

# **Privacy-Related Roles and Responsibilities For The Protection of Personal Information and Personal Health Information**

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## Explanatory Notes

The following table shows the respective roles and responsibilities within eHealth Ontario (or “the Agency”) as they pertain to the protection of personal information and personal health information in the custody of the Agency.

This document has been developed in response to the Information and Privacy Commissioner’s March 2007 review of eHealth Ontario, specifically Recommendation No. 3 that eHealth Ontario “establish clearly defined roles and responsibilities for privacy and security matters”. Security-related roles and responsibilities are found in the Agency’s Information Security Operating Directive. It is also a component of the Agency’s response to Recommendation No. 80 that requires eHealth Ontario to “foster a culture of privacy throughout the organization, to help ensure that privacy is woven into all day-to-day operations.”

The description of roles and responsibilities in this document represent a compilation of information, drawn from a number of sources. These sources include the 2003 Memorandum of Understanding between eHealth Ontario and the Ministry of Health and Long-term Care, eHealth Ontario’s Privacy and Data Protection Policy and subordinate privacy policies, eHealth Ontario’s Privacy and Security Standard of Conduct and eHealth Ontario’s Freedom of Information and Protection of Privacy Act Delegation of Authority.

These roles and responsibilities may change in the future to the extent that the Agency’s mandate, operational activities and policies evolve and mature.

The privacy roles and responsibilities described in this document are organized by Division within the Agency but also include specific reference to responsibilities that relate to the Board of Directors, the Chief Executive Officer of the Agency and individual Vice-Presidents, directors, managers, employees and contractors. Privacy-related roles and responsibilities are also identified for major eHealth solutions transferred to the Agency.

Any questions concerning these roles and responsibilities may be directed to the Vice-President, Privacy and Security, eHealth Ontario.

Division	Privacy Responsibility	Type of data in custody (PI/PHI)
Board of Directors	<ul style="list-style-type: none"> <li>• The Board of Directors is accountable for protecting the privacy of personal information and personal health information, and for safeguarding sensitive information assets and critical information systems under the control of eHealth Ontario.</li> <li>• The Board of Directors delegates its authority to the Chief Executive Officer to implement measures to protect the privacy of personal information and personal health information and to safeguard sensitive information assets and critical information systems under the control of eHealth Ontario.</li> <li>• The Audit and Risk Committee of the Board provides guidance and oversight for the Privacy program.</li> <li>• The Audit and Risk Committee of the Board commissions periodic internal audits of the Privacy program.</li> <li>• The Risk Management Committee reviews Privacy risks as required and as part of fulfilling its mandate to ensure that risks are effectively managed within eHealth Ontario.</li> </ul>	N/A

Division	Privacy Responsibility	Type of data in custody (PI/PHI)
Chief Executive Officer	<ul style="list-style-type: none"> <li>The Chief Executive Officer delegates to the Vice President, Privacy and Security responsibility for the protection of privacy at eHealth Ontario.</li> <li>The Chief Executive Officer reviews and approves Privacy policies on the recommendation of the Vice President, Privacy and Security.</li> <li>The Chief Executive Officer is designated Head of eHealth Ontario under the Freedom of Information and Protection of Privacy Act (FIPPA), Ontario Regulation 460.</li> <li>The Chief Executive Officer delegates, with limited exceptions, the authority granted to the Head by FIPPA to the Vice President, Privacy and Security and specified others who will carry out the powers and duties of the Head.</li> </ul>	N/A
eHealth Ontario Management	<ul style="list-style-type: none"> <li>For the purposes of this document, the term “eHealth Ontario Management” means Vice Presidents, Executive Leads, Directors and Managers of all divisions of eHealth Ontario.</li> <li>eHealth Ontario Management is responsible for addressing and mitigating privacy risks identified within their areas of responsibility</li> </ul>	N/A

Division	Privacy Responsibility	Type of data in custody (PI/PHI)
<p>eHealth Ontario Management (Continued from previous page)</p>	<ul style="list-style-type: none"> <li>• eHealth Ontario Management is responsible for ensuring compliance with the eHealth Ontario Privacy and Data Protection Policy within their areas of responsibility.</li> <li>• eHealth Ontario Management is responsible for ensuring compliance with the eHealth Ontario Privacy and Security Standard of Conduct within their areas of responsibility.</li> <li>• eHealth Ontario Management is responsible for ensuring that the individuals who have access to sensitive or personal information receive privacy training appropriate to their role.</li> <li>• eHealth Ontario Management is responsible for the provision of support to the CEO, as Head of the Institution, or his delegate (the FIPPA Coordinator) for purposes of responding to a FIPPA request.</li> <li>• eHealth Ontario Management is responsible for the provision of support to the Vice President, Privacy and Security, or his delegate for purposes of privacy</li> </ul>	

