

# UNIVERSITY OF MANITOBA POLICY

Policy:	ACCESS AND PRIVACY
Effective Date:	June 23, 2015
Revised Date:	
Review Date:	June 23, 2025
Approving Body:	Board of Governors
Authority:	The Freedom of Information and Protection of Privacy Act (FIPPA) and The Personal Health Information Act (PHIA)
Responsible Executive Officer:	President
Delegate:	Vice-President (Administration)
Contact:	Access and Privacy Officer
Application:	All Employees, All External Parties, Students

### Part I Reason for Policy

1.1 The reason for the Policy is to ensure the University of Manitoba meets its obligations under *The Freedom of Information and Protection of Privacy Act* (FIPPA) and *The Personal Health Information Act* (PHIA).

## Part II Policy Content

- 2.1 The following terms have the following defined meanings for the purpose of this Policy:
  - (a) Access to Information means the viewing or copying of a Record held in the custody or under the control of a public body or trustee.
  - (b) **Disclosure** of Personal Information and Personal Health Information means making the information known, revealing, exposing, showing, providing, selling or sharing the information with any person or entity outside of the University. FIPPA and PHIA permit disclosures of Personal Information and Personal Health Information for authorized purposes only and within limitations.

- (c) **Personal Health Information** is Recorded Information about an identifiable individual that relates to:
  - (i) the individual's health, or health care history, including genetic information about the individual,
  - (ii) the provision of health care to the individual, or
  - (iii) payment for health care provided to the individual, and includes
  - (iv) the Personal Health Information Number ("PHIN") and any other identifying number, symbol or particular assigned to an individual, and
  - any identifying information about the individual that is collected in the course of, and is incidental to, the provision of health care or payment for health care;
  - (vi) any identifying personal information collected in the course of, and is incidental to the provision of healthcare or payment for health care
- (d) **Personal Information** means Recorded Information about an identifiable individual, including:
  - (i) the individual's name,
  - (ii) the individual's home address, or home telephone, facsimile or email number,
  - (iii) information about the individual's age, sex, sexual orientation, marital or family status,
  - (iv) information about the individual's ancestry, race, colour, nationality, or national or ethnic origin,
  - (v) information about the individual's religion or creed, or religious belief, association or activity,
  - (vi) personal health information about the individual,
  - (vii) the individual's blood type, fingerprints or other hereditary characteristics.
  - (viii) information about the individual's political belief, association or activity,
  - (ix) information about the individual's education, employment or occupation, or educational, employment or occupational history,

- (x) information about the individual's source of income or financial circumstances, activities or history,
- (xi) information about the individual's criminal history, including regulatory offences,
- (xii) the individual's own personal views or opinions, except if they are about another person,
- (xiii) the views or opinions expressed about the individual by another person, and
- (xiv) an identifying number, symbol or other particular assigned to the individual.
- (e) **Record or Recorded Information** means a Record of information in any form, including information that is written, photographed, recorded or stored in any manner, on any storage medium, or by any means, including by graphic, electronic or mechanical means, in the custody or under the control of the University of Manitoba.
- (f) Records Authority Schedule (RAS) refers to a document that identifies a series or group of records, establishes the period for which they must be retained and provides the authority for the final disposition of the records, which will result in either the destruction of the records or their transfer to the appropriate archives. Records Authority Schedules provide a high level inventory of the records held by the University of Manitoba.
- (g) **Third Party**, in relation to a request for access to a Record or for correction of Personal Information, means any person, group of persons or organization other than
  - (i) the person who made the request, or
  - (ii) a public body
- ("UM PHIA Training" or "UM PHIA Orientation") means a training session provided by the Access and Privacy Office to Persons Associated with the University who may be exposed to Personal Health Information in the custody or under the control of the University. The training session outlines both the University's and the individual's roles and responsibilities governed by University policies and procedures regarding the security and protection of privacy of Personal Health Information held in University Offices and University Health Care Units. A University of Manitoba Personal Health Information Confidentiality Pledge is signed at the conclusion of the UM PHIA Training.

- (i) University of Manitoba Personal Health Information Pledge of Confidentiality ("UM Confidentiality Pledge" or "UM Pledge of Confidentiality") means an agreement that is signed by Persons Associated with the University who may be exposed to Personal Health Information in the custody or under the control of the University, that acknowledges that the signee is bound to the security and protection of privacy of the Personal Health Information held in University Offices and University Health Care Units. A UM PHIA Orientation is required prior to the signing of the UM Confidentiality Pledge.
- (j) **Use** of Personal Information and Personal Health Information means accessing, viewing, gaining entry to, hearing, receiving, reproducing, transmitting, employing or otherwise dealing with the information within the University (e.g. between University Offices or employees of the University). Use of Personal Information and Personal Health Information must be for an authorized purpose of the University.
- 2.2 The University of Manitoba is committed to the principles of Access to Information and the protection of privacy outlined in *The Freedom of Information and Protection of Privacy Act* (FIPPA) and *The Personal Health Information Act* (PHIA).
- 2.3 The University supports the public's right of access to general information held by the University, and the right for individuals to access, or request a correction to, their own Personal Information and Personal Health Information held by the University. The University is committed to the protection of all Personal Information and Personal Health Information collected and held by the University, and will submit to independent reviews of the University under the Acts.
- 2.4 FIPPA and PHIA apply to all Records in the custody or under the control of the University, but does not include teaching materials or research information of University staff/faculty, or to a question that is to be used on an examination or test.
- 2.5 Should any of the University's policies conflict with FIPPA or PHIA, the provisions of FIPPA or PHIA shall prevail unless otherwise expressly provided for at law.

