

Privacy Impact Assessment for Non-Ministry Public Bodies

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Use this privacy impact assessment (PIA) template if you work for or a service provider to a non-ministry public body in B.C. and are starting a new initiative or significantly changing an existing initiative.

Before you start

- If you are in a non-ministry public body, you may use this template to document a PIA. This template leads you through a complete PIA, but you are welcome to use another template or method for documenting your PIA
- An initiative is an enactment, system, project, program or activity
- Find information on the [PIA review process](#) and [question-by-question guidance](#)
- If you have any questions, email Privacy.Helpline@gov.bc.ca or phone [250 356-1851](tel:250-356-1851)

PART 1: GENERAL INFORMATION

PIA file number:

Initiative title:	AccuroEMR Implementation
Organization:	Vancouver Community College
Branch or unit:	Applied Business Department
Your name and title:	Norman Chang; Associate Director IT
Your work phone:	604-871-7085
Your email:	nchang@vcc.ca
Initiative Lead name and title:	Kalli Cartwright; Operations Manager Hospitality, Food Studies and Applied Business
Initiative Lead phone:	604-443-8430
Initiative Lead email:	kcartwright@vcc.ca
Privacy Officer:	Surinder Aulakh
Privacy Officer phone:	604-443-8645
Privacy Officer email:	saulakh@vcc.ca

General information about the PIA:

Is this initiative a data-linking program under FOIPPA? If this PIA addresses a data-linking program, you must submit this PIA to the Office of the Information and Privacy Commissioner.
No.
Is this initiative a common or integrated program or activity? Under section FOIPPA 69 (5.4), you must submit this PIA to the Office of the Information and Privacy Commissioner.
No.
Related PIAs, if any:

1. What is the initiative?

The VCC Medical Office Administration (MOA) offers an on-going Medical Office Assistant program that is designed to equip students with the knowledge and skills to manage patient records, medical billing, and scheduling, and to perform clinical procedures and other administrative duties in various health care environments.

Describe your initiative in enough detail that a reader who knows nothing about your work will understand the purpose of your initiative and who your partners and other stakeholders are. Describe what you're doing, how it works, who is involved and when or how long your initiative runs.

2. What is the scope of the PIA?

This initiative is neither part of any larger one nor part of one that might be rolled out in phases.

Your initiative might be part of a larger one or might be rolled out in phases. What part of the initiative is covered by this PIA? What is out of scope of this PIA?

3. What are the data or information elements involved in your initiative?

The students will only use fictitious client data to train with. No actual personal information will be entered into the system.

Please list all the elements of information or data that you might collect, use, store, disclose or access as part of your initiative. If your initiative involves large quantities of information or datasets, you can list categories or other groupings of personal information in a table below or in an appendix.

3.1 Did you list personal information in question 3?

Personal information is any recorded information about an identifiable individual, other than business contact information. Personal information includes information that can be used to identify an individual through association or reference.

Type “yes” or “no” to indicate your response.

- If yes, go to [Part 2](#)
- If no, answer [question 4](#) and submit questions 1 to 4 to your Privacy Officer. You do not need to complete the rest of the PIA template.

4. How will you reduce the risk of unintentionally collecting personal information?

?? Constantly remind students that they will be entering fictitious client data into the system.

Some initiatives that do not require personal information are at risk of collecting personal information inadvertently, which could result in an information incident.

PART 2: COLLECTION, USE AND DISCLOSURE

This section will help you identify the legal authority for collecting, using and disclosing personal information, and confirm that all personal information elements are necessary for the purpose of the initiative.

5. Collection, use and disclosure

Use column 2 to identify whether the action in column 1 is a collection, use or disclosure of personal information. Use columns 3 and 4 to identify the legal authority you have for the collection, use or disclosure.

Use this column to describe the way personal information moves through your initiative step by step as if you were explaining it to someone who does not know about your initiative.	Collection, use or disclosure	FOIPPA authority	Other legal authority
Step 1:			
Step 2:			
Step 3:			
Step 4:			

Optional: Insert a drawing or flow diagram here or in an appendix if you think it will help to explain how each different part is connected.

