



CATHOLIC FAMILY SERVICES OF TORONTO

BOARD POLICY, GUIDELINES AND PROCEDURES PRIVACY COMPLIANCE

POLICY

IT IS THE POLICY OF CATHOLIC FAMILY SERVICES OF TORONTO TO FULLY COMPLY WITH APPROPRIATE LEGISLATION PERTAINING TO THE PROTECTION OF PERSONAL HEALTH INFORMATION THROUGH THE IMPLEMENTATION AND MAINTENANCE OF A PRIVACY COMPLIANCE PROGRAM.

STANDARD

THE PRIVACY COMPLIANCE PROGRAM SHALL ADDRESS THE REQUIREMENTS FOR POLICIES AND PRACTICES REGARDING THE COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION BY THE ORGANIZATION IN CONDUCTING ITS BUSINESS AND FOR THE HANDLING OF ANY COMPLAINTS REGARDING THE AGENCY'S PRIVACY PRACTICES.

A CHIEF PRIVACY OFFICER SHALL BE APPOINTED BY THE EXECUTIVE DIRECTOR AND SHALL BE RESPONSIBLE FOR OVERSEEING THE AGENCY'S PRIVACY COMPLIANCE PROGRAM AND ENSURING THE ORGANIZATION'S COMPLIANCE WITH ITS PRIVACY OBLIGATIONS IN ACCORDANCE WITH THE ACT.

GUIDELINES AND PROCEDURES

The Chief Privacy Officer shall be the Executive Director or designate and be responsible for:

- a. ensuring that the organization has policies and procedures which address the requirements as regulated in the Personal Information Protection and Electronics Documents Act (PIPEDA, 2004);
- b. conducting an audit at least every four years, or more often if required, of the personal information policies and practices of the organization;
- c. reviewing and analyzing the organization's policies and practices for collecting, using and disclosing personal information regarding staff, volunteers, clients, users of Family Life Education and Wellness services and donors;

- d. implementing procedures to safeguard personal information;
- e. taking appropriate action in response to any breach of privacy, in accordance with the Personal Information Protection and Electronics Documents Act (PIPEDA, 2004), as outlined in detail in the Board Policy on Secure Storage of Client Records (5.13);
- f. ensuring individuals have the right to access and correct any personal information about themselves held by the organization;
- g. implementing a retention and destruction of information policy;
- h. acting as a contact person for inquiries from the public or clients and ensuring that public access obligations are met regarding privacy (confidentiality) policies;
- i. ensuring that there is an established process of handling complaints about the organization's information practices and/or alleged violations;
- j. training the organization's staff, students on field placement and volunteers.

PRIVACY COMPLAINTS

Introduction

Catholic Family Services of Toronto understands and respects the importance of protecting an individual's privacy and is fully committed to fulfilling its responsibilities around privacy. The Agency has policies, procedures and guidelines which address all matters regarding personal information. The Agency places a high priority on effectively dealing with any privacy complaints. Our objective with privacy complaints is to achieve an effective resolution of an individual's complaint within a reasonable time frame. An easily accessible complaint procedure is available to ensure that complaints are handled fairly and appropriately in order to preserve or restore the individual's confidence in the Agency. All privacy complaints shall be treated seriously, dealt with promptly and handled in a confidential manner.

Definition of Privacy Complaint

A privacy complaint relates to any concern that a person has with the Agency's privacy practices as it relates to the individual's personal information. Privacy practices include how personal information is collected, stored, used, disclosed, retained and destroyed. Privacy practices also include how an individual's access to his/her personal information is provided.

Complaint Procedures

1. When a complaint is received a record shall be made of the date and the nature of the complaint. If not contacted directly by the complainant, the Chief Privacy Officer shall receive a copy of the complaint. The Chief Privacy Officer shall keep a record of all complaints, the steps taken, the results of the investigation, the proposed resolution, and the outcome. A file of these records will be securely stored.

2. Receipt of the complaint shall be promptly acknowledged. In the event that an anonymous complaint is received, the Agency shall note the issue, investigate and try to resolve it appropriately using the facts conveyed in the complaint.
3. The complainant shall be encouraged to discuss his/her privacy complaint with the person with whom he/she has had primary contact at the Agency, in order to attempt to resolve the issue.
4. If the privacy complaint is not resolved, or the complainant chooses not to address the issue with his/her primary contact at the Agency, or this person is not available, the matter shall be referred to the Chief Privacy Officer for investigation.
5. The Chief Privacy Officer may assign the complaint investigation to a person with the necessary skills for reviewing it fairly and impartially, and this person shall be provided with access to all relevant records, employees or others who handled the personal information or the access to personal information request.
6. If necessary, the individual who registered the complaint shall be contacted to clarify the complaint by providing further information, and to discuss options for resolution.
7. The complaint shall be investigated and the decision of the investigator shall be recorded.
8. Prompt notification shall be given to the individual of the outcome of the investigation and this information shall be communicated clearly in writing. The complainant shall be informed of any relevant steps taken, which may include correction of any inaccurate personal information or modification of policies and procedural practices based on the outcome of the complaint.
9. Agency staff shall be made aware of any resultant changes to policies and procedures in order to prevent the problem from recurring.
10. If the complainant is dissatisfied with the outcome of the investigation and the steps taken to resolve the issue, the complainant may refer the complaint, in writing, to the Executive Director who will review the complaint and the steps taken to resolve it. The Executive Director shall make a decision and the complainant shall be notified of this determination in writing.
11. If the complainant remains dissatisfied with the outcome, the complainant may refer the complaint to the Information and Privacy Commissioner of Canada.