



Privacy Impact Assessment Summary

eVisit Primary Care (eVPC) formerly Enhanced Access to Primary Care (EAPC) Proof of Concept (PoC) # 1 (Novari Health)

Date Reviewed and Updated: August 31, 2020

Date PIAS Originally Written:

Aug 2017	PIA Phase 1 (GRA Consultants)
Jan 2018	PIA Phase 2 Refresh #1 (GRA)
Apr 2018	PIA Phase 3 Refresh #2 (GRA)
Mar 2019	Internal Privacy Review (OH Privacy)
Jun 2020	Statement of Risk (OH Privacy)

Privacy Summary – eVisit Primary Care – Novari Health

A Privacy Impact Assessment (PIA) is a risk management tool that allows the Ontario Health (OTN Business Unit) (“OH”) to assess a technology, program or information system’s privacy risks and its compliance with provincial and federal legislative requirements and standards. Where required, a PIA also details mitigating strategies by way of recommendations and an action plan. A critical element of the PIA process is the implementation of those recommendations detailed in the assessment.

OH publishes PIA summaries to ensure transparency with its members, users, the public, and those individuals who may be the subject of the personal information, personal health information and deidentified information (collectively “data”) collected, used, disclosed, retained or disposed of in relation to OH’s products or services. OH also publishes these summaries to ensure compliance with the requirements, under ‘*Personal Health Information Protection Act, 2004*’¹for Health Information Network Providers (HINP) under Ontario Regulation 329/04 (s. 6(3)), as an Electronic Service Provider (eSP) (General, O Reg 329/04, s. 6(1)) and as an Agent. OH does not permit the summaries or the content therein to be copied, used, or redistributed outside of the purposes identified above, without the express written consent of OH.

A PIA has the benefit of generating and communicating confidence that privacy requirements are being met and risks mitigated. It can also promote fully informed policy decision-making and system design choices, ensuring privacy is considered throughout the business redesign/project redevelopment cycle. A PIA is meant to be used and expanded over the cycle of the initiative’s development and implementation, to continuously identify and address risks that impact or have the potential to impact the confidentiality, integrity and accessibility of data held/handled by OH and/or its partners.

¹ Ontario Ministry of Health and Long-term Care. “Health Information Protection Act, 2004.” http://www.health.gov.on.ca/english/providers/legislation/priv_legislation/priv_legislation.html.



OH completed Privacy Impact Assessments, Internal Privacy Review and Statement of Risk (collectively the PIAs) as detailed in table on previous page. The PIAs assess the process by which OH will collect the data, plans to use the data and the management of third parties used in the solution to ensure public trust that OH handles PHI in a responsible manner. OH has adopted a “low” risk tolerance level, meaning that low and very low risks will not be immediately actioned, but will be actioned at an agreed upon time to ensure they do not develop to be higher risks. All high and medium risks are to be mitigated prior to a product or service launch or obtain an exception as detailed in the OH PIA Policy. The PIAs assess the process by which the project will collect the data (personal information (PI)/personal health information (PHI) /deidentified/aggregated), how it plans to use the data and ensure public trust that the project handles the data in a responsible manner.

Background

This document provides a summary of a privacy impact assessments (PIA) conducted for OH by GRA Consultants and an internal reviews/statement of risk conducted by OH’s Privacy team. The assessments were conducted on the eVPC Proof-of-Concept (PoC) #1 involving Novari Health. OH’s approach is to work closely with the physicians in the identified regions (Central West, Toronto-Central, Central-East and Mississauga-Halton Local Health Integration Networks (LHIN)) to co-design the delivery model that supports a broad range of practice and incentive models including both blended fee-for-service (“FFS”) and capitation-based models. OH also engaged patients in the community to identify their barriers to accessing primary care and their preferences and priorities with respect to use of technology and accessing services. OH’s overall vision is to spread and scale virtual access to primary care across Ontario. OH established a Vendor of Record arrangement with qualified Suppliers for primary care virtual visits solutions. A Master Agreement (MA) and Statement of Work (SoW) governs the delivery of the solutions.

OH used a phased iterative approach to develop and implement the PoC for the LHINs to inform the design of a provincial program. The third party vendor was to build and implement a new virtually enabled model of primary care. Through this solution patients were able to:

- Initiate access to primary care via a solution that is user-friendly and mobile
- Provide important information including symptoms and history
- Receive timely care that is linked with their own primary care provider.

The PoC also involved the WCH Institute for Health Systems Solutions and Virtual Care (WIHV) as OH’s service provider in the evaluation requirements of the initiative.