#### 2.6 Access to Information

- (a) The University will assist individuals in obtaining Access to Information in the custody or under the control of the University, including Records containing their own Personal Information and Personal Health Information, according to Section 7(1) of FIPPA and Section 5(1) of PHIA.
- (b) The University will develop and follow Procedures to ensure timely and appropriate responses to formal requests for Access to Information.

- (c) The University may provide access to routine information upon informal request and/or actively disseminate information using existing procedures.
- (d) The right of access does not extend to information that may be considered exempt from Disclosure under Sections 17 to 32 of FIPPA and Section 11 of PHIA. If such information can reasonably be severed from a Record, then the applicant has the right of access to the remainder of the Record.
- (e) The right of access to a Record may be subject to the payment of a fee as required under Sections 4 to 9 and 82 of the Access and Privacy Regulation under FIPPA, and Section 10 of PHIA.

#### 2.7 Protection of Privacy

- (a) Collection: The University will only collect Personal Information and Personal Health Information as provided for under Sections 36 and 37 of FIPPA and Sections 13 to 15 of PHIA. The collection of Personal Information and Personal Health Information will be limited to the minimum amount of information required for an authorized purpose under *The University of Manitoba Act* or other federal or provincial Act or Regulation.
- (b) Accuracy of Information: The University will make every reasonable effort to ensure that the Personal Information and Personal Health Information it uses and maintains is accurate and complete. Upon request by an individual to whom the information relates, the University may correct or annotate the information when documented evidence, satisfactory to the University, is provided to substantiate the correction or annotation. In the case of a dispute, the University will include evidence of the dispute on the Record.
- (c) Protection: The University will protect the Personal Information and Personal Health Information it collects and maintains by making reasonable security arrangements to prevent the risk of unauthorized collection, access, Use, Disclosure or disposal of Personal Information and Personal Health Information. The University will make available UM PHIA Orientation to all individuals who will have access to Personal Health Information as part of their duties or association with the University. All individuals who have access to Personal Health Information as part of their duties or association with the University must sign a University of Manitoba Personal Health Information Confidentiality Pledge.
- (d) Use and Disclosure: The University will use Personal Information and Personal Health Information only for the purpose for which that information was obtained, for a use consistent with that purpose, or with the consent of the individual. The University will not disclose Personal Information and Personal Health Information to any Third Party, unless it is otherwise provided for under Sections 44 to 48 of FIPPA and Section 22 of PHIA.

(e) Retention and Disposition: The retention and disposal of University Records will be managed through Records Authority Schedules.

### Part III Accountability

- 3.1 The Office of Legal Counsel is responsible for advising the President that a formal review of this Policy is required.
- 3.2 The Chief Access and Privacy Officer is responsible for the communication, administration and interpretation of this Policy.
- 3.3 All supervisors and employees are responsible for complying with this Policy.

### Part IV Authority to Approve Procedures

- 4.1 The Vice-President (Administration) may approve Procedures which are secondary to and support and comply with this Policy.
- 4.2 The Procedures approved under this Policy may include, but are not limited to, provisions relating to:
  - (a) The responsibility and accountability of supervisory staff for managing the collection, Use, Disclosure, retention and disposition of Personal Information and Personal Health Information.
  - (b) The processes regarding Access to Information applications, requests for the correction of Personal Information and Personal Health Information, and for investigating Breaches of Privacy.
  - (c) The supporting role and mandate of the Access and Privacy Office.

### Part V Review

- 5.1 Governing Document reviews shall be conducted every ten (10) years by the Vice-President (Administration). The next scheduled review date for this Policy is June 23, 2025.
- 5.2 In the interim, this Policy may be revised or repealed if:
  - (i) the Approving Body deems it necessary or desirable to do so;
  - (ii) the Policy is no longer legislatively or statutorily compliant; and/or

- (iii) the Policy is now in conflict with another Governing Document.
- 5.3 If this Policy is revised or repealed all Secondary Documents, if applicable, shall be reviewed as soon as possible in order that they:
  - (a) comply with the revised Policy; or
  - (b) are in turn repealed.

#### Part VI Effect on Previous Statements

- 6.1 This Policy supersedes all of the following:
  - (a) all previous Board of Governors/Senate Governing Documents on the subject matter contained herein; and
  - (b) all previous Administration Governing Documents on the subject matter contained herein.

### Part VII Cross References

- 7.1 This Policy should be cross referenced to the following relevant Governing Documents, legislation and/or forms:
  - (a) Access and Privacy Procedures
  - (b) PHIA Training and Pledge of Confidentiality Procedure
  - (c) Records Management Policy
  - (d) The Freedom of Information and Protection of Privacy Act
  - (e) The Personal Health Information Act