



## Privacy Code for Greatlakes Oral & Max Dental Office

### **Introduction**

Privacy of personal information is an important principle in the provision of quality dental care to our patients. We understand the importance of protecting your personal information. We are committed to collecting, using and disclosing your personal information responsibly. We also try to be as open and transparent as possible about the way we handle your personal information.

We have tried to make our office Privacy Code as easy to understand as possible. To ensure that you see how we are complying with the federal privacy legislation, the *Personal Information and Protection and Electronic Documents Act (PIPEDA)*, our Privacy Code is organized to follow the Act's ten interrelated principles that are the foundation of PIPEDA.

### **Definitions**

#### **Collection**

The act of gathering, acquiring or obtaining personal information from any source, including third party sources by any means

#### **College**

Royal College of Dental Surgeons of Ontario

#### **Consent**

A voluntary agreement with that is being done or is being proposed to be done. Consent can either be express or implied. Express consent may be given explicitly, either orally or in writing

#### **Disclosure**

Making personal information available to others besides the dentist or the dentist's staff

#### **Legislation**

The *Regulated Health Professions Act (RHPA)*, Schedules attached, *Dentistry Act*, Regulations made under these Acts, and By-laws of the College, and the *Personal Information Protection and Electronic Documents Act (PIPEDA)*

#### **Member**

A member of the Royal College of Dental Surgeons of Ontario and this includes a health profession corporation

#### **Office**

The dental office and when referencing access to information, to the Privacy Information Officer, and the dental office

**Patient**

An individual about whom the dentist collects personal information in order to carry out prognosis, diagnosis, and treatment, including controlled acts

**Personal Information**

Information about a patient that is recorded in any form, and this includes: the patient's name, address, telephone number, social insurance number, fax number, e-mail address, gender, marital status, children, date of birth, occupation, medical records, health records, insurance company, insurance coverage, history, occupation, place of work, employer

**RHPA Procedural Code**

The Health Professions Procedural Code, Schedule 2 to the *Regulated Health Professions Act (RHPA)*

**PIPEDA Principles****Principle 1: Accountability**

The dentist in this office is responsible for information collected by him/her, or under his/her direction, and under his/her control.

Accountability for this office's compliance rests with the designated individual or individuals, even though others in the office may be responsible for the day-to-day collection and processing of personal information.

The identity of the individual designated by the dentist to oversee the compliance, the Privacy Information Officer, will be made known upon request.

This office is responsible for information in our possession or custody, including information that has been transferred to a third party for processing. We will use contractual or other means to provide a comparable level of protection while the information is being accessed and/or processed by that third party.

Our office will implement policies and practices to give effect to the principles, including:

- implementing policies to protect personal information;
- establishing procedures to receive and respond to complaints and inquiries;
- training staff about privacy policies and practices;
- developing information to explain privacy policies and procedures

**Principle 2: Identifying Purposes for Collecting Information**

The purpose for which personal information is collected in this office will be identified before or at the time the information is collected.

This office collects personal information for the following purposes;

- to deliver safe and efficient patient care
- to identify and to ensure continuous high quality service
- to assess your health needs
- to provide health care
- to advise you of treatment options
- to enable us to contact you
- to establish and maintain communication with you
- to offer and provide treatment, care and services in relationship to the oral and maxillofacial complex and dental care generally
- to communicate with other treating healthcare providers, including specialists and general dentists who are the referring dentists and/or peripheral dentists
- to allow us to maintain communication and contact with you to distribute healthcare information and to book and confirm appointments
- to allow us to efficiently follow-up for treatment, care and billing
- for teaching and demonstrating purposes on an anonymous basis
- to complete and submit dental claims for third party adjudication and payment
- to comply with legal and regulatory requirements, including the delivery of patients' charts and records to the College in a timely fashion, when required, according to the provisions of the *Regulated Health Professions Act*
- to comply with agreements/undertakings entered into voluntarily by the member with the Royal College of Dental Surgeons of Ontario, including the delivery and/or review of patients' charts and records to the College in a timely fashion for regulatory and monitoring purposes
- to permit potential purchasers, practice brokers or advisors to evaluate the dental practice
- to allow potential purchasers, practice brokers or advisors to conduct and audit in preparation for a practice sale
- to deliver your charts and records to the dentist's insurance carrier to enable the insurance company to assess liability and quantify damages, if any
- to prepare materials for the Health Professions Appeal and Review Board (HPARB)
- to invoice for goods and services
- to process credit card payments
- to collect all unpaid accounts
- to assist this office to comply with all regulatory requirements
- to comply generally with the law