6. Collection Notice

If you are collecting personal information directly from an individual the information is about, FOIPPA requires that you provide a collection notice (except in limited circumstances).

Review the [sample collection notice](#) and write your collection notice below. You can also attach the notice as an appendix.

PART 3: STORING PERSONAL INFORMATION

If you’re storing personal information outside of Canada, identify the sensitivity of the personal information and where and how it will be stored.

7. Is any personal information stored outside of Canada?

Type “yes” or “no” to indicate your response.

8. Does your initiative involve [sensitive personal information](#)?

Type “yes” or “no” to indicate your response.

- If yes, go to [question 9](#)
- If no, go to [question 10](#)

9. Is the sensitive personal information being disclosed outside of Canada under [FOIPPA section 33\(2\)\(f\)](#)?

Type “yes” or “no” to indicate your response.

- If yes, go to [question 10](#)
- If no, go to [Part 4](#)

10. Where are you storing the personal information involved in your initiative?

After you answer this question go to [Part 5](#).

PART 4: ASSESSMENT FOR DISCLOSURES OUTSIDE OF CANADA

Complete this section if you are disclosing sensitive personal information to be stored outside of Canada. You may need help from your organization’s Privacy Officer. More help is available in the [Guidance on Disclosures Outside of Canada](#).

11. Is the sensitive personal information stored by a service provider?

Type “yes” or “no” to indicate your response.

- If yes, fill in the table below (add more rows if necessary) and go to [question 13](#)
- If no, go to [question 12](#)

Name of service provider	Name of cloud infrastructure and/or platform provider(s) (if applicable)	Where is the sensitive personal information stored (including backups)?

12. Provide details on the disclosure, including to whom it is disclosed and where the sensitive personal information is stored.

13. Does the contract you rely on include privacy-related terms?

Type “yes” or “no” to indicate your response.

- If yes, describe the contractual measures related to your initiative.

15. What controls are in place to prevent unauthorized access to sensitive personal information?

16. Provide details about how you will track access to sensitive personal information.

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17. Describe the privacy risks for disclosure outside of Canada.

Use the table to indicate the privacy risks, potential impacts, likelihood of occurrence and level of privacy risk. For each privacy risk you identify describe a privacy risk response that is proportionate to the level of risk posed.

This may include reference to the measures to protect the sensitive personal information (contractual, technical, security, administrative and/or policy measures) you outlined. Add new rows if necessary.

Privacy risk	Impact to individuals	Likelihood of unauthorized collection, use, disclosure or storage of the sensitive personal information (low, medium, high)	Level of privacy risk (low, medium, high, considering the impact and likelihood)	Risk response (this may include contractual mitigations, technical controls, and/or procedural and policy barriers)	Is there any outstanding risk? If yes, please describe.

Outcome of Part 4

The outcome of Part 4 will be a **risk-based decision made by the head of the public body on whether to proceed with the initiative**, with consideration of the risks and risk responses, including consideration of the outstanding risks in question 17. **The public body may document the decision in an appropriate format as determined by the head of the public body or by using this PIA template.**

PART 5: SECURITY OF PERSONAL INFORMATION

In Part 5 you will share information about the privacy aspect of securing personal information. People, organizations or governments outside of your initiative should not be able to access the personal information you collect, use, store or disclose. You need to make sure that the personal information is safely secured in both physical and technical environments.

18. Does your initiative involve digital tools, databases or information systems?

Type “yes” or “no” to indicate your response.

- If yes, work with your Privacy Officer to determine whether you need a security assessment to ensure the initiative meets the reasonable security requirements of [FOIPPA section 30](#)

18.1 Do you or will you have a security assessment to help you ensure the initiative meets the security requirements of [FOIPPA section 30](#)?

Type “yes” or “no” to indicate your response.

