

Title: Transmission of Personal Health Information via Facsimile (Fax) Policy

Effective Date: December 1, 2011

1. **PURPOSE:**

- 1.1. To ensure that the trustee protects personal health information transmitted by facsimile (Fax) whether manual or auto faxed in accordance with *The Personal Health Information Act* (“PHIA”).

2. **DEFINITIONS:**

- 2.1. Access: The right of an individual (client) or a person permitted to exercise the rights of that individual to examine (view) and receive a copy of the individual’s personal health information maintained by the trustee.
- 2.2. Confidentiality: The obligation of a trustee to protect the personal health information entrusted to it, to maintain the secrecy of the information and not misuse or wrongfully disclose it.
- 2.3. Demographic Information: An individual’s name, address, telephone number and email address.
- 2.4. Disclosure of Personal Health Information: Revealing the personal health information outside the trustee, i.e. to other trustees, to family and friends of the individual, or to other persons legally entitled to have personal health information released to them.
- 2.5. Health Care: Any care, service or procedure provided to diagnose, treat or maintain an individual’s health; provided to prevent disease or injury or promote health care; or that affects the structure or a function of the body and includes the sale or dispensing of a drug, device, equipment or other item pursuant to a prescription.
- 2.6. Health Care Facility: A hospital, personal care home, psychiatric facility, medical clinic, laboratory, CancerCare Manitoba and community health centre or other facility in which health care is provided and that is designated in the PHIA regulations.
- 2.7. Health Professional: A person who is licensed or registered to provide health care under an Act of the Legislature or who is a member of a class of persons designated as health professionals in the PHIA regulations
- 2.8. Health Services Agency: An organization that provides health care such as community or home-based health care pursuant to an agreement with the trustee.
- 2.9. Individual: A person receiving health care services. For the purpose of access, correction, use and disclosure of personal health information includes persons permitted to exercise the rights of the individual. For clarity, health care services means occupational therapy services provided to clients in any setting.
- 2.10. Integrity of Personal Health Information: The preservation of its content throughout storage, use, transfer, and retrieval so that there is confidence that the information has not been tampered with or modified other than as authorized.
- 2.11. Maintain: In relation to personal health information, to have custody or control of the information.

- 2.12. Personal Health Information: Recorded information about an identifiable individual that relates to:
- the individual's health, or health care history, including genetic information about the individual;
 - the provision of health care to the individual; or
 - payment for health care provided to the individual;
- and includes:
- the PHIN (personal health identification number) and any other identification number, symbol or particular assigned to an individual; and
 - any identifying information about the individual that is collected in the course of, and is incidental to, the provision of health care or payment for health care.
- 2.13. PHIA: *The Personal Health Information Act* (Manitoba).
- 2.14. PHIN: The personal health identification number assigned to an individual by the minister to uniquely identify the individual for health care purposes.
- 2.15. Personal Representative:
- an executor/executrix or joint executor/executrix named in a deceased individual's will; or
 - a court appointed administrator or joint administrator of a person's estate.
- 2.16. Persons Permitted to Exercise the Rights of an Individual includes:
- 2.16.1. (a) any person with written authorization from the individual to act on the Individual's behalf;
- (b) a proxy appointed by the individual under *The Health Care Directives Act*;
- (c) committee appointed for the individual under *The Mental Health Act* if the committee has the power to make health care decisions on the individual's behalf;
- (d) a substitute decision maker for personal care appointed for the individual under *The Vulnerable Persons Living with a Mental Disability Act* if the exercise of the right relates to the powers and duties of the substitute decision maker;
- (e) the parent or guardian of an individual who is a minor, if the minor does not have the capacity to make health care decisions;
- (f) if the individual is deceased, his or her personal representative.
- 2.16.2. If it is reasonable to believe that no person listed in any clause of 2.6.1 exists or is available, the adult person listed first in the following who is readily available and willing to act may exercise the rights of an individual who lacks the capacity to do so:
- (a) the individual's spouse, or common-law partner, with whom the individual is cohabiting;
- (b) a son or daughter;
- (c) a parent, if the individual is an adult;

- (d) a brother or sister;
- (e) a person with whom the individual is known to have a close personal relationship;
- (f) a grandparent;
- (g) a grandchild;
- (h) an aunt or uncle;
- (i) a nephew or niece.

Ranking: The older or oldest of two or more relatives described in any clause of 2.6.1 is to be preferred to another of those relatives.

- 2.17. **Privacy:** The fundamental right of the individual to control the collection, use and disclosure of their personal health information.
- 2.18. **Record or Recorded Information:** A record of information in any form, and includes information that is written, photographed, recorded or stored in any manner, on any storage medium or by any means, including by graphic, electronic or mechanical means, but does not include electronic software or any mechanism that produces records.

For clarity, a record means information, however recorded (e.g. written, audio, video, computer disk), generated by the occupational therapist or an person supervised by the occupational therapist. This includes but is not limited to assessments and evaluations, therapy goals, progress towards goals, attendance and remuneration records. When the record belongs to the occupational therapist it may also include items not generated by the occupational therapist such as, but not limited to, a referral, correspondence, and reports prepared by others.

