Privacy Impact Assessment

PIA # and Name- 23-54 SST

Legislative Requirement

Under Section 69 (5.3) of FIPPA UNBC is required to conduct a privacy impact assessment (PIA)and must do so in accordance with the directions of the Minister responsible for the Act.

A PIA needs to be conducted
- For a new initiative for which no PIA has previously been conducted.
- Before implementing significant change to an existing initiative, including but not limited to a change in the location in which sensitive personal information is stored.
- At the discretion of the person(s) with delegated authority under section 66 of the Act

1. Accountability

1.1 Identify Department, Branch, or Program Area involved in the initiative

Branches: Student Success portfolio
Departments: Residence & Restorative Relations (Housing & Residence Life, and Restorative Relations & Student Supports), Health and Wellness, Security & Parking

1.2 Identify UNBC role responsible for the Initiative

The Residence & Restorative Relations Department – mainly driven by Manager, Residence & Restorative Relations, and the Restorative Relations & Student Supports Coordinator. These two positions report to the Director, Student Success.

1.3 Describe the Governance Model – who is accountable for the program or system.

The Director, Student Success is accountable for the Student Support Team as they oversees the Student Success Portfolio and all aspects related to Non-Academic Misconduct, Concern for Students and Students Experiencing Distress. The members of the SST are:

Director, Student Success
Manager, Residence & Restorative Relations
Restorative Relations & Student Supports Coordinator
Manager, Security & Parking
Manager, Health and Wellness

1.4 Timeline for the initiative

Anticipated start date for the initiative,	Is this a one-time event?		
1/15/24 .		☐ Yes	✔ No

2. Overview

2.1 Describe the New Program or Service or the Change.

The Student Supports Team (SST) is an interdisciplinary team who identify, support and responds to concerns for students, students identified as experiencing distress, and students who seek out the support of the SST.

2.2 Describe the Purposes, Goals and Objectives.

The purpose of the SST is to reduce siloing and streamline student support services. The SST aims to connect students with the appropriate services for their unique situation and, within the limits of its expertise, strives to support the UNBC community.

2.3 List any Relevant PIAs

PIA 20-007, Microsoft 365

2.4 List any relevant contracts or software purchases.
Be sure to follow UNBC guidelines regarding purchasing policies.

N/A
At this time, we are exploring if there is a possibility to utilize the CRM when it is built.

2.5 List all interested parties impacted / Involved
(i.e. who are you collecting information from, UNBC roles accessing/using information, 3rd parties with whom you will share information)

Interested Party	Role in the initiative
Director - Student Success	-Consultative Member of the SST -Provides support to the SST. -Taking recommendations forward to the senior leadership team for decision-making and action when required. -Shares the responsibility of coordinating meetings with Senior
Manager, Residence & Restorative Relations	-Direct report to Director, Student Success -Member and facilitator of SST -Provides case consultation relevant to their context and expertise -Minute taking / noting agreed actions. -Case management and database management
Restorative Relations & Student Supports Coordinator	-Directly works with students, parties raising concerns etc., and brings information Format agenda. -Facilitate meetings. -Case management and database management
Manager, Security & Parking	-Provides case consultation relevant to their context and expertise -Regularly attend and participate in meetings. -Act as a consultative member. - Offers perspective/critical lens based on their professional judgment – a interdisciplinary team.
Manager, Health & Wellness	-Regularly attend and participate in meetings. -Act as a consultative member. - Offers perspective/critical lens based on their professional judgment – a interdisciplinary team. - Consults with internal/external stakeholders as required to aid the SST
Concerned parties, Students, etc.	

