 <p>Winnipeg Regional Health Authority    Office régional de la santé de Winnipeg</p> <p><b>Policy &amp; Procedure</b></p>	Policy Name: <b>Disposal Of Confidential Material, Including Personal Health Information</b>	Policy Number <b>10.40.090</b>	Page 1 of 2
	Approval Signature:	Department: <b>General Administration</b>	
	Date: May 31, 2000	Supercedes: New	

## 1.0 **PURPOSE:**

- 1.1 To safeguard during the disposal process, confidential material that has met the applicable retention criteria and is eligible for disposal/destruction.
- 1.2 To establish a process for the disposal/destruction of confidential material.
- 1.3 To dispose of or destroy personal health information in accordance with *The Personal Health Information Act* (Manitoba) (“PHIA”).

## 2.0 **DEFINITIONS:**

### 2.1 **Confidential Material** falls into two general categories:

#### 2.1.1 **Personal Health Information** – means 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 and any other identifying 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.

Traditionally, personal health information has been housed in the facility medical record, but may also be held in any type of file, document or report and may be in any type of medium (eg. paper, electronic format, microfilm, graphic, audio) in any department, division, program or service.

#### 2.1.2 **Corporate Information** - means:

- any information learned regarding an employee’s salary, work history or work performance except as released by the Corporate Office to comply with the Public Sector Compensation Disclosure Act,
- any information learned regarding an employee such as medical history, attendance at Employee Assistance Programs, home conditions, financial

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situation, demographics including home address and home telephone number, domestic difficulties or any other private matters which have been disclosed to staff in the course of business,

- any statistical or financial information learned regarding the WRHA which has not been authorized for release by the Corporate Office.

### **3.0 POLICY:**

- 3.1 All confidential material shall be disposed of by supervised incineration, shredding or other approved method.
- 3.2 Proper controls shall be developed and implemented in work units of all departments, divisions, programs and services to segregate confidential material from non-confidential and other waste streams.
- 3.3 The Privacy Officer may be consulted for advice on disposal through incineration, shredding or other approved method of disposal of pre-sorted confidential material.
- 3.4 All confidential material requiring disposal shall be stored, transported, shredded or incinerated in a secure manner.

### **4.0 PROCEDURE:**

Staff in departments, divisions, services and programs shall process confidential material as follows:

- pre-sort by placing in designated containers;
- package securely for pick up and/or storage until incineration or shredding;
- clearly identify and label as 'Confidential Waste'. Containers shall not be loaded to the point where the container will rip or tear, or be unmanageable due to weight;
- direct questions regarding confidential material segregation and/or identification to the Privacy Officer.

**THIS PROCEDURE SECTION MAY BE CUSTOMIZED BY EACH FACILITY.**