Legislative authority

4.1 *Personal Health Information Protection Act, 2004* (PHIPA)

Compliance with PHIPA is a shared accountability between the participating physicians, Novari, and OH. For the purposes of this project each of the LHINs will serve as Health Information Custodians (HICs). OH has multiple roles under PHIPA O. Reg. 329/04 section 6. OH, as a Health Information Network Provider (HINP), has procured and made available to the LHINs a third-party cloud solution digital technology, Novari Health, to enable clinical staff to deliver the primary care vision. OH may also act as an Electronic Service Provider (eSP) when providing a reusable Video



Application Programming Interface (API), Pexcip, a software-based videoconferencing solution, as an on-going service to Novari to integrate with its eVisit solutions. OH also provided the Diagnostic Imaging API in order to implement the remuneration of physicians during the PoC. Novari will solely as an eSP throughout the project, under the direction of OH. The PHIPA regulation defines the requirements that the various participants must meet. The requirements are meant to provide the HICs to which the HINP and eSP provides its services with assurance that the HINP and eSPs are appropriately managing the data. OH and its service partners have agreed to meet these requirements in its agreements with the sending and receiving facilities and have developed privacy and security safeguards to support in meeting these requirements.

4.2 Freedom of Information and Protection of Privacy Act (FIPPA)

On April 1, 2020 OTN was transferred into Ontario Health through the Connecting Care Act, 2019; as such, all rights, and obligations of OTN transferred to Ontario Health. Ontario Health is designated as a FIPPA institution as per the FIPPA Regulations and as such is subject to FIPPA. The purposes of FIPPA are:

1. to provide a right of access to information under the control of institutions in accordance with the principles that,
 - o information should be available to the public,
 - o necessary exemptions from the right of access should be limited and specific,
 - o decisions on the disclosure of information should be reviewed independently of the institution controlling the information; and
2. to protect the privacy of individuals with respect to personal information about themselves held by institutions and to provide individuals with a right of access to that information.

The data discussed in this review is under the control of health information custodians and thus is reviewed under the PHIPA framework in this Statement of Risk. However, all accompanying documentation related to the initiative may be subject to a Freedom of Information request

4.3 Other: *Canadian Anti-Spam Law (CASL)*

The solution utilizes alerts and messages by way of email/text. The current interpretation of the law does not allow a health information exemption so the program must meet the obligations as mandated by CASL.

Key findings of the PIAs

OH completed a total of 5 PIAs: 58 risks were identified of which 13 risks were identified as MEDIUM and the rest as LOW. OH has adopted a risk tolerance level of low meaning that all high and medium risks and the corresponding recommendations should be implemented prior to or in concert with this project's launch. The recommendations should reduce the risk ratings from High to Medium and from Medium to Low. The identified low risks should be mitigated within a reasonable time as determined by the Privacy Team. Risk rating used to assess the risk of each identified gap are available upon demand. OH has already closed some of the recommendations to an acceptable level and will continue to monitor the risk level to ensure it remains within the acceptable level as determined by the policy. The following table list the open risks identified by the PIAs and provides the current status as of June 30, 2020.



The PIA makes the following risks and recommendations:

#	Risk Level	Finding/Risk	Recommendation (s)	Status	Responsible Party
1	M	Authentication to access solution takes place in United States contrary to OH Cloud and Procurement Policy	<ul style="list-style-type: none"> • Policy allows for exemption to be provided by OH Vice-President • Include information on authentication on next update to Physician Terms; in interim add information to FAQs within solution 	Exemption obtained; FAQs in-progress	OH Privacy; Novari Health
2	L	Novari implemented a new video solution; has the solution been security tested?	OH conducting a Threat and Risk Assessment (TRA) and expect that it will address the risk	In Progress	OH Information Security
3	L	Novari is utilizing a new Uniform Resource Locator (URL) and need to determine if there is a collection of PI such as Internet Protocol (IP) address; has there been security testing conducted?	OH conducting a TRA and expect that it will address the risk	In Progress	OH Information Security
4	L	OH subject to FIPPA; must inform service providers of their obligations.	OH to advise all service providers	In Progress	OH Privacy; Novari Health
5	L	Changes to PHIPA now include new provisions for Consumer Electronic Service Providers (CESP); does the Novari solution fit into the definition?	OH to ask Novari to obtain a letter of opinion if eVPC solution qualifies as a CESP and if so, implement new requirements	In Progress	OH Privacy; Novari Health
6	L	OH used OntarioMD (OMD) as a service provider to remunerate physicians for the eVPC	OH to ask OMD to delete all physician banking information.	In Progress	OH Privacy; OMD



		program. This function is being transferred to The Ottawa Hospital; OMD should delete all confidential information and in particular physician banking information.			
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Contact

Please contact the Privacy Office should you have any questions:

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