

	TITLE OF THE POLICY: RESPONDING TO REQUEST FOR CORRECTION OF PERSONAL/ PERSONAL HEALTH INFORMATION	Policy Number: IPR-0005
	Policy Tool: Policy	Policy Level: Level I
	Accountability: Information, Privacy and Regulatory Oversight	Page 1 of 12

Approval Date	<i>July 8, 2021</i>
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Approved by	<i>Andree Robichaud, CEO</i>
Approver Signature	
Scheduled Review Date	<i>July 2024</i>
Cross- Reference	<i>2-100 Responding to Request for Correction of Personal Health Information</i>

PURPOSE

The purpose of this policy is to provide a common and consistent approach to responding to client requests for correction of personal health information under the *Personal Health Information Act*.

The purpose of this policy is to provide a common and consistent approach to responding to individual requests for correction of personal information under the *Access to Information and Protection of Privacy Act, 2015*.

SCOPE

The policy applies to all client requests for correction of personal health information. This policy applies to all health care professionals/providers concerning correction of clinical documentation contained on a client's medical record, in any form.

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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 Central Health reasonably expects that the notation will not have an impact on the ongoing provision of health care.
Client	A person who avails of the services of an authority, and includes a client, patient and/or resident.
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.
Health Care Professional	<p>A person, including a corporation, that is licensed or registered to provide health care by a body authorized to regulate a health care professional under one of the following enumerated Acts but does not include an employee of a health care professional when acting in the course of his or her employment:</p> <ul style="list-style-type: none"> • Chiropractors Act, • Dental Act, • Denturists Act, 2005, • Dieticians Act, • Dispensing Opticians Act, 2005, • Hearing Aid Practitioners Act, • Licensed Practical Nurses Act, 2005, • Massage Therapy Act, 2005, • Medical Act, 2005, • Occupational Therapists Act, 2005,

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	<ul style="list-style-type: none"> • Optometry Act, 2012, • Pharmacy Act, 2012, • Physiotherapy Act, 2006, • Psychologists Act, 2005, • Registered Nurses Act, and • Social Workers Association Act. <p>The following health professions are subject to the <i>Health Professions Act</i>:</p> <ul style="list-style-type: none"> • Acupuncturists • Audiologists • Dental Hygienists • Medical Laboratory Technologists • Medical Imaging Technologists • Midwives • Respiratory Therapists • Speech Language Pathologists
Health Care Provider	A person, other than a health care professional, who is paid by MCP, another insurer or person, whether directly or indirectly or in whole or in part, to provide health care services to an individual.
Personal Health Information	Identifying information in oral or recorded form about an individual that relates to: <ul style="list-style-type: none"> • 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;

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	<ul style="list-style-type: none"> • 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 for a health care program or service; • a drug as defined in the <i>Pharmacy Act</i>, 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 <i>Personal Health Information Act</i>.
Personal Information	Recorded information about an identifiable individual including: <ul style="list-style-type: none"> (i) the individuals name, address, or telephone number; (ii) the individual’s race, national or ethnic origin, color, or religious or political beliefs or associations; (iii) the individual’s age, sex, sexual orientation, marital status or family status; (iv) an identifying number, symbol or other particular assigned to the individual; (v) the individual’s fingerprints, blood type or inheritable characteristics; (vi) information about the individual’s health care status or history, including a physical or mental disability; (vii) information about the individual’s educational, financial, criminal, or employment status or history; (viii) the opinions of a person about the individual;

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	<p>and</p> <p>(i) the individual's personal views or opinions.</p>
Public Body	<p>Means:</p> <p>(i) a department created under the Executive Council Act or a branch of the executive government of the province,</p> <p>(ii) a corporation, the ownership of which, or a majority of shares of which, is vested in the Crown,</p> <p>(iii) a corporation, commission, board or other body, the majority of the members of which, or the majority of members of the board of directors of which, are appointed under an Act of the province, the Lieutenant-Governor in Council or a minister of the Crown,</p> <p>(iv) a court established under an Act of the province, and</p> <p>(v) the House of Assembly and committees of the House of Assembly.</p>
Record	<p>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.</p>
Representative	<p>A right or power of an individual may be exercised:</p> <p>(a) by a person with written authorization from the individual to act on the individual's behalf;</p> <p>(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 <i>Advance Health Care Directives Act</i>, 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;</p> <p>(c) by a court appointed guardian of a mentally disabled person,</p>

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	<p>where the exercise of the right or power relates to the powers and duties of the guardian;</p> <p>(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;</p> <p>(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 <i>Advance Health Care Directives Act</i>;</p> <p>(f) where the adult is declared in need of protective intervention within the meaning of the <i>Adult Protection Act</i> and is supervised by the Regional Director, or is in the care and custody of the Provincial Director; or</p> <p>(g) where an individual has been certified as an involuntary patient under the <i>Mental Health Care and Treatment Act</i>, by a representative as defined in that Act, except as otherwise provided in this Act.</p>
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POLICY STATEMENT(S)

Where an individual has access to a record containing their personal or personal health information, and where the individual believes that the record is inaccurate or incomplete, the individual may request correction to their information.