Division	Privacy Responsibility	Type of data in custody (PI/PHI)
eHealth Ontario Management (Continued from previous page)	<ul style="list-style-type: none"> <li>See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	
eHealth Ontario Employees, Contract Staff and Consultants	<ul style="list-style-type: none"> <li>Employees, contract staff and consultants are required to review and sign the eHealth Ontario Privacy and Security Standard of Conduct (SoC) and to incorporate the principles of the SoC into their daily activities at the Agency.</li> <li>Employees, contract staff and consultants are required to complete basic privacy and security training within 30 days of starting work at eHealth Ontario.</li> <li>Employees, contract staff and consultants are required to refresh their privacy and security training on an annual basis.</li> <li>Employees, contract staff and consultants are required to report suspected or known privacy and security issues to the Vice President, Privacy and Security.</li> </ul>	N/A
Privacy and Security	<ul style="list-style-type: none"> <li>The Vice President, Privacy and Security is responsible for the protection of privacy at eHealth Ontario, the eHealth Ontario Privacy Program and ensuring Agency compliance with PHIPA and FIPPA.</li> </ul>	N/A

Division	Privacy Responsibility	Type of data in custody (PI/PHI)
Privacy and Security (Continued from previous page.)	<ul style="list-style-type: none"> <li>• The Vice President, Privacy and Security is responsible for the development and implementation of responses to privacy related recommendations made by oversight bodies such as the IPC.</li>   <li>• The Vice President, Privacy and Security is responsible for reviewing and approving Privacy policies or recommending their approval to the Chief Executive Officer.</li>   <li>• The Vice President, Privacy and Security is responsible for reviewing and approving Privacy and Privacy-related processes or recommending their approval to the Chief Executive Officer.</li>   <li>• The Vice President, Privacy and Security is responsible for monitoring compliance with the privacy policies throughout eHealth Ontario.</li>   <li>• The Vice President, Privacy and Security is responsible for providing support for the development and implementation of privacy architecture at eHealth Ontario.</li>   <li>• The Vice President, Privacy and Security is responsible for reviewing and approving all eHealth Ontario Privacy Impact Assessments (PIAs).</li> </ul>	

Division	Privacy Responsibility	Type of data in custody (PI/PHI)
Privacy and Security (Continued from previous page.)	<ul style="list-style-type: none"> <li>• The Vice President, Privacy and Security is responsible for eHealth Ontario's Enterprise Security and Privacy Incident Management Process.</li> <li>• The Vice President, Privacy and Security is responsible for the establishment and delivery of a privacy education and awareness program for eHealth Ontario employees, contract staff and consultants physically present on eHealth Ontario premises for any period of time of 5 or more days and who have been granted access privileges to the eHealth Ontario network.</li> <li>• The Vice President, Privacy and Security is responsible for eHealth Ontario's response to internal and external privacy audits. and Security is responsible for the provision of privacy specific content for client agreements and contracts prepared by eHealth Ontario's Legal Department.</li> </ul>	

Division	Privacy Responsibility	Type of data in custody (PI/PHI)
Privacy and Security (Continued from previous page.)	<ul style="list-style-type: none"> <li>• The Vice President, Privacy and Security is responsible for reviewing and accepting recommendations in Privacy Impact Assessments and Privacy Threshold Assessments (PIAs/PTAs).</li> <li>• The Vice President, Privacy and Security delegates responsibility for the day-to-day management of the Privacy Program, including the development of Privacy Impact Assessments, to the Director, Privacy.</li> <li>• The Director, Privacy is responsible for the day-to-day activities associated with implementing the privacy policies and program including:               <ul style="list-style-type: none"> <li>➢ the provision of privacy analysis and expertise to Agency initiatives;                   <ul style="list-style-type: none"> <li>➢ development and approval of PIAs and PTAs;</li> <li>➢ development and maintenance of privacy policies;</li> <li>➢ tracking of privacy risks and recommendations</li> </ul> </li> <li>➢ the development and provision of privacy training;</li> <li>➢ managing privacy - incidents and complaints; and</li> <li>➢ responding to</li> </ul> </li> </ul>	

	<p>oversight reviews and audits</p> <ul style="list-style-type: none"> <li>The Director of Privacy is responsible for maintaining and updating the privacy content of the Privacy and Security Standard of Conduct.</li> </ul>	
Client Relationship Management	<ul style="list-style-type: none"> <li>See eHealth Ontario Management Section for responsibilities.</li> <li>See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	N/A
IT Operations	<ul style="list-style-type: none"> <li>Vice President and managers are responsible for operating technical, physical and administrative safeguards with respect to the eHealth Ontario infrastructure.</li> <li>See eHealth Ontario Management Section for additional responsibilities.</li> <li>See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	PI and PHI