RCMP	If there is an indication that a student is unsafe or if there is a concern for the safety of others, a report to RCMP will be made. Harm to self – 911 Harm to others (concerns for public safety) – RCMP/911 Concerns for minors (anyone under the age of 19) – Ministry of Child and Family Services 250-645-4105 Missing Person- 911 *Assisting in RCMP investigations
Emergency Services	
Student Parents/Guardians/Family	Information sharing is based on third-party authorization.
Community Resources/Partners?	E.g., Foundry BC, PG Sexual Assault Centre, Northern Health, etc. -We may collect information. -Information sharing may occur when UNBC receives a Release of information (ROI) for transition/support purposes.
Internal UNBC Service Departments	-The SST collects information mainly from UNBC services. -On occasion, information may be shared on a need-to-know basis to provide appropriate support.
Instructors	-Information collected, such as concerns for a student such as attendance or well-being. -

3. Collection of Personal Information

3.1 List the data elements or personal information involved in your initiative.

Data Element name, email, id#, grade	Rationale for collection	Method of Collection	FIPPA Authorization
Name, Email, Student ID number	To identify and confirm identity of student -Case consultation -Case management and record keeping *Method collection can be Direct and Indirect, with ways to confirm such as through Banner, StarRez databases	**Direct** Indirect NA	26(c)
Grades, Academic standing, Student status (Enrolled, Withdrawn, Compassion Withdraw, expelled etc.)	-Case consultation -Support planning -Confirmation of student status	**Direct** Indirect NA	26(c)
Degree enrolment, Course schedule, list of Instructors	-Understanding student situation in order to case consult appropriately -Liaising with Instructors regarding student concerns on a need-to-know basis	**Direct** Indirect NA	26(c)
International/Domestic student Status	-Understanding student status in order to appropriate provide guidance and resources -Students have different access to resources or are bound by different law and procedures due to status	**Direct** Indirect NA	26(c)
Addresses and phone numbers	Needed to contact student, emergency contacts, and/or Third Party Authorization	**Direct** Indirect NA	26(c)
Medical disclosures, general disclosures of concerns, personal details/experiences	-To understand case and situation details on a need to know basis -To identify needs based on disclosures *Method of collection can be direct and indirect	**Direct** Indirect NA	26(c)
		Direct Indirect NA	TBD

3.2 Describe how personal information is to be collected.
If you already have a collection notice, attach it as an appendix.

Phone Call, Voicemail, Email, In-person meeting, Video calls

4. Use of Personal Information

4.1 List all users of PI and Describe how personal information is to be used.

User (UNBC Roles e.g Governance officer)	How the info is used	FIPPA Authorization
Director, Student Success	Case consultation, Case management, and supporting individuals -Liaising with internal departments, and Third parties, as well as relevant senior leadership on need-to-know basis	32(a)
Manager, Residence & Restorative Relations	Case consultation, Case management, and supporting individuals - Liaising with relevant departments within portfolio (Housing) on support planning with the SST on a need-to-know basis -Liaising with Response and Support Team on need-to-know basis, especially for high-risk situations that warrant investigations or Sexual Violence and Misconduct	32(a)
Restorative Relations & Student Success Coordinator	Case consultation, Case management, and supporting individuals -Liaising with partnering departments in order to support individuals	32(a)
Manager, Health & Wellness	Case consultation, Case management, and supporting individuals -Liaising with relevant departments within portfolio (Medical, Counselling, Access Resource Centre) on support planning with the SST on a need-to-know basis	32(a)
Manager, Security & Parking	Case consultation, Case management, and supporting individuals -Liaising with relevant Security portfolio on safety and security details related to support plans on a need-to-know basis -May be informing supervisor (Director, Enterprise Risk and Safety) on a need-to-know basis	32(a)
Peripheral Internal Departments (Registrar, FNC, Advising, etc.)	Case consultation, and supporting individuals if needed	32(a)
		TBD

4.2 Describe the record management of Personal information involved in the initiative.

Does the initiative involve using personal information to make a decision about an individual?	Does the initiative have a retention schedule regarding personal information used to make decisions?
✔ Yes ☐ No	✔ Yes ☐ No

If the initiative involves using personal information to make a decision about an individual, but does not have a record retention schedule, describe how you will ensure the information will be kept for a minimum of one year after it's used to make a decision that directly affects an individual.

Interim retention period of 5 years.

5. Research/ Health System Use of Personal Information

5.1 Will data collected through this initiative be used for research or health system use?

☐ Yes   ☑ No

If "Yes" answer the following questions, if "No" please proceed to the next section.

5.2 Explain and provide details of data state (aggregate, de-identified, anonymized etc.)

5.3 If data will it be disclosed as part of Health System Use, provide details on the method of disclosure, as well as where and how personal information will be stored by 3rd party.

