective Intervention* (#6-02-20)

Western Health policy *Duty to Report* (#6-02-11)

Western Health policy *Consent for Service for Individuals* (#18-06-20)

**KEYWORDS**

*Government departments, releasing information to government*

**FORMS**

[Consent to Disclose/Obtain Information \(#12-475\)](#)

TO BE COMPLETED BY QUALITY MANAGEMENT & RESEARCH STAFF ONLY

Approved By: Chief Executive Officer	Maintained By: Regional Manager, Information Access and Privacy
Effective Date: 26/October/2008	<input type="checkbox"/> Reviewed: <input checked="" type="checkbox"/> Revised: 02/March/2012
Review Date: 02/March/2015	<input checked="" type="checkbox"/> Replaces: (WHCC) AD-R-200 Release of Information from Clinical Records (WHCC) RR-A-200 Authorization for Release of Information – Standard/Form (WH) 12-1200 Consent to Release/Obtain Information (WH) 18-06-25 Release of Information  <input type="checkbox"/> New