
President's Letter

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What you need to know about the new *Personal Health Information Act*



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MD, CCFP, FCFP
President

Dear Colleagues:

The *Personal Health Information Act (PHIA)* became law on April 1, 2011. Many of you have been following the progress of the legislation over the past few years and may even have attended education sessions offered by the government and the regional health authorities. *PHIA* (feeah) puts into law some of physicians' current practices around their collection, use and disclosure of personal health information and adds some new responsibilities.

PHIA gives patients rights regarding their personal health information. They have the right to receive copies of their records and to ask for correction of information in their record. They may also contact the Information and Privacy Commissioner if they have a concern about how their information is protected or their access and correction rights are met.

This new law supports the sharing of personal health information for patient care. Within the circle of care you may rely on implied consent to share information. The circle of care includes the people participating in and activities related to the provision of health care to the patient, including necessary activities such as lab work and professional consultations.

There are two categories of physicians under *PHIA*; those who are custodians and those who are employees of a custodian. A physician who is an employee of a regional health authority, WHSCC, the Public Health Lab, the Faculty of Medicine or one of the other custodians listed in *PHIA* will follow the policies and procedures each of those organizations has developed to meet the requirements of *PHIA*.

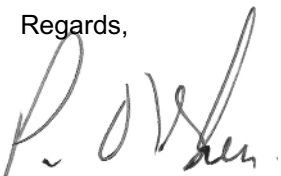
If you are a physician in private practice you are considered a custodian, and you are responsible for having written policies and procedures on how you protect personal health information in your custody or control. You can find information at about what should be included in these policies at www.health.gov.nl.ca/health/PHIA/#policy. You are also responsible for educating yourself and your staff on *PHIA*. The government has developed an online program that has been accepted as a CME credit. It can be found at <http://nlchi.lms.saiglobal.com>.

It is considered a privacy breach if personal health information you are responsible for is lost or stolen, or used; disclosed inappropriately; retained, transferred and disposed of in an insecure manner; or, is subject to unauthorized copying, modification, or disposal. If this happens to any patient information you are required to notify the patient. When the privacy breach is serious, you are also required to notify the Information and Privacy Commissioner yourself. The Information and Privacy Commissioner can advise you on when and how to notify a patient after a privacy breach.

For more information about *PHIA* see the government site at www.health.gov.nl.ca/health/PHIA/.

We all respect the privacy of our patients, *PHIA* simply asks us to take a few more steps to ensure that confidentiality.

Regards,



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President



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