Requests for Correction of Personal Health Information

Central Health is required to respond to the correction or amendment request from the individual without delay and within thirty (30) days of receiving the request. An extension of thirty (30) days is available when the request meets the

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following criteria and the designate has informed the individual in writing of the reasons for the needed extension:

- Meeting the thirty (30) daytime 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.

Central Health may grant or refuse the individual's request for correction as soon as possible and in any event not later than the expiration of the time limit as extended.

Central Health must grant the request for correction where the individual making the request demonstrates to the satisfaction of the designate that the record is incomplete or inaccurate for the purposes for which Central Health uses the information, and provides the information necessary to enable the correction of the record.

Central Health may refuse to grant the request for in the following situations:

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

Where Central Health fails to respond to a request for correction within the thirty (30) or sixty day time period, Central health will be considered to have refused the request for correction and the individual requesting correction may appeal

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that refusal to the Trial Division or request a review of the refusal by the Information and Privacy Commissioner.

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

- Striking out the incorrect information in a manner that does not obliterate the record; or
- Where it is not possible to strike out the incorrect information, label the information as incorrect, sever the incorrect information from the record, store the incorrect information separately from the record, and maintain a link in the record that enables a person to trace the incorrect information; or
- Where it is not possible to record the correct information in the record, by ensuring that there is a practical system 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 a correction is granted, Central Health must provide written notice to the individual who made the request for correction of the specific action taken.

Central Health must provide written notice of the requested correction, to the extent reasonably possible, to a person to whom Central Health has disclosed the information within the 12 month period immediately preceding the request for correction, unless:

- Central Health reasonably believes that the correction or amendment will not have an impact on the ongoing provision of health care or other benefits to the individual; or
- Where the individual requesting the correction or amendment has advised that notice is not necessary.

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Where a request for correction of personal health information is refused, Central Health 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 12 month period immediately preceding the request for correction of the notation, unless Central Health reasonably expects that the notation will not have an impact on the ongoing provision of health care or other benefits to the individual or the individual requesting the correction has advised that notice is not necessary; and
- Provide the individual requesting the correction with a written notice setting out the correction that Central Health has refused to make, the refusal together with reasons for the refusal, and the right of the individual to appeal the refusal to the Trial Division or request a review of the refusal by the Information and Privacy Commissioner.

A request for correction to personal health information must be in writing unless the individual making the request:

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

All requests for correction to personal health information must be entered as an Occurrence Report as per the [Occurrence Reporting Policy](#).

PROCEDURE

Requests for Correction of Personal Health Information

1. Requests for correction to personal health information must be submitted in writing by the client or authorized representative.

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2. The request must be date stamped by the recipient of the request, at the specific site.
3. Requests for correction of personal health information must be submitted to the Central Health Privacy Office and must contain the following information:
 - client'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.
4. The Central Health Privacy Office will forward a standard letter of acknowledgement to the client or authorized representative, advising that the request for correction of personal health information was received and will be responded to within the legislated timeframe of 30 days from date of receipt.
5. The Privacy Manager must review the request for correction in consultation with relevant service providers, as appropriate, depending on the nature of the request to ensure the integrity of the record and requested corrections.
6. When the request is granted, the Privacy Manager will consult other appropriate departments to determine the process to correction information.
7. In the event the request cannot be responded to within the standard 30-day timeframe, the Privacy Manager will forward, in writing, a notification of an extension and the reasons thereof to the requestor.

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8. An extension is only possible where meeting the 30-day time limit would unreasonably interfere with the operations of Central Health or the information which is subject to the correction is located in numerous records and cannot be completed within the time limit.
9. The client or authorized representative will be provided a written notice of the outcome of the request, whether approved or denied, as soon as possible and no later than 30 days or a maximum of 60 days from the date of the request, where the request is extended.
10. Where the request for correction has been refused, the requestor has to be informed in writing of the refusal, the reasons for the refusal and the individual's right to request a review of the refusal by the Information and Privacy Commissioner.
11. Where correction was granted, Central Health must provide written notice of the requested correction, to the extent reasonably possible, to a person to whom Central Health has disclosed the information within the 12-month period immediately preceding the request for correction, unless: Central Health reasonably believes that the correction or amendment will not have an impact on the ongoing provision of health care or other benefits to the individual; or where the individual requesting the correction or amendment has advised that notice is not necessary.
12. 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 record.

Requests for Correction of Personal Information

An individual may request a correction of personal information by making a request to the public body, such as Central Health, to which the person believes has custody or control of the record of personal information.

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A request shall:

- Be written using the [standard form](#);
- provide sufficient details about the information requested so that an employee familiar with the records of the public body, such as Central Health, can identify and locate the record containing the information with reasonable efforts; and
- indicate how and in what form the applicant would prefer to access the record.
- An individual may make an oral request for correction of personal information where the applicant:
 - has a limited ability to read or write English; or
 - has a disability or condition that impairs his or her ability to make a request.

REFERENCES

Newfoundland and Labrador Personal Health Information Act, Provincial Policy Manual Version 1.2, February 2011. Retrieved from <https://www.gov.nl.ca/hcs/files/phia-phia-policy-development-manual-feb-2011.pdf>

Personal Health Information Act, Statutes of Newfoundland and Labrador (2008, c. P-7.01). Retrieved from the House of Assembly Newfoundland and Labrador website: <http://assembly.nl.ca/legislation/sr/statutes/p07-01.htm>

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