5.4 If data will it be disclosed as part of Research/ Open Data, provide details on the method of disclosure, as well as where and how personal information will be stored by 3rd party.

6. Storage of Personal Information

6.1 Does the initiative involve digital tools, databases, or information systems?

☐ Yes   ☑ No

If yes, contact UNBC Information Security to determine whether the initiative requires a security and threat risk assessment.

6.2 As part of this initiative, will Personal information be store outside of Canada?

☑ Yes   ☐ No

6.3 Describe how information will be stored during this initiative (i.e., cloud storage, SaaS, etc).

Microsoft Teams, Sharepoint, One Note in the Cloud. Possibly CRM in the future. Personal physical notebooks as per needed with Initials. Members will store in own personal system.

SST Team with Microsoft Teams - This is a private team by which members will have access only by invitation. Documents (One Note, Word, etc.) related to cases will be stored within the team and only accessible by members of the SST. All members are responsible for the Teams site.

7. Disclosure of Personal Information

7.1 Does the initiative involve disclosing information to 3rd parties (i.e. non-unbc employees?

☑ Yes   ☐ No

If "Yes" answer the following questions, if "No" please proceed to the next section.

7.2 Provide details on the disclosure,including to whom, purpose, method of disclosure, and how personal information will be stored by 3rd party.

RCMP - there may be incidents where police investigations, reports, etc. are involved. RCMP may be communicated with

Additional emergency services. Purpose safety of others and self. The method will be a phone. Stored in government medical service systems.

7.3 If disclosing information to anyone outside of Canada, Provide details regarding to whom purpose , method of disclosure,and how personal information will be stored by 3rd party.

-If outcomes are made in which UNBC will need to communicate (if student was expelled, suspended, etc.) - Method of disclosure (Phone, Email, or Video call).

A group member of the SST the RRSSC may reach out to International student families if 3rd party authorization is granted. If necessary, the team may direct a member to connect with emergency contact with 3rd party authorization.

If there is a third-party authorized.

If the SST receives an Release of Information request from a 3rd party.

8. Accuracy and Correction of Personal Information

8.1 How will you make sure that the personal information collected is accurate and complete?

Direct first-person conversations. Direct confirmation from individuals involved. If discrepancies occur, they will be noted and considered in decision-making.

Correct information from Banner (student #, Name), star rez, photo ID.

When people are writing initials provide student number.

When doing an intake repeating back the information.

8.2 Do you have a process in place to correct personal information?

✔ Yes

☐ No

8.3 If yes, please describe your process below?

Information will be brought into the SST via a member. If information is received by the Restorative Relations & Student Supports Coordinator, via the connectu@unbc.ca email or phone, this individual will then vet the information and bring what is relevant to the group if the situation at hand has met the threshold for the SST. If other members of the SST bring in a situation, they too, will decide to only bring relevant information into the group in order to fully be able to case consult appropriately.

8.4 Describe the process of how you will make a note on the record, if you're not able to correct the record itself.

At this time, we do not have a formal channel/database in which personal information is kept. Each group member belongs to a separate department where they will then store information that is relevant to them. For example, Manager, Health and Wellness will store in MOIS if applicable.

8.5 If you receive a request for correction from an individual and you know you disclosed their personal information in the last year, how will you ensure that you conduct these notifications when necessary?

SST will have a team meeting to correct inappropriate information in personal files.

If in personal records, record keeper of that file will be responsible for correcting information

9. Personal Information Bank

A personal information bank is a collection of personal information that is organized or searchable by the name of the individual or an identifying number, symbol, or other identifier. A personal information bank can be a simple list of personal information.

Personal information banks contain personal information that is:

- linked to an identifiable individual
- organized and capable of being retrieved by a personal identifier
- normally compiled for a single purpose

9.1 Will your initiative result in a personal information bank?

☐ Yes   ☑ No

If "Yes", answer the following questions, if "No" please proceed to the next section.

