



# Manitoba Centre for Health Policy

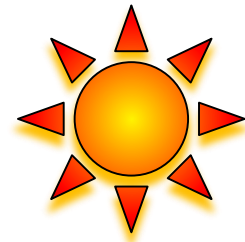
## Accreditation 2020

# Privacy, Security and Confidentiality



# Modules

- [Introduction to MCHP](#) History, operations, resources and products of MCHP
- [Data Repository and Research Resources](#) Databases housed in the Data Repository and Research Tools for using and analyzing the data: Research Protocol, Glossary, and Concept Dictionary
- [Administrative Requirements and Research Support](#) Services and Assistance provided
- [Privacy, Security and Confidentiality](#) Access, use, and disclosure of MCHP data, i.e., the legal requirements, basically obligations and how to meet them
- [Project Costs and Timelines](#)



MCHP Accreditation Home

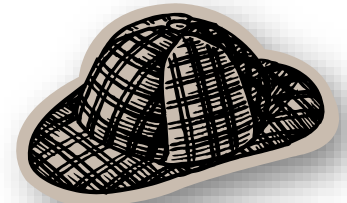
# De-Identified Data

- Data at MCHP is de-identified.
  - You will not find any specific identifiers, e.g. name; full address; phone; SIN; real PHIN
  - Users will not attempt to identify individuals (themselves or others) within the data for any reason.
- Some other group/individual fields are modified.
  - Limits accidental identification of individuals



# PHIA Requirements - MCHP

- MCHP is a Research Organization under PHIA (Personal Health Information Act) Section 24.
  - 24(1) Disclosure
  - 24(2) Purposes
    - (a) analyzing the health status of the population;
    - (b) identifying and describing patterns of illness;
    - (c) describing and analyzing how health services are used;
    - (d) analyzing the availability and adequacy of human resources required to provide health services;
    - (e) measuring health system performance;
    - (f) health system planning.



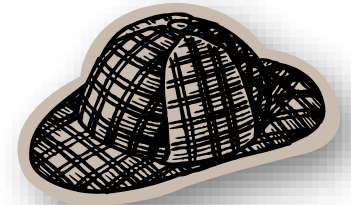
PHIA Legislation

# PHIA Requirements - Researchers

- 24(1)(2) Approvals for Disclosure – HIPC, HREB
  - Researcher (disclosure for use)
- 24(3) Conditions
  - Importance, Need to identify
  - Safeguards, de-identify, destruction
- 24(4) Agreement
  - Researcher Agreement, Pledge of Confidentiality, Not to publish individual level data, Limited purposes, Destruction
- 24(3), (5) Consent
  - Unreasonable or impractical to obtain & no individual contact, Direct contact requires consent from the individuals



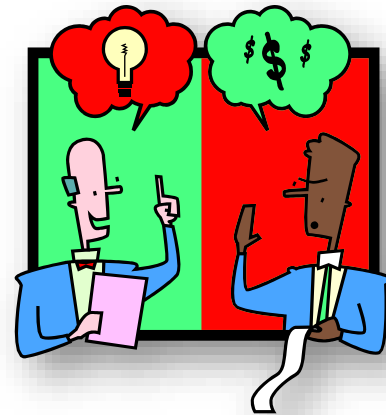
U of M: Access  
and Privacy Home



PHIA Legislation

# Approvals

- MCHP Review
- Health Information Privacy Committee (HIPC)
- U of M Rady Faculty of Health Sciences Health Research Ethics board (HREB). Must be submitted by a Researcher associated with U of M or WRHA.
- Other data providers (WRHA, Dept. of Families, Manitoba Justice, FNHSSM, etc...) where necessary
- Researcher Agreement (signed by PI delegated responsible for research team)
- MCHP Accreditation
- Student (MSc, PhD must be submitted with identified Advisor)



