

CATEGORY:	ORGANIZATIONAL: INFORMATION MANAGEMENT
SUB-CATEGORY:	GENERAL INFORMATION MANAGEMENT
GROUP:	
DISTRIBUTION:	ALL EMPLOYEES/PHYSICIANS
TITLE:	RESPONDING TO CLIENTS’/PATIENTS’/RESIDENTS’ REQUESTS FOR CORRECTION OF PERSONAL HEALTH INFORMATION

PURPOSE

To provide a consistent approach to responding to clients’/patients’/residents’ requests for correction of personal health information.

POLICY

Requesting Correction

i) Rights and Limitations

In keeping with Western Health policy [Client/Patient/Resident Access to Records \(9-02-60\)](#), where a client/patient/resident or his/her representative (hereinafter referred to as client/patient/resident) is provided access to his/her record of personal health information and where the client/patient/resident believes that the record is inaccurate or incomplete, the client/patient/resident must be provided the opportunity to request correction to his/her personal health information.

The Regional Manager Information Access and Privacy or designate must be notified of and may be consulted on any and all requests for correction of personal health information as outlined in this policy.

Employees who are responding to requests for correction of personal health information request (as outlined in the next section of the policy titled Directing Clients’/Patients’/Residents’ Requests for Correction) must grant the request for correction where the client/patient/resident who is making the request:

- demonstrates that the record is inaccurate or incomplete for the purposes for which Western Health uses the information, and
- provides the information necessary to enable the correction of the record.

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Alternatively, employees who are responding to these requests may refuse to grant the request in the following situations:

- The record was not originally created by Western Health, or Western Health does not have sufficient knowledge, expertise and authority to correct the record,
- The information that is the subject of the request for correction consists of a professional opinion or observation that was made in good faith about the individual, or
- There is a belief on reasonable grounds that the request is frivolous or made in bad faith.

ii) Content of Request

A request for correction of personal health information must be submitted in writing on form [Request for Correction of Personal Health Information](#) (12-486) unless the individual making the request has:

- limited ability to read or write English; or
- a disability or condition that impairs his/her ability to make a request in writing.

Where such situations arise, the employee who is responding to the must document the reason(s) for not obtaining a written request. The employee must ensure the appropriate identification of the requester.

All requests for correction of personal health information must contain the following information:

- Client's/patient's/resident's name,
- Date of birth,
- MCP number or other unique identifier,
- Address,
- Sufficient information to allow for record retrieval with reasonable effort, such as the dates the personal health information would have been collected, used and/or disclosed.

Directing Clients'/Patients'/Residents' Requests for Correction within Western Health

To request correction of their paper and/or electronic record(s) of personal health information, clients/patients/residents, parents/legal guardians and/or their authorized representatives must be directed as follows:

i) Inpatients /Outpatients - Acute Care

- Health Records Department for outpatients;
- Manager or designate for the particular acute care unit or the Health Records Department in the acute care facility.

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All outpatient requests for access to records of personal health information must be directed to the Health Records Department at the facility where the record is located. In consultation with the Regional Manager Health Information or designate, a patient will be provided access to the record of personal health information during his/her stay on the acute care unit, in particular where the request for access consists of a limited amount of information (e.g. a lab result related to the current episode of care). If the request concerns access to the entire record, the request must be directed to the Health Records Department at the acute care facility where the record is located.

ii) Long Term Care

- Manager or designate in the long term care facility or the Health Records Department at the acute care facility where the record is located;
- Health Records Department at rural sites.

In consultation with the Regional Manager Health Information or designate, a resident will be provided access to his/her record of personal health information at the long term care facility, in particular where the request for access is to information pertaining to his/her current stay in long term care. If the request concerns access to the entire record, the request must be directed to the Health Records Department at the acute care facility, if that is where the record is located.

iii) Population Health Branch

- the service provider in the Population Health Branch.

Processing the Request for Correction

Once received, the request must be date stamped by the recipient of the request, at the specific facility/site/clinic.

