

### Why do I need to do a PIA (Privacy Impact Assessment)?

Section 69(5.3) of the *Freedom of Information and Protection of Privacy Act* (FIPPA) requires the head of a public body to conduct a privacy impact assessment (PIA) in accordance with the directions of the minister responsible for FIPPA. Public bodies should contact the Information Governance Officer to determine internal policies for review and sign-off of the PIA. If you have any questions about this PIA template or FIPPA generally, please contact Adam Cullum (Information Governance Officer) at [adam.cullum@unbc.ca](mailto:adam.cullum@unbc.ca) or (250) 960-5139 or visit <http://www.unbc.ca/foipppa>.

### What if my initiative does not include personal information?

Public bodies still need to complete Part 1 of the PIA and submit it along with the signatures pages to Information Governance Officer even if it is thought that no personal information is involved. This ensures that the initiative has been accurately assessed.

## Part 1 – General

Name of Department:	National Collaborating Centre for Aboriginal Health		
PIA Drafter:	Donna Atkinson		
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Program Manager:	Donna Atkinson		
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*In the following questions, delete the descriptive text and replace it with your own.*

### 1. Description of the Initiative

*A contractor will be selected to develop and implement an evaluation of the National Collaborating Centre for Aboriginal Health (NCCAH) for each fiscal year.*

### 2. Scope of this PIA

*The contractor's services to the NCCAH.*

### 3. Related Privacy Impact Assessments

*N/A*

### 4. All Elements of Information or Data

*Interview transcriptions, opinions collected from focus groups, work plans, previous year's evaluation, logic model, PHAC performance measurement guidelines, social media analytics, incoming requests/feedback to the Centre,*

If personal information is involved in your initiative, please continue to the next page to complete your PIA.

If no personal information is involved, please submit Parts 1, 6, and 7 to the Information Governance Officer for review. You will receive support completing the remaining steps of the PIA.

### Part 2 – Protection of Personal Information

*In the following questions, delete the descriptive text and replace it with your own.*

**5. Storage or Access outside Canada**

*A Canadian contractor with a Canadian office that hosts data on Canadian servers will be selected.*

**6. Data-linking Initiative\***

In FIPPA, "data linking" and "data-linking initiative" are strictly defined. Answer the following questions to determine whether your initiative qualifies as a "data-linking initiative" under the Act. If you answer "yes" to all 3 questions, your initiative may be a data linking initiative and you must comply with specific requirements under the Act related to data-linking initiatives.

1. Personal information from one database is linked or combined with personal information from another database;	No
2. The purpose for the linkage is different from those for which the personal information in each database was originally obtained or compiled;	No
3. The data linking is occurring between either (1) two or more public bodies or (2) one or more public bodies and one or more agencies.	No
If you have answered "yes" to all three questions, please contact the Information Governance Officer to discuss the requirements of a data-linking initiative.	

### 7. Common or Integrated Program or Activity\*

In FIPPA, “common or integrated program or activity” is strictly defined. Answer the following questions to determine whether your initiative qualifies as “a common or integrated program or activity” under the Act. If you answer “yes” to all 3 of these questions, you must comply with requirements under the Act for common or integrated programs and activities.

1. This initiative involves a program or activity that provides a service (or services);	No
2. Those services are provided through: (a) a public body and at least one other public body or agency working collaboratively to provide that service; or (b) one public body working on behalf of one or more other public bodies or agencies;	No
3. The common or integrated program/activity is confirmed by written documentation that meets the requirements set out in the FOIPP regulation.	No
<b>Please check this box if this program involves a common or integrated program or activity based on your answers to the three questions above.</b>	

Personal Information Flow Table			
	Description/Purpose	Type	FIPPA Authority
1.	The evaluator creates the evaluation plan and submits it to the NCCAH for review to ensure the plan is compliant with FIPPA and the Tri-Council Policy Statement for Ethical Conduct for Research Involving Humans	Collection & Protection	26(e), 30
1.	The evaluator collects information about the performance of the NCCAH through interviews and/or focus groups with stakeholders, NCCAH staff or Advisory Committee members	Collection & Disclosure	26(d), 26(e), 33.1(e.1)
2.	The evaluator collects information about the performance of the NCCAH by accessing NCCAH records	Collection & Disclosure	26(e), 33.1(e.1)
	The evaluator provides oral and written updates to the NCCAH	Disclosure	33.1(e.1)
3.	The evaluator creates an evaluation report that reflects the	Disclosure &	32(a), and

	<i>evaluator's findings.</i>	<i>Use</i>	<i>33.1(e.1)</i>
4.	<i>The evaluator submits the evaluation report to the NCCAH</i>	<i>Disclosure</i>	<i>33.1(e.1)</i>
5.	<i>The NCCAH submits the report to the Public Health Agency of Canada</i>	<i>Disclosure</i>	<i>33.1(e.1)</i>
6.	<i>The evaluator submits the aggregated, anonymized data to the NCCAH where it is stored in a locked cabinet for one year and then destroyed.</i>	<i>Protection &amp; Disposition</i>	<i>30, 31</i>

### 8. Risk Mitigation Table

*Please identify any privacy risks, even very unlikely ones, associated with the initiative and the mitigation strategies that will be implemented. Please provide details of all such strategies. Also, please identify the likelihood (low, medium, or high) of this risk happening and the degree of impact it would have on individuals if it occurred.*

***Examples can be removed and additional lines added as needed.***

Risk Mitigation Table			
	Risk	Mitigation Strategy	Likelihood Impact
1.			
2.			
3.			