- If yes, you may want to append the security assessment to this PIA. Go to [question 20](#)
- If no, go to [question 19](#)

19. What technical and physical security do you have in place to protect personal information?

Describe where the digital records for your initiative are stored (e.g., on your organization's LAN, on your computer desktop, etc.) and the technical security measures in place to protect those records. Technical security measures include secure passwords, encryption, firewalls, etc. Physical security measures include restricted access to filing cabinets or server locations, locked doors, security guards, etc.

If you have completed a security assessment, you may want to append it to the PIA.

20. Controlling and tracking access

Please check each strategy that describes how you limit or restrict who can access personal information and how you keep track of who has accessed personal information in the past. Insert your own strategies if needed.

Strategy	
We only allow employees in certain roles access to information	
Employees that need standing or recurring access to personal information must be approved by executive lead	
We use audit logs to see who accesses a file and when	
Describe any additional controls:	

PART 6: ACCURACY, CORRECTION AND RETENTION

In Part 6 you will demonstrate that you will make a reasonable effort to ensure the personal information that you have on file is accurate and complete.

21. How will you make sure that the personal information is accurate and complete?

[FOIPPA section 28](#) states that a public body must make every reasonable effort to ensure that an individual's personal information is accurate and complete.

22. Requests for correction

FOIPPA gives an individual the right to request correction of errors or omissions to their personal information. You must have a process in place to respond to these requests.

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

Type “yes” or “no” to indicate your response.

22.2 Sometimes it’s not possible to correct the personal information. **FOIPPA** requires that you make a note on the record about the request for correction if you’re not able to correct the record itself. Will you document the request to correct or annotate the record?

Type “yes” or “no” to indicate your response.

22.3 If you receive a request for correction from an individual and you know you disclosed their personal information in the last year, **FOIPPA** requires you to notify the other public body or third party of the request for correction. Will you ensure that you conduct these notifications when necessary?

Type “yes” or “no” to indicate your response.

23. Does your initiative use personal information to make decisions that directly affect an individual?

Type “yes” or “no” to indicate your response.

- If yes, go to [question 25](#)
- If no, skip ahead to [Part 7](#)

24. Do you have an information schedule in place related to personal information used to make a decision?

FOIPPA requires that public bodies keep personal information for a minimum of one year after it is used to make a decision. In addition, the [Information Management Act](#) requires that you dispose of government information only in accordance with an approved information schedule.

Type “yes” or “no” to indicate your response.

- If no, 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.

PART 7: PERSONAL INFORMATION BANKS

A personal information bank (PIB) is a collection of personal information searchable by name or unique identifier.

25. Will your initiative result in a personal information bank?

Type “yes” or “no” to indicate your response.

- If yes, please complete the table below.

Describe the type of information in the bank
Name of main organization involved
Any other ministries, agencies, public bodies or organizations involved
Business contact title and phone number for person responsible for managing the Personal Information Bank

PART 8: ADDITIONAL RISKS

Part 8 asks that you reflect on the risks to personal information in your initiative and list any risks that have not already been addressed by the questions in the template.

26. Risk response

Describe any additional risks that arise from collecting, using, storing, accessing or disclosing personal information in your initiative that have not been addressed by the questions on the template.

Add new rows if necessary.

Possible risk	Response
Risk 1:	
Risk 2:	
Risk 3:	
Risk 4:	

PART 9: SIGNATURES

You have completed a PIA. Submit the PIA to your Privacy Officer for review and comment, and then have the PIA signed by those responsible for the initiative.

Privacy Office Comments

Privacy Office Signatures

This PIA is based on a review of the material provided to the Privacy Office as of the date below.

Role	Name	Electronic signature	Date signed
Privacy Officer / Privacy Office Representative			

Program Area Signatures

This PIA accurately documents the data elements and information flow at the time of signing. If there are any changes to the overall initiative, including to the way personal information is collected, used, stored or disclosed, the program area will engage with their Privacy Office and if necessary, complete a PIA update.

Program Area Comments:

Role	Name	Electronic signature	Date signed
Initiative lead			
Program/Department Manager			
Contact Responsible for Systems Maintenance and/or Security Only required if they have been involved in the PIA			
Head of public body, or designate (if required)			

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