- 2.19. **Representative:** In relation to an individual, means persons permitted to exercise the rights of an individual.
- 2.20. **Trustee:** A health professional, health care facility, public body, or health services agency that collects or maintains personal health information. For clarity, an occupational therapist is a trustee under the PHIA if he or she is a registered occupational therapist and is self employed or employed by a non-trustee. Health professionals employed by a trustee, such as a hospital government agency, etc are not considered trustees; however as employees of these facilities, occupational trustees must comply with the PHIA.
- 2.21. **Use:** Involves revealing personal health information to someone within the trustee's own organization who needs to know the information to do their job. Use includes processing, reproduction, transmission and transportation of personal health information.

3. **POLICY:**

- 3.1. All fax transmittal of personal health information including demographic information must be in accordance with the company's policies on access, collection, use or disclosure of personal health information.
- 3.2. When determining if faxing is the appropriate method to send and/or receive personal health information, consider the sensitivity of the information, the number of documents that need to be transmitted, and the urgency of which the information is required. [Section 19](#)

- 3.3. Personal health information mistakenly faxed to an unintended recipient is an unauthorized disclosure resulting in a breach of privacy of the individual to whom the information is about. The breach shall be reported in accordance with the 'Recording of Security Breaches Related to Personal Health Information Policy'.
- 3.4. If there are reasonable grounds to be concerned about the security of the transmission, sending personal health information by fax may be refused. An appropriate alternative mode of transmission should be utilized. [Section 18\(1\)](#)
- 3.5. When dealing with a request to fax personal health information to a new fax number, reasonable measures should be followed to ensure the identity of the requestor and the appropriateness of sending a fax to that number.
- 3.6. Any fax machine used to send or receive personal health information should be located in a place that prevents unauthorized persons from seeing faxed personal health information. Access to the machine should be controlled.
- 3.7. Fax confirmation sheets shall be retained with the original faxed documents wherever possible.
- 3.8. All fax transmissions of personal health information shall have a cover sheet containing the following information:
 - intended recipient's name, address (including department or program), telephone and fax number whenever feasible;
 - sender's full name and telephone number;
 - individual's demographic information and shall not contain any other personal health information about the individual;
 - number of pages sent including cover sheet;
 - confidentiality statement stating that the faxed material is confidential, is intended only for the stated recipient, is not to be disclosed to or used by anyone else, that if the fax is received in error or the number of pages is incorrect to immediately notify the sender and at the request of the sender to return or securely destroy the information.
- 3.9. When faxing sensitive personal health information, unique identifiers or codes should be used to protect the identity of the individual(s).
- 3.10. At no time shall personal health information be left unattended on the fax machine if in an unsecured area.

4. PROCEDURE:

- 4.1. Persons authorized to fax personal health information shall: [Section 18\(2\)](#)
 - set up pre-programmed fax numbers (speed dial directories) for most commonly used fax numbers and regularly check to ensure that the fax numbers are accurate and up to date. Pre-programmed fax numbers (speed dials) shall not include numbers for media.
 - confirm that the fax number for the intended recipient is correct;
 - check the fax number dialed to ensure it is correct (use visual check on the display) prior to sending the fax;

- check each fax confirmation report to ensure that the fax number on the report is the same as the recipient's number and that the number of pages transmitted and received are the same;
- remove the documents from the fax machine as soon as the fax has been processed;
- keep a record of the personal health information that was sent via fax.

4.2. Persons authorized to receive personal health information via fax transmission shall:

- check to ensure the number of pages received match the number noted on the fax cover sheet that all pages are legible;
- advise the sender of the fax when there is a discrepancy in the number of pages sent and received, or that copies are illegible and request another copy be sent;
- check to ensure that the fax does not contain any material that should not have been sent or was intended for another recipient;
- promptly notify the sender when material was sent in error and return or destroy the information as requested by the sender.

5. REFERENCES:

- 5.1. Reporting of Security Breaches Related to Personal Health Information and the Corrective Procedures to be followed.
- 5.2. The *Personal Health Information Act*.
- 5.3. The *Personal Health Information Regulations*.

Transmission of Personal Health Information via Fax Policy – Guidelines

The standard operating procedure for faxing personal health information at this company is:

1. A fax cover sheet is always used and it includes:
 - intended recipient's name, address (including department or program), telephone and fax number whenever feasible;
 - sender's full name and telephone number;
 - individual's demographic information and shall not contain any other personal health information about the individual;
 - number of pages sent including cover sheet;
 - A confidentiality clause that states that the faxed material is confidential, is intended only for the stated recipient, is not to be disclosed to or used by anyone else; that if the fax is received in error or the number of pages is incorrect to immediately notify the sender and at the request of the sender to return or securely destroyed the information.
2. Pre-programmed fax numbers are regularly checked to ensure that the fax numbers are accurate and up to date.
3. When faxing extremely sensitive personal health information unique identifiers or codes are used to protect Individuals involved.
4. The fax number is checked to ensure it is correct.
5. The fax number that is dialed is checked before the fax is sent.
6. The fax confirmation report is checked to ensure that the fax was sent to the intended recipient, and that the correct number of pages has been sent.
7. A copy of the fax confirmation sheet is kept with the original documentation that was faxed.
8. When a fax contains sensitive information the receiver is contacted to confirm receipt.
9. When faxed documents are received they are checked to ensure that the all pages were received and immediately removed from the fax machine.
10. If a fax is mistakenly sent to an unintended recipient it is a breach of privacy and is handled in accordance with 'Reporting of Security Breaches Related to Personal Health Information Policy'.

For further clarification on any point, please refer to the full policy.