9.2 Describe the business purpose for the information bank (i.e., account management of clients/ students).

*Use programs are not solidified currently (CRM, Banner, SST Database, etc)

The main purpose of the information bank is for case management. This database would be used to store case notes, consultation notes, next steps, interactions/needs from internal UNBC service departments etc. Disclosures, and medical information may also be stored here if it is relevant to the situation. In the Interim MS Teams is utilized as the main personal information bank.

9.3 If aggregate reports are generated from the information bank, explain how Personal Information will be de-identified or anonymized.

The information would be anonymized in the event that the SST is asked to pull reports based on themes within the student body to understand needs. For example, this group may be asked to pull information regarding statistics on Sexual Violence and Misconduct, or Mental Health related concerns, or Financial insecurity.

9.4 Describe the category of users and the information to which the user will have access

Category of Users (i.e., system admin, clerk, etc.) ·

Information accessed (i.e. contact info, grades, fee etc.)

Category of Users	Information accessed
System Admin (Full Access)	Contact information, class schedule, grades, Fees, Addresses, Third Party Authorization information, past conduct-related information, Case notes, incoming referral information for student, ROI
User (limited access)	Case notes, Contact information, past conduct-related information, Third Party Auth, ROIs

9.5 Identify the UNBC role(s) responsible for managing user accounts and audit user access.

Director, Student Success; Manager, Residence & Restorative Relations; Restorative Relations & Student Supports Coordinator.

9.6 Describe the process for auditing user access.
How detailed is the data (e.g., date stamps,time stamps, IP address, etc.)? Does the audit log include the purpose of an access?

At this time there are no processes to audit users as there is not current database being used. All notes are stored in a personal file.

9.7 Is there a separation of responsibility between those who supervise administration of the system, or security of the system, and those who verify the audit logs

☐ Yes   ☐ No

9.8 Are the audit logs immutable?

☐ Yes   ☐ No

9.9 Is the system responsive or passive?
Is it possible to put a monitor on particular individuals? Will access produce an immediate response/notification or a log entry for review?

N/A

9.10 How will those found to abuse access privileges be sanctioned ?

Restorative process where appropriate. If not, HR and Privacy office will be involved.

10. Common or Integrated Program or Activity

In FOIPPA, "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.

10.1 Does this initiative involve a program or activity that provides a service(s)through at least one other public body or agency working collaboratively to provide that service?

☐ Yes ☑ No

10.2 Does this initiative involve a program or activity that provides a service(s) through UNBC that is working on behalf of one or more other public bodies or agencies?

☐ Yes ☑ No

10.3 The common or integrated program/activity is confirmed by written documentation that meets the requirements set out in the Regulations? (Privacy Officer will answer).

☐ Yes ☑ No

If this PIA addresses a common or integrated program, UNBC must submit this PIA to the Office of the Information and Privacy Commissioner and be subject to their examination, advice, and timelines.

11. Privacy and Security Safeguards

11.1 Describe administrative safeguards(i.e. policy documents, procedures, or training).

11.2 Describe physical safeguards(i.e. locked, filing cabinets, locked doors, or restricted areas).

11.3 Describe the controls in place to prevent unauthorized access to personal information(i.e. role-based access to software, access logs).

11.4 Describe technical safeguards(i.e. firewalls, encryption, or intrusion prevention systems).

12. Privacy Risk Identification and Mitigation

Identify any privacy risks and the corresponding mitigation strategies that will be implemented. Try to include at least one risk related to each step in the information cycle (collection, use, storage, disclosure, and retention. Refer to the risk classification table to assist with likelihood and impact rating.
If you are disclosing or storing data outside of Canada you will need to identify additional risks related to storage/disclosure outside of Canada.

12.1 Risk Description	Likelihood	Impact	Risk level	Mitigation Strategy Describe how above safeguards could be used to mitigate the risk

13. Collection Notice

All collection notices must include the:
- Purpose for the collection
- Legal authority for the collection
- Contact information for an employee of UNBC who can answer the individual's questions about the collection.

The employee responsible for responding to data collection questions should be able to explain why the personal information is being collected and how it will be used, retained, and disclosed.

The contact method should suit the collection method. For example, if you collect personal information through an online form, you could include an email contact.

13.1 Privacy notice
Be sure to include all 3 required parts of the notice

Purpose for the collection: All relevant information to a situation/individual that would aid in appropriate case consultation and case conceptualization. This information will be used to understand fully the nuances of a situation in order to inform the best next steps and options.