# Limited Access & Use

- Access to the data is limited to those who require access AND have appropriate approvals and permissions
- System access is limited to identified and accredited individuals
- Use of the data is limited to approved purposes
- Provided project space (directories/libraries) must be used
- Accreditation must be attended, and validated annually

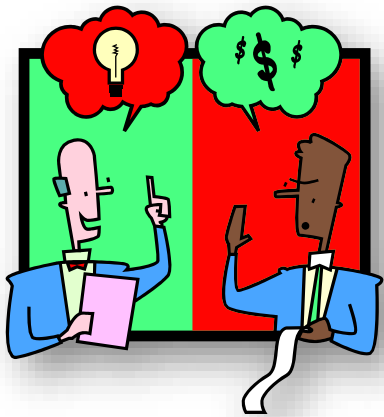


Policies on Use and Disclosure



# Limited Release

- Data cells representing 1-5 individuals or events must be suppressed
- Copy of publication or presentations must be sent to data providers and MCHP a minimum of 30 days prior to release
- Vetting and transfer of aggregated data and results for external researchers/analysts



Vetting Requests - Windows Internet Explorer provided by MCHP Ilet

http://raa-portal1.mchp-raa.local/vetting\_layouts/FormServer.aspx?srsl=

Google

Vetting Requests

### MCHP Vetting Request

Request ID: 2009-07-07T10:58:19-charlesb Date: Tuesday, July 07, 2009

a. Completed analysis as SAS list files or formatted output (e.g. ODS output) can be requested for use outside of MCHP facilities. This output must be reviewed prior to transferring outside of the system to confirm that it fits within the scope of the approved project and that there is no data that represents small numbers of (1-5) individuals or events.

b. Complete the following form to identify the output file to be transferred. Include the source of the file (program that generated the file) and the associated project along with a brief description of the content. This helps with the review process if there are items that are not clear.

c. The file will be reviewed and transferred to the RAA vetting site (RAA office users) or MCHP project folder (MCHP office users) where it can be retrieved. You will receive an email at the address provided with the location of the output. If there were concerns with the output you will be notified so the files can be updated or modified and the request resubmitted.

d. Although we will endeavour to review and post the files within a few regular working hours it may take as much as a day for processing.

**Contact Information**

Requested By: charlesb Location (RAA or MCHP Office): RAA Office

Phone Number: E-mail Address:

**Data to be vetted**

Project Short Name: Data to transfer by name/location:

HIPC (if available): Short description of data contents:

REB (if available): Program name(s) that created the requested download:

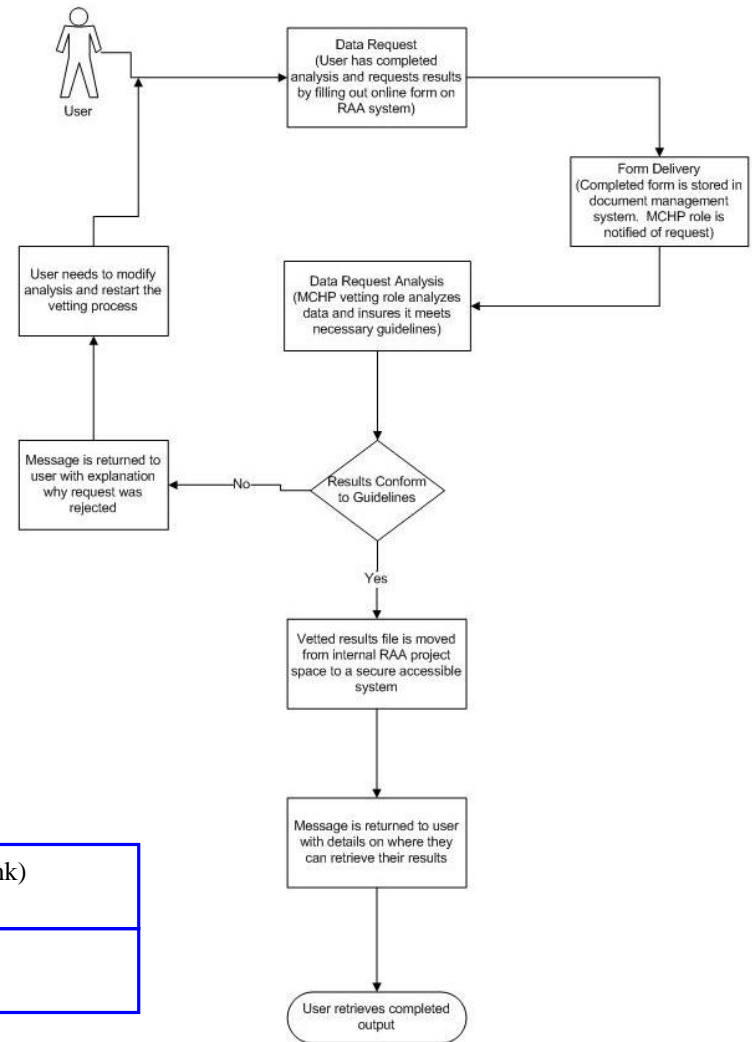
MCHP (if available):

