# Ontario Health Teams and Client Information Sharing

**Leadership Considerations** 





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# **Land Acknowledgement**



## Not Legal Advice...



The content of this presentation should not be considered a legal opinion. It is based on extensive research of publically available materials. If you need a legal advice, please refer to your legal counsel.

This is a presentation on industry's best practices which may differ from the ones of your own organization. If that is the case, please consult your employer before changing your existing practices.



#### How much does privacy concern your organization as an OHT partner?

- Not at all
- Somewhat
- We have concerns
- Something we discuss often
- It keeps us/me up at night











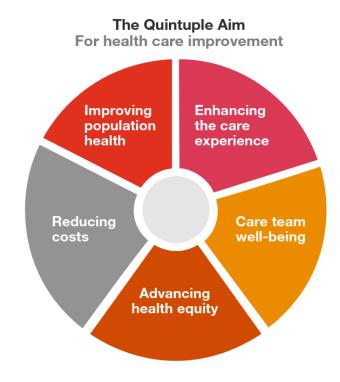


#### **How Did We Get Here?**

Improve coordination of services by communicating and sharing client information

#### Quintuple Aim Objectives:

- Improved client experience;
- Improved provider/team work life experience;
- Improved value, reducing the per capita cost;
- Improved patient and population health outcomes; and
- Equity lens







#### **PHIPA - Current State**

"PHIPA does not directly address the type of information sharing that is necessary to realize a fully integrated model of health care delivery by OHTs"

Current challenge: OHT participants include both HICs & non-HICs

Issue of consent (Implied, Express, and Assumed Implied)

- Sharing between HICs
- Sharing between HIC and non-HICs





# Current State vs. Future State

Function	Health Information Custodian	Ontario Health Teams
Governance, Policy and Procedures, Manuals	Internal committee	<ul> <li>Compliance with Provincial policies</li> <li>Governance framework and privacy/security committee</li> <li>Risk Tolerance</li> <li>Strategy</li> <li>Shared policies</li> </ul>
Oversight and Monitoring	<ul> <li>Employee signs organizational confidentiality agreement</li> <li>Ensure notices are visible</li> <li>Compliance reviews, accreditation, privacy impact assessments</li> </ul>	<ul> <li>Risks across partners in OHT</li> <li>Increased compliance monitoring within shared systems</li> <li>Attestation processes</li> <li>Multiple end-user agreements for shared systems</li> <li>Patient rights</li> </ul>
Reporting	<ul> <li>Incident reports</li> <li>Aging of outstanding risks from PIAs</li> <li>Unresolved complaints</li> <li>Results of compliance reviews</li> </ul>	<ul> <li>Reviewing and identifying themes</li> <li>Emerging risks</li> </ul>



# Current State vs. Future State

Function	Health Information Custodian	Ontario Health Teams
Privacy Operations  Agreements	<ul> <li>Organizational incident management</li> <li>Audit review</li> <li>Access and correction requests</li> <li>Inquiries and complaints</li> <li>Consent directive management</li> <li>Notice</li> <li>Inventory of data flows</li> <li>PIAs and TRA reviews</li> <li>Data sharing agreements</li> <li>Vendors/third parties</li> </ul>	<ul> <li>Coordination of patient rights and services</li> <li>Managing inventory of data flows for shared data</li> <li>Privacy by Design in technology solutions</li> <li>Oversight of shared agreements</li> <li>Review of summary risk assessments</li> <li>Overseeing readiness assessments</li> <li>Data sharing agreements</li> <li>Participant agreements</li> </ul>
Training and Awareness	<ul> <li>Employee confidentiality agreements</li> <li>Organizational privacy training</li> <li>Some training for shared systems (e.g. ConnectingOntario)</li> <li>Awareness/notices</li> </ul>	<ul> <li>Onboarding and refresher training</li> <li>Shared system training – role based and more detailed</li> </ul>



## **PHIPA** – Future Regulations

Bill 106, Pandemic and Emergency Preparedness Act, 2022

#### The Minister may make regulations governing:

- Circumstances where OHTs can Collection/Use/Disclosure PHI
- Conditions that apply to the C/U/D of PHI by OHTs
- Security requirements, records retention, information practices and rules for access and correction for PHI
- Disclosures of PHI that may be made by a HIC or other person to OHT
- The C/U/D of PHI by persons or entities that used to be designated as OHT





### **Greater Hamilton Health Network (GHHN)**

- Incorporated entity OHT enablement?
- Wide geographic coverage?
- Has not applied for HIC status ... yet
- Multitude of players

**Primary Care** 

Home Care

Hospitals

**Emergency Medical Services** 

Addictions and Mental Health

**Community Support Services** 

**Public Health Units** 

Municipalities

**Community Housing** 





#### **Virtual Care**

Here to stay

Approved list of virtual care solutions by Ontario Health as of June/22:

- 36 video (synchronous)
- 25 secure messaging (asynchronous)

Using anything else in use?

Guidance to support innovation: 'Reasonable in the Circumstances' (eg sharing PHI via email, harm reduction approach, etc.)





#### Virtual Care (cont'd.)

Assessing patient confidence in health IT and the extent to which they have been willing to share their health information

- 94% of patients expressed interest in accessing their PHI on a portal
- 87% of patients unwilling to share their full medical histories with their providers
- 84% said level of trust in their provider was influenced by how they used technology

Black Book survey of 12,000 patients (2020)



## **Digital Equity and OHTs**

- Considerations for DE in OHT context
- Virtual care and DE
- Digital inequity creates another barrier
- No one gets left behind









- Privacy and Security two sides of the same coin
- Maturity of organizations on cyber security only as strong as the weakest link
- Assessing you organization's posture
- Cyber Insurance Resiliency as a collective
- "Governance and Cyber Risk considerations" webinar recording available here





- Risk is always present
  - e.g. reputational (privacy/security), funder and partner risks
- Accountability and transparency
- Organization's privacy program and level of maturity quantify and plan for enhancement
- Demonstrability showing stakeholders you have a reliable compliance program
  - ISO 27001, CoBIT, CIS, CISA, NIST; frameworks that generate quantifiable/reproducible evidence





#### What Boards Need to Know (cont'd.)

- Regulation changes to PHIPA necessitate updates to organization's policies
- OHTs need to assess their existing health privacy practices to ensure alignment
- Who coordinates privacy, compliance, policy development, training, etc. in your OHT?
- Help and resources are available, just ask.

Remember, you are not alone in this!





- Health care is in transition Rome wasn't built in a day
- Privacy is (almost) never black and white
- Theory and Practice two very different things
- Reasonable Person Test
- Help and resources are available, just reach out



# Questions & Answers (maybe...)



"I had a miraculous dream in which our list of questions all had answers."



Chank you

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