### 9. Collection Notice

*The project plan combined with a preface for the use of information by the contractor does not require a collection notice in this case. It will be the responsibility of the NCCAH to ensure that the contractor is explaining how and under what circumstances the personal information is collected, used, disclosed and disposed of. The Information Governance Officer will provide support if the NCCAH requires FIPPA citations to support communicating transparency to the participants.*

COMPLETED  
INITIATIVE

### Part 3 – Security of Personal Information

*Please consult with the Information Governance Officer, the Chief Information Officer or the IT Security Officer when filling out this section if you have any questions.*

10. Please describe the physical security measures related to the initiative (if applicable).

[REDACTED]

11. Please describe the technical security measures related to the initiative (if applicable).

[REDACTED]

12. Does your department rely on any security policies? If so, indicate here:

[REDACTED]

13. Please describe any access controls and/or ways in which you will limit or restrict unauthorized changes (such as additions or deletions) to personal information.

[REDACTED]

14. Please describe how you track who has access to the personal information.

[REDACTED]

### Part 4 – Accuracy/Correction/Retention of Personal Information

15. How is an individual's information updated or corrected? If information is not updated or corrected (for physical, procedural or other reasons) please explain how it will be annotated. If personal information will be disclosed to others, how will the public body notify them of the update, correction or annotation?

*The evaluator will be responsible for ensuring that they accurately collect information to compile. The report created will be aggregate anonymized data which will expect a margin of error in the results.*

**16. Does your initiative use personal information to make decisions that directly affect an individual(s)? If yes, please explain.**

*Yes, the information collected is to create a report that is a formal evaluation of the NCCAH.*

**17. If you answered "yes" to question 17, please explain the efforts that will be made to ensure that the personal information is accurate and complete.**

*The NCCAH manager will be able to ask the evaluator questions if any information seems to be inaccurate. The evaluator will be responsible for the accuracy of collecting raw data, and accurately aggregating the raw data used for the evaluation reports.*

**18. If you answered "yes" to question 17, do you have a records retention and/or disposition schedule that will ensure that personal information is kept for at least one year after it is used in making a decision directly affecting an individual?**

*Aggregate data is kept for a year. Evaluation reports are kept for six years as per Public Health Agency of Canada guidelines. Raw data in interviews is not directly used for evaluation because it must be aggregated and anonymized first before it is used in the evaluation report. If required, records of concern can be captured and held for one year.*

### **Part 5 – Further Information**

**19. Does the initiative involve systematic disclosures of personal information? If yes, please explain.**

No.

**Please check this box if the related Information Sharing Agreement (ISA) is attached. If you require assistance completing an ISA, please contact the Information Governance Officer.**

**20. Does the program involve access to personally identifiable information for research or statistical purposes? If yes, please explain.**

*No. The data is only used for the purposes of evaluation of project activities and project operations and management.*

**Please check this box if the related Research Agreement (RA) is attached. If you require assistance completing an RA please contact the Information Governance Officer, the UNBC Research Office or UNBC Archives.**

21. Will a personal information bank (PIB) result from this initiative? If yes, please list the legislatively required descriptors listed in section 69 (6) of FIPPA. Under this same section, this information is required to be published in a public directory.

No. Aggregate anonymized data is all that is retained by the evaluator.

Please ensure Parts 6 and 7 are attached to your submitted PIA.

### Part 6 – Information Governance Officer Comments

*This PIA is based on a review of the material provided to the Information Governance Officer as of the date below. If, in future any substantive changes are made to the scope of this PIA, the public body will have to complete a PIA update and submit for approval.*

### Part 7 - Program Area Signatures

Donna Atkinson		July 20/16
Program/Department Manager or Project Sponsor	Signature	Date
N/A	N/A	N/A
Contact Responsible for Systems Maintenance and/or Security (if applicable)	Signature	Date
Adam Cullum		July 21/16
Information Governance Officer	Signature	Date

Once the PIA has been approved with or without conditions, the Information Governance Officer will collect signatures from the individuals indicated above. A copy will be provided to all signatories for convenience or to attach to a requisition or file with a contract.

A final copy of this PIA (with all signatures) will be kept on record with the Information Governance Officer.