This office will identify the purposes for which personal information is collected, at or before the time of collection. We will only collect that information necessary for the identified purposes.

When personal information has been collected and is to be used or disclosed for a purpose not previously identified, the new purpose will be identified prior to its use or the disclosure. Your consent is required before the information can be used or disclosed for that purpose.

Office staff collecting personal information will be able to explain to you the purpose for which the information is being collected.

When you sign the Patient Consent Form, you will be deemed to understand and accept this office's collection, use and disclosure of your information for the specified purposes.

### **Principle 3: Consent**

This office will seek informed consent for the collection, use and/or disclosure of personal information, except where it might be inappropriate to obtain your consent, and subject to some exceptions set out in law.

Consent is required for the collection of personal information and subsequent use or disclosure of that information.

In order for the principles of consent to be satisfied, our office has undertaken reasonable efforts to ensure that you are advised of the purposes which information is being used, and that you understand those purposes. Once consent is obtained, we do not need to seek your consent again, unless the use, purpose or disclosure changes.

Existing protocols for electronic submissions of dental claims require a signature on file. Specific consent may be required for additional requests from insurers. This shall be collected at the time, or in conjunction with pre-determinations for extensive services, providing the scope of information released is disclosed. If there is any doubt, information shall be released directly to you for review and submission.

Consent for the collection, use and disclosure of personal information may be given in a number of ways, such as:

- signed medical history form;
- signed introductory questionnaire;
- taken verbally over the telephone and then charted;
- email;
- written correspondence

You may withdraw consent upon reasonable notice.

**Principle 4: Limiting Collection of Personal Information**

The collection of personal information by our office shall be limited to that which is necessary for the purposes identified in this Privacy Code.

**Principle 5: Limiting Use, Disclosure and Retention**

Personal information shall not be used or disclosed for purposes other than those for which the information is collected, except with your express consent, or as required by law.

Our office has protocols in place for the retention of personal information.

Retention of information records is identified and referenced in College's Guidelines on Dental Recordkeeping.

In destroying personal information, our office has developed guidelines to ensure secure destruction in accordance with the College's Guidelines on Dental Recordkeeping.

**Principle 6: Accuracy of Personal Information**

This office endeavors to ensure that your personal information is accurate, complete, and as up-to-date as necessary for the purposes that it is to be used.

The extent to which your personal information shall be accurate, complete and up-to-date will depend upon the use of the information, taking into account the interest of our patients.

Information shall be sufficiently accurate, complete and up-to-date to minimize the possibility that inappropriate information is used to make a decision about you as our patient.

**Principle 7: Safeguards for Personal Information**

Our office has taken appropriate measures to safeguard your personal information from unauthorized access, disclosures, use or tampering.

Safeguards are in place to protect your personal information against loss or theft, as well as unauthorized access, disclosure, copying, use or modification.

Your information is protected, whether recorded on paper or electronically.

Our office staff is aware of the importance of maintaining the confidentiality of personal information.

Care is used in the care and destruction of personal information to prevent unauthorized access to the information even during disposal and destruction.

**Principle 8: Openness About Privacy**

Our office will make readily available to you specific information about our office policies and practices relating to the management of personal information.