**Notes (optional)**

Please click the 'Submit' when you have completed the form.

Submit

# Remote Access Vetting Process

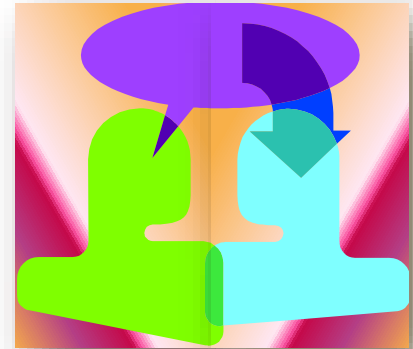


**MCHP Request File Vetting** – Request file to be vetted for transfer out of MCHP (Internal MCHP Link)  
<https://vetting.cpe.umanitoba.ca/>

**MCHP Data Vetting Pickup** – Pick up vetted output (External Link – RSA Token Required)  
<https://vetting.cpe.umanitoba.ca>

# Additional Data

- Must be facilitated through MCHP data acquisition team
- Approvals
  - ◊ Data sharing agreement
  - ◊ Informed consent
- Process of transfer
  - ◊ Blind process
  - ◊ No specific identifiers
  - ◊ No release of 'value added' data
- Limited Access (Project only)
- PI is responsible for costs and approvals
- Results from project specific sources follow the same release requirements (small cell suppression) even if consent is provided.



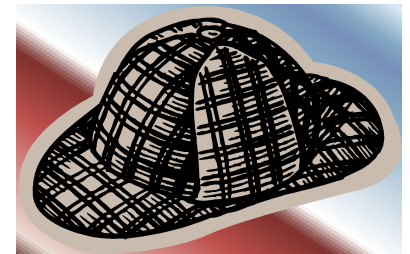
# MCHP: Audits and Reviews

- Ensure compliance and protection
  - ◊ Approvals (U of M, MHSAL, others....) ongoing
  - ◊ Data access
  - ◊ System access
  - ◊ Publication review
  - ◊ Forms (RA, Confidential Data)



# U of M Pledge of Confidentiality

- Required for everyone with access to Personal Health Information, MCHP staff, project PI, and individuals with MCHP system access.
- Required to be completed for HREB submission
- Completion of the U of M MCHP Associated PHIA Orientation material and corresponding Pledge of Confidentiality is required
- U of M PHIA & Pledge of Confidentiality must be completed even if PHIA orientation has been completed with a different organization (e.g. WRHA, Province of Manitoba).



U of M PHIA Training Page

# *Thank You / Questions*

- [umanitoba.ca/centres/mchp](http://umanitoba.ca/centres/mchp)
- [facebook.com/mchp.umanitoba](https://facebook.com/mchp.umanitoba)
- [twitter.com/um\\_mchp](https://twitter.com/um_mchp)  
(@um\_mchp)