Written correspondence acknowledging the request must be forwarded to the client/patient/resident advising that the request for correction of personal health information was received and will be responded to within the legislated time of 30 days from date of receipt of the request. (Please also refer to the next section of the policy.)

The client/patient/resident must also be provided written notice of the outcome of the request, whether approved or denied, as soon as possible and no later than thirty (30) days or a maximum of sixty (60) days from the date of the request, where the request is extended. (Please also refer to the next section of the policy.)

Time Limits for Responding to Requests for Correction

In keeping with the *Personal Health Information Act* (PHIA), designated employees of Western Health as outlined above must respond to a correction or amendment request from a client/patient/resident within thirty (30) days of receiving the request. In order for an extension of an additional thirty (30) days to be available, the request must meet the

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following criteria and the designated employee must inform the client/patient/resident in writing of the reasons for the extension which must be for the following reasons only:

- Meeting the thirty (30) day time limit would unreasonably interfere with the operations of the custodian; or
- The information that is the subject of the correction request is located in numerous records and cannot be completed within the time limit.

In such situations, the employee who is responding to the request may consult with the Regional Manager Information Access and Privacy or designate for further direction as necessary. As well, the employee who is responding to these requests may grant or refuse the client/patient/resident's request as soon as possible; however, the time limit for responding to the request must not exceed the expiration of the time limit that was extended.

Where the employee fails to respond to a request for correction with the thirty (30) or sixty (60) day time limit, Western Health is considered to have refused the request for correction and the client/patient/resident who is requesting correction may:

- appeal the refusal to the Supreme Court, Trial Division, or
- request a review of the refusal by the Office of the Information and Privacy Commissioner (OIPC) for Newfoundland and Labrador.

Correcting the Record

Where a request for correction is granted, the correction must include:

- Striking out the incorrect information in a manner that does not obliterate the contents of the record; or
- Where it is not possible to strike out the incorrect information:
 - labeling the information as incorrect,
 - severing the incorrect information from the record,
 - storing the incorrect information separately from the record, and
 - maintaining a link in the record that enables tracing the incorrect information; or
- Where it is not possible to record the correct information, ensure that there is a process in place to inform a person accessing the record that the information in the record is incorrect and to direct the person to the correct information.

Where a request for correction is granted, in collaboration with the Regional Manager Information Access and Privacy or designate, the Western Health employee who is responding to the request must provide written notice to the client/patient/resident who made the request for correction of the specific action taken.

Also in consultation with the Regional Manager Information Access and Privacy or designate, the employees who is responding to the request must provide written notice of the requested correction, to the extent reasonably possible, to a person to whom Western

Health has disclosed the information within the 12 month period immediately preceding the request for correction, unless:

- The employee reasonably believes that the correction or amendment will not have an impact on the ongoing provision of health care or other benefits to the client/patient/resident; or
- The client/patient/resident requesting the correction or amendment has advised that notice is not necessary.

Refusing Requests for Correction

Where a request for correction of personal health information is **refused**, the employee responding to the request must:

- Annotate the personal health information with the correction that was requested and not made and, where reasonably possible, notify a person to whom the information was disclosed within the twelve (12) month period immediately preceding the request for correction of the notation, unless there is a reasonable expectation that the notation will not have an impact on the ongoing provision of health care or other benefits to the client/patient/resident or the individual requesting the correction has advised that notice is not necessary; and
- Provide the client/patient/resident requesting the correction with a written notice setting out the correction that has been refused, the refusal together with reasons for the refusal, and the right of the client/patient/resident to appeal the refusal to the Trial Division or request a review of the refusal by the OIPC.

Applying Fees

The client/patient/resident must not be charged a fee for correction of his/her personal health information.

Documenting in the Client/Patient/Resident Record

All written correspondence in respect to the request for correction, as well as the original request (whether approved or refused) must be filed on the client's/patient's/resident's record.