Human Resources	<ul style="list-style-type: none"> <li>• Vice President shall ensure that all new employees sign the Standard of Conduct before commencing work at eHealth Ontario.</li> <li>• Vice President shall ensure that all new employees complete the Privacy and Security training course within 30 days of starting at eHealth Ontario.</li> <li>• See eHealth Ontario Management Section for additional responsibilities.</li> <li>• See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	PI
Strategic Planning and Architecture	<ul style="list-style-type: none"> <li>• The Vice President, Strategic Planning and Architecture is responsible for the development and implementation of privacy architecture at eHealth Ontario.</li> <li>• Vice President and managers are responsible for designing technical safeguards with respect to the eHealth Ontario infrastructure.</li> <li>• See eHealth Ontario Management Section for responsibilities.</li> <li>• See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	N/A

<p>Solution Delivery and Management</p>	<ul style="list-style-type: none"> <li>• Vice President and managers are responsible for implementing technical safeguards with respect to the eHealth Ontario infrastructure.</li> <li>• See eHealth Ontario Management Section for responsibilities.</li> <li>• See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	<p>PI</p>
<p>Enterprise Project Management Office (EPMO)</p>	<ul style="list-style-type: none"> <li>• Vice President and staff project managers are responsible for engaging the Privacy Department in the early stages of all eHealth Ontario projects.</li> <li>• See eHealth Ontario Management Section for additional responsibilities.</li> <li>• See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	<p>N/A</p>
<p>Legal</p>	<ul style="list-style-type: none"> <li>• eHealth Ontario General Counsel is responsible for the provision of legal services support to the eHealth Ontario Privacy Department and its initiatives as necessary including, but not limited to, interpretation of policy and legislation and facilitation of compliance with policies and legislation.</li> <li>• eHealth Ontario General Counsel is responsible for incorporating eHealth Ontario privacy requirements, as determined in co-operation with the Privacy Department, that address client privacy responsibilities into agreements with clients</li> </ul>	<p>N/A</p>

Legal (Continued from previous page.)

prior to the deployment of eHealth Ontario products and services.

- eHealth Ontario General Counsel is responsible for incorporating eHealth Ontario privacy requirements, as determined in co-operation with the Privacy Department, that address vendor privacy responsibilities into agreements with vendors prior to the acquisition of products and services by the Agency.
- eHealth Ontario General Counsel is responsible for the provision of legal advice and legal support to the Vice President, Privacy and Security in the context of eHealth Ontario's FIPPA program and obligations including during the processing of requests for access to information and the correction of personal information.
- See eHealth Ontario Management Section for additional responsibilities.
- See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.

Office of the CFO	<ul style="list-style-type: none"> <li>• eHealth Ontario CFO, having delegated responsibility for the records management functions of FIPPA as well as general responsibility for the eHealth Ontario records management program, is responsible for the provision of operational support to the FIPPA Coordinator.</li> <li>• The Director of Procurement shall ensure that all new contractors, consultants and other vendors who work on eHealth Ontario premises for longer than 5 days and who have been granted access privileges to the eHealth Ontario network sign the Privacy and Security Standard of Conduct before commencing work at eHealth Ontario.</li> <li>• See eHealth Ontario Management Section for additional responsibilities.</li> <li>• See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	PI
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eHealth Programs Transferred to eHealth Ontario

<p>Ontario Laboratory Information System (OLIS)</p>	<ul style="list-style-type: none"> <li>• The designated individual within eHealth Ontario Privacy and Security (“Privacy Lead”) is responsible for the adoption of existing OLIS privacy policies at eHealth Ontario and for reconciling those privacy policies with existing eHealth Ontario privacy policies.</li> <li>• The Privacy Lead is responsible for ensuring compliance with the eHealth Ontario Privacy and Data Protection Policy.</li> <li>• See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li> </ul>	<p>PI/PHI</p>
<p>Client Registry</p>	<ul style="list-style-type: none"> <li>• The designated individual within eHealth Ontario Privacy and Security (“Privacy Lead”) is responsible for the management of the overall Privacy Program of the Client Registry Operations Team.</li> <li>• The Privacy Lead is responsible for conducting quarterly access audit reports to ensure no unauthorized access to PI/PHI in the Client Registry has occurred.</li> <li>• The Privacy Lead is responsible for ensuring the adoption of existing Cancer Care Ontario privacy policies at eHealth Ontario and for reconciling those privacy policies with existing eHealth Ontario privacy policies.</li> <li>• The Privacy Lead is responsible for ensuring compliance with the eHealth Ontario Privacy and Data Protection Policy.</li> </ul>	<p>PI/PHI</p>

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|  | <ul style="list-style-type: none"><li>• See eHealth Ontario Employees, Contract Staff and Consultants section for additional responsibilities.</li></ul> |  |
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