Legal Authority for Collection: UNBC, FOIPPA

Contact information: Default is the Restorative Relations and Student Supports Coordinator. If an individual was referred to this team by another core member of the SST, other than the RR&SSC, they will be the contact person for the individual.

13.2 Location of Privacy Notice
If the notice is to be posted on the website please include url of webpage.

Website is currently under construction.

14. Signing and Approval

Individual leading the Program/Project: Fiona Mo

Position: Manager, Residence & Restorative Relations

I confirm the information management practices in this initiative have been documented as accurately as I am aware. I commit to communicating appropriate information management practices to all individuals participating in this initiative. I commit to following the documented practices on this PIA, or arranging a PIA amendment if I am aware information management practices in this initiative change.

Signature: ████████████ **Date:** 03/27/2024

Director/Dean Overseeing the Program/Project: Justin Foster, Director, Student Success

I am accountable for overseeing my staff involved in this initiative to ensure they adhere to information management practices presented in this PIA. I will arrange for the project lead named above to contact the Privacy Officer to arrange a PIA amendment if required.

Signature: ███████████ **Date:** 03/27/24

**Vice-President authorizing the Program/Project:** VP Academic & Provost

I confirm that this initiative to the best of my knowledge as written in the above sections, has information management practices that complies with policies and procedures of the University of Northern British Columbia.

Signature: ████████████████ **Date:** May 8, 2024

Privacy Officer reviewing the Program/Project: Christopher Ross

I confirm that this initiative to the best of my knowledge as written in the above sections, has information management practices that comply with British Columbia's Freedom of Information and Protection of Privacy Act.
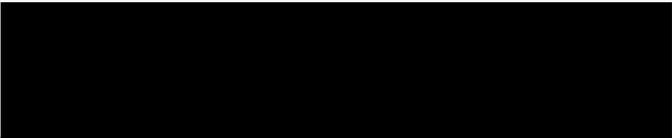
Signature: ███████████████████ **Date:** May 8, 2024

15. Reference Tools

"**personal information**" means recorded information about an identifiable individual, including,

(a) information relating to the race, national or ethnic origin, colour, religion, age, sex, sexual orientation or marital or family status of the individual,

(b) information relating to the education or the medical, psychiatric, psychological, criminal or employment history of the individual or information relating to financial transactions in which the individual has been involved,

(c) any identifying number, symbol or other particular assigned to the individual,

(d) the address, telephone number, fingerprints or blood type of the individual,

(e) the personal opinions or views of the individual except where they relate to another individual,

(f) correspondence sent to an institution by the individual that is implicitly or explicitly of a private or confidential nature, and replies to that correspondence that would reveal the contents of the original correspondence,

(h) the individual's name where it appears with other personal information relating to the individual or where the disclosure of the name would reveal other personal information about the individual.

Privacy Impact Risk assessment:

		Impact – Severity of outcome of identified risk occurs				
		Insignificant 1	Minor 2	Significant 3	Major 4	Severe 5
Probability / Likelihood that identified risk will occur	almost certain 5	Medium 5	High 10	Very High 15	Extreme 20	Extreme 25
	Likely 4	Medium 4	Medium 8	High 12	Very High 16	Extreme 20
	Moderate 3	Low 3	Medium 6	Medium 9	High 12	Very High 15
	Unlikely 2	Very low 2	Low 4	Medium 6	Medium 8	High 10
	Rare 1	Very low 1	Very low 2	Low 3	Medium 4	Medium 5

Risk Rating	*Risk Levels	Description	Actions Required
1-4	Minimal	Unlikely that associated risk would result in harm to privacy	Review of safeguards to be done at PIA review date
5-9	Moderate	Unlikely that associated risk would result in significant harm to privacy	annually review existing safeguards required
10-16	Elevated	Likely that associated risk would result in harm to the privacy	Routine monitoring of data processing or additional safeguards required
17-25	Unacceptable	Associated Risk would likely cause significant and immediate harm to the privacy	Must not proceed as existing safeguards and controls are insufficient

Return to Risk Matirix