The Regional Manager Information Access and Privacy or designate must:

1. To ensure the integrity of the record and requested corrections, as appropriate, review the request for correction in consultation with the employee who is responding to the request.
2. Once the request is granted, consult with other appropriate departments / programs / services to determine the appropriate process to correct the information.

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DEFINITIONS

Annotation: Annotate the personal health information with the correction that was requested and not made and, where reasonably possible, notify a person to whom the information was disclosed within the 12-month period immediately preceding the request for correction of the notation, unless Western Health reasonably expects that the notation will not have an impact on the ongoing provision of health care.

Correction: Where a custodian has granted an individual access to a record of his or her personal health information and the individual believes that the record is inaccurate or incomplete, he or she may request the custodian to correct the information.

Disclose: To make the information available or to release it but does not include a use of the information and “disclosure” has a corresponding meaning.

Record: Personal health information in any form that is written, photographed, recorded or stored in any manner, but does not include a computer program or a mechanism that produces records on a storage medium.

Personal Health Information: Identifying information in oral or recorded form about an individual that relates to:

- information concerning the physical or mental health of the individual, including information respecting the individual’s health care status and history and the health history of the individual’s family;
- the provision of health care to the individual, including information respecting the person providing the health care;
- the donation by an individual of a body part or any bodily substance, including information derived from the testing or examination of a body part or bodily substance;
- registration information;
- payments or eligibility for a health care program or service in respect of the individual, including eligibility for coverage under an insurance or payment arrangement with respect to health care;
- an individual’s entitlement to benefits under or participation in a health care program or service;
- information about the individual that is collected in the course of, and is incidental to, the provision of a health care program or service or payment of a health care program or service;
- a drug as defined in the *Pharmacy Act*, a health care aid, device, product, equipment or other item provided to an individual under a prescription or other authorization issued by a health care professional; or
- the identity of a person’s representative as defined in Section 7 of the *Personal Health Information Act*.

Representative: In keeping with the *Personal Health Information Act* (PHIA), a right or power of an individual may be exercised

- (a) by a person with written authorization from the individual to act on the individual's behalf;
- (b) where the individual lacks the competency to exercise the right or power or is unable to communicate, and where the collection, use or disclosure of his or her personal health information is necessary for or ancillary to a "health care decision", as defined in the *Advance Health Care Directives Act*, by a substitute decision maker appointed by the individual in accordance with that Act or, where a substitute decision maker has not been appointed, a substitute decision maker determined in accordance with section 10 of that Act;
- (c) by a court appointed guardian of a mentally disabled person, where the exercise of the right or power relates to the powers and duties of the guardian;
- (d) by the parent or guardian of a minor where, in the opinion of the custodian, the minor does not understand the nature of the right or power and the consequences of exercising the right or power;
- (e) where the individual is deceased, by the individual's personal representative or, where there is no personal representative, by the deceased's nearest relative, and for this purpose, the identity of the nearest relative may be determined by reference to section 10 of the *Advance Health Care Directives Act*;
- (f) where the individual is a neglected adult within the meaning of the *Neglected Adults Welfare Act*, by the Director of Neglected Adults appointed under that Act; or
- (g) where an individual has been certified as an involuntary patient under the *Mental Health Care and Treatment Act*, by a representative as defined in that Act, except as otherwise provided in this Act.

LEGISLATIVE CONTEXT

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

KEYWORDS

Correction, correction of records, correcting records, responding to requests for correction

FORMS

[Request for Correction of Personal Health Information Form # 12 - 486](#)

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TO BE COMPLETED BY STAFF IN QUALITY DEPARTMENT

Approved By: Chief Executive Officer	Maintained By: Regional Manager, Information Access and Privacy
Effective Date: 01/May/2012	<input checked="" type="checkbox"/> Reviewed: 16/July/2018 <input checked="" type="checkbox"/> Revised: 15/September/2015
Review Date: 16/July/2021	<input type="checkbox"/> Replaces: <i>(Indicates name and number of policy being replaced)</i> OR <input checked="" type="checkbox"/> New

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