

YOUR PRIVACY CHOICES AND RIGHTS

1. Give, withhold, withdraw, and reinstate consent for the collection, use and disclosure of your personal health information.
2. Access your personal health information for review or copy.
3. Request correction to your personal health information.
4. Be told if your personal health information is stolen, lost, or improperly accessed.

You may choose not to share your personal health information to other organizations or from other organizations electronically.

To opt-out please call:

**Integrated Assessment Record (IAR)
Consent Call Centre**
1-855-585-5279

QUESTIONS OR CONCERNS?

If you have any issues, concerns or complaints about how your health information is being handled, you have the right to contact:

Canadian Mental Health Association Simcoe County Branch

Privacy Officer
128 Anne St. South
Barrie, ON L4N 6A2
(705)726-5033

The Privacy Commissioner of Ontario

**Information and Privacy
Commissioner of Ontario**
2 Bloor Street East, Suite 1400
Toronto, ON M4W 1A8
(416) 326-3333 or 1-800-387-0073
<http://www.ipc.on.ca>

PRIVACY

AND YOUR PERSONAL HEALTH INFORMATION



A guide to the collection, use and sharing of your personal health information



Canadian Mental
Health Association
Association canadienne
pour la santé mentale

GAMBLING, SUBSTANCE USE & MENTAL HEALTH SERVICES

SHARING YOUR PHI

YOUR PERSONAL HEALTH INFORMATION (PHI)

Why is your personal health information collected?

Your Personal Health Information (PHI) is important in allowing us to provide you with better services. We only collect , use and disclose your PHI in order to provide care that suits your needs.

The following PHI may be collected from you, your family members, and other health care service providers and it will form part of your health record:

Physical and mental health

Demographics

Personal and family health history

Substance use

CMHA Simcoe County Branch uses a secure electronic health record system to collect, use and disclose your PHI to your health care provider(s) within the agency. This allows them to access the information quickly and securely to provide you with the right services.

Your PHI may be shared in order to:

- Provide health support and services based on your needs
- Make sure your providers have the most up-to-date and complete record of your health history and needs
- Help us see where there might be gaps or overlaps in your services

We ask for your express consent to share your PHI with other service providers and document this information in your health record. You may decide at anytime that you do not want your information shared and we will respect that decision and act accordingly.

However, there are some situations where we will have to share your information even if you have asked us not to do this. These situations include when:

- The **law requires or authorizes** us to do so, for example, a court subpoena;
- It is perceived that you may be a **threat to yourself or someone else.**
- There is a **child who may need protection** (e.g., abuse or neglect)

PRIVACY, SECURITY, AND YOUR PHI

The privacy and protection of your PHI is a priority, that is why:

Information is secure and restricted

- Your health information is kept in a secure place
- Your health information will only be viewed by authorized people who deliver your services
- All health services providers have signed contracts to keep your information confidential

Access is recorded

- When a person views your information, it is recorded in a log. This log is reviewed regularly to make sure there has been no unauthorized access to your information.
- Information is stored and/or disposed of according to the law

Suspected breaches are investigated

- We will investigate any suspected breach or unauthorized access to your personal health information