This information includes:

- a Patient Information Sheet that outlines the name of the Privacy Information Officer who is accountable for our office privacy policies. This is the person to whom you can direct any questions or complaints. The Information Sheet also describes how to access your personal information held in this office;
- a copy of our Patient Consent Form that explains how this office collects, uses and discloses your personal information;
- our office Privacy Code

**Principle 9: Patient Access to Personal Information**

You shall be able to challenge compliance with these principles with the office's Privacy Information Officer who is accountable within the dental office for the dentist's compliance. Our office has in place procedures to receive and respond to your complaints or inquiries.

This information, including the name of our office's Privacy Information Officer, is included in the Patient Information Sheet, available upon request.

The procedures are easily accessible and simple to use.

Our office has an obligation to inform our patients who make inquiries about how to access the privacy complaint process in our office, and how to access that process.

This information is outlined in the Patient Information Sheet.

The Privacy Information Officer in our office will investigate each and every complaint made to the office in writing.

If a complaint is found to be justified, the Privacy Information Officer will take appropriate measures, including, if necessary, attending any office policies and practices.

Patients will be provided with information about how to contact the Privacy Commissioner of Canada to forward any unresolved complaint. This information is included in the Patient Information Sheet, available upon request.

### **How Our Office Collects, Uses and Discloses Patients' Personal Information**

Our office understands the importance of protecting your personal information. To help you understand how we are doing that, we have outlined here how our office is using and disclosing your information.

This office will collect, use and disclose information about you for the following purposes:

- to deliver safe and efficient patient care
- to identify and to ensure continuous high quality service
- to assess your health needs
- to provide health care
- to advise you of treatment options
- to enable us to contact you
- to establish and maintain communication with you
- to offer and provide treatment, care and services in relationship to the oral and maxillofacial complex and dental care generally
- to communicate with other treating health-care providers, including specialists and general dentists who are the referring dentists and/or peripheral dentists
- to allow us to maintain communication and contact with you to distribute health-care information and to book and confirm appointments
- to allow us to efficiently follow-up for treatment, care and billing
- for teaching and demonstrating purposes on an anonymous basis
- to complete and submit dental claims for third party adjudication and payment
- to comply with legal and regulatory requirements, including the delivery of patients' charts and records to the Royal College of Dental Surgeons of Ontario in a timely fashion, when required, according to the provisions of the *Regulated Health Professions Act*
- to comply with agreements/undertakings entered into voluntarily and monitoring purposes
- to permit potential purchasers, practice brokers or advisors to evaluate the dental practice
- to allow potential purchasers, practice brokers, or advisors to conduct an audit in preparation for a practice sale
- to deliver your charts and records to the dentist's insurance carrier to enable the insurance company to assess liability and quantify damages, if any
- to prepare materials for Health Professions Appeal and Review Board (HPARB)
- to invoice for goods and services
- to process credit card payments
- to collect unpaid accounts
- to assist this office to comply with all regulatory requirements

-to comply generally with the law

By signing the consent section of this Patient Consent Form you have agreed that you have given your informed consent to the collection, use and/or disclosure of your personal information, we will seek your approval in advance.

Your information may be accessed by regulatory authorities under the terms of the *Regulated Health Professions Act (RHPA)* for the purposes of the Royal College of Dental Surgeons of Ontario fulfilling its mandate under the RHPA, and for the defense of a legal issue.

Our office will not under and conditions supply your insurer with your confidential medical history. In the event this kind of a request is made, we will forward the information directly to you for review, and for your specific consent.

When unusual requests are received, we will contact you for permission to release such information. We may also advise you if such a release is inappropriate.

You may withdraw your consent for use or disclosure of your personal information, and we will explain the ramifications of that decision, and the process.

### **Patient Consent**

I have reviewed the above information that explains how your office will use my personal information, and the steps your office is taking to protect my information.

I know that your office has a Privacy Code, and I can ask to see the code at any time.

I agree that \_\_\_\_\_ can collect, use and disclose personal information about \_\_\_\_\_ as set out above in the information about the office's privacy policies.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness