Nova Scotia
Drug Information System

Privacy and Confidentiality

Presentation Details:

Slides: 18

Duration: 00:25:39

Filename: DIS Module2.Privacy.ppt

Presenter Details:
### Slide 1

**Nova Scotia Drug Information System**

Duration: 00:00:51  
Advance mode: Auto

**Notes:**

Health care professionals are required by provincial and federal legislation (Acts and regulations), case law, and organizational privacy and security policies to maintain patient confidentiality and to safeguard personal health information in a private and secure manner. Regulated health care professionals have additional obligations regarding confidentiality and privacy that are imposed by their Codes of Ethics and Standards of Practice. This module will focus on the privacy and confidentiality requirements imposed by the provincial Personal Health Information Act (PHIA) as they relate to the Drug Information System.

### Slide 2

**Learning Outcomes**

Duration: 00:00:55  
Advance mode: Auto

**Notes:**

Learning Outcomes

At the completion of this module you will be able to:

- Recognize what is ‘personal health information’ and ‘health care’; who are ‘custodians’ and ‘agents’ and what is a ‘circle of care’
- Describe the requirements for consent for the collection, use and disclosure of personal health information in the Drug Information System
- Identify potential privacy and confidentiality issues associated with using the Drug Information System
- Convey what is meant by ‘masking’ a...
<table>
<thead>
<tr>
<th>Slide 3 🎨</th>
<th></th>
<th><strong>Notes:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Personal Health Information Act</strong></td>
<td></td>
<td>The Personal Health Information Act (PHIA) governs the collection, use, disclosure, retention, disposal and destruction of personal health information. PHIA was proclaimed by the government of Nova Scotia on December 4, 2012 and came into force on June 1, 2013. Of importance to dispensary staff are the limits that are placed on the collection, use and disclosure of personal health information that will be contained in the Drug Information System. Dispensary staff need to remember that they can only use or disclose medication profile information for the purposes it was collected – for providing, supporting and managing health care.</td>
</tr>
<tr>
<td><strong>Duration:</strong> 00:00:51</td>
<td><strong>Advance mode:</strong> Auto</td>
<td></td>
</tr>
</tbody>
</table>
PHIA recognizes both the right of individuals to protect their personal health information and the need of custodians and agents to collect, use and disclose personal health information to provide, support and manage health care. The terms “personal health information”, “custodian”, “agent” and “health care” are defined in the Act.

Personal health information is defined as identifying information about an individual and includes information that:

- relates to the physical or mental health of the individual, including information that consists of the health history of the individual's family,
- relates to the application, assessment, eligibility and provision of health care to the individual, including the identification of a person as a professional of health care to the individual,
- relates to payments or eligibility for health care in respect of the individual,
- is the individual's registration information, including the individual's healthcard number, or
- identifies an individual's substitute decision-maker.

The definition of personal health information includes both recorded and verbal forms of information, whether the person is living or deceased. Therefore all information included in the Drug Information System is considered personal health information.

Custodians

A custodian is an individual or organization who has custody or control of personal health information as a result of or in connection with performing the person's or organization's powers.
or duties. A custodian is a person who has responsibility for safeguarding personal health information. Custodians include:

(i) a regulated health professional or a person who operates a group practice of regulated health professionals
(ii) a pharmacy licensed under the Pharmacy Act
(iii) the Minister of Health and Wellness

The Minister of Health and Wellness is the custodian of the personal health information contained in the Drug Information System.

Pharmacies and pharmacists are also considered custodians of personal health information. However, the actual person(s) appointed as the custodian for a particular pharmacy(s) will depend on the corporate structure of that pharmacy.

(Please see PHIA for other types of custodians.)

Agents

Dispensary staff who are not considered the custodian for a particular pharmacy are still responsible for safeguarding privacy and security of personal health information as agents. An agent is someone who acts for or on behalf of a custodian and includes employees.

In keeping with their professional responsibilities, pharmacy managers and pharmacists are also accountable for the activities of unregulated dispensary staff in their pharmacy regarding the Drug Information System.

Health care

The definition of "health care" in PHIA includes:

The compounding, dispensing or selling of a drug, health care aid, device, product or equipment or other item to an individual for the use of an individual, under a prescription.
Notes:

In the context of the Drug Information System, when dispensary staff are providing health care to patients, they are considered to be within a patient's circle of care. In those situations, dispensary staff may rely on the patients' knowledgeable implied consent for the collection, use and disclosure of personal health information in the Drug Information System.

However, in certain specific circumstances express consent from patients is required to collect, use or disclose information in the Drug Information System.

Express Consent

Express consent is the explicit communication of agreement or permission for the collection, use and disclosure of personal health information. Express consent can be given either verbally (such as a patient saying: “Yes, you can check my information in your computer”) or in writing (such as signing a consent form).

You must receive express consent from an individual to access their medication profile in cases when:

a. the individual is not currently a customer of your pharmacy, and
b. the encounter does not result in a subsequent
medication dispense, update or addition to existing information on the individual's profile (i.e. you are merely viewing their information).

In those situations you are requested to add an electronic patient note explaining the reason for your access.

Knowledgeable Implied Consent

While “knowledgeable implied consent” sounds complicated, it is easier to understand when it is broken down into its parts.

"Implied consent" is consent that can be assumed through a person’s actions. For example, if a pharmacist asks a patient if she can check their blood pressure and the patient holds out her arm, it is implied that the patient is giving consent for the blood pressure check.

Consent is considered to be “knowledgeable” when it is reasonable to believe that the patient is aware of:

(a) the purpose of the collection, use or disclosure of their personal health information; and

(b) the fact that s/he has the right to decide to give consent or to withhold consent.

It is reasonable for dispensary staff to believe that patients are 'knowledgeable' if their pharmacy has followed the proper notification requirements found in PHIA - posting an appropriate notice to the public. In most day-to-day interactions, dispensary staff will be able to rely on patients' knowledgeable implied consent and therefore not have to obtain verbal or written consent.

Circle of Care

To collect, use or disclose an individual's personal health information, you must be within that individual's circle of care. The circle of care refers to custodians or agents who provide or
For dispensary staff, that means that you cannot access an individual’s medication profile unless the individual is a patient of the pharmacy at the time of the collection, use or disclosure (unless the patient otherwise gives you express consent). Furthermore, as noted earlier, you can only access or use this personal information for the purpose it was collected - for patient care.

You also need to be aware of a patient’s circle of care if you are asked to disclose information from the Drug Information System to another health care professional.

In those instances it is necessary to establish that the requesting health care professional is also within the patient’s circle of care. Therefore, prior to providing information you must validate:

(i) the identity of the health care professional; and

(ii) that the patient is under the care of this health care professional at the time of the request.

---

**Slide 6**

**Scenario #1**

Duration: 00:01:48

Advance mode: Auto

Notes:

To help you apply the information you've received thus far in this module, two scenarios are provided to illustrate instances involving access to the Drug Information System by dispensary staff.

**Scenario #1**

Bob lives in Antigonish Nova Scotia and works as a pharmacy assistant at Small's Pharmacy. A few years ago Bob and a personal friend Samantha opened a business “Stuff and Such”. In the course of their business and personal
lives, Bob and Samantha would speak freely with each other about their families, health and vacations etc. In addition, Samantha would fill some of her prescriptions at Small's Pharmacy. About a year and half ago, Bob and Samantha decided to close their Stuff and Such business due to a downturn in the economy. Samantha then moved from Antigonish to Halifax.

A few months after the Drug Information System was implemented in Small's Pharmacy, Bob decided to view Samantha's medication profile to just “check on her health situation.” To gain access to her profile, Bob selected the access code “patient care”.

Upon review of Samantha's medication drug profile, Bob noted that her new pharmacist had entered details about a medical condition that Bob was not aware of. Over the next six months, Bob “monitored” Samantha’s medical condition by often viewing her patient record in the Drug Information System.

About a year later, during a conversation with Samantha, Bob inadvertently mentions her medical condition. Samantha becomes very upset that Bob is aware of this information.

Did Bob do anything wrong?
There are a number of issues with Bob's behavior in this situation.

First, Bob did not have consent to access Samantha's medication profile in the Drug Information System. He obviously did not have express consent and he could not use knowledgeable implied consent in this circumstance.

Knowledgeable implied consent can only be used in situations where the information is accessed for the purposes for which it was collected. Bob did not access Samantha's medication profile for the purposes of providing, supporting or managing patient care. He accessed it because he was being curious.

Second, Samantha was not a patient of the pharmacy or requesting service when Bob accessed the records so he was not a custodian within her “circle of care” at that time.

Third, Bob was fraudulent in entering the access code for patient care when that was not the real reason for accessing Samantha's medication profile in the Drug Information System.
Notes:
Pharmacist Joanne in Digby N.S. gets a call from Dr. Joe on a Monday morning. Joanne and Joe are both from Digby and have known each other since childhood. Dr. Joe has a new patient Mr. Veinot who is 84 years old and has recently moved from Bridgewater to Digby to be near his children. Dr. Joe is seeing Mr. Veinot at the time of the call and is trying to determine which medications he is currently taking. Mr. Veinot has not had any prescriptions filled at Joanne’s pharmacy. Dr. Joe is aware that Joanne now has access to the Drug Information System, but Dr. Joe does not have access. Dr. Joe asks Joanne if she could give him the information from Mr. Veinot’s medication profile.
Can Pharmacist Joanne divulge this information to Dr. Joe?

Notes:
According to PHIA, there are instances when personal health information can be accessed by a custodian and disclosed to another custodian without express consent of the patient - by relying knowledgeable implied consent. Pharmacists and physicians fall within the definition of custodian in the Act. However, in order to rely on knowledgeable implied consent, the custodian accessing and disclosing the information must be within the “circle of care” for that patient. In this case, Mr. Veinot is not a patient / customer of Joanne and therefore she is not within his circle of care.
In order for Joanne to access Mr. Veinot’s Drug Information System, she must have express consent from Mr. Veinot. The conversation with Mr. Veinot can suffice, and a patient note explaining reason for access should be added.
Information System profile and disclose that information to Dr. Joe, she would have to get express consent from Mr. Veinot. While obtaining express consent sounds very onerous, a simple conversation between Mr. Veinot and Pharmacist Joanne would be sufficient for him to give his consent to her.

If Pharmacist Joanne obtains express consent she should record this. She should add a patient note to Drug Information System profile explaining the reason for her access.
Inappropriate and unauthorized access

Notes:
There are a number of processes in place which can identify instances of inappropriate and unauthorized access to personal health information contained in the Drug Information System. The Drug Information System has been designed to record details of all user activity in an audit log. Processes have been implemented to ensure that this audit log is reviewed for indications of inappropriate and unauthorized access. In addition, patients can request a report to determine who accessed their information in the Drug Information System and when this access occurred.

Masking (consent directives)

Notes:
Under PHIA, a patient has the right to "mask" or disallow access to the information in their Drug Information System profile. To mask their information, the patient must make a consent directive request to the Privacy and Access Office in the Department of Health and Wellness. Once a consent directive is in place, all information in the patient's profile, except demographic information, is masked. While prescriptions monitored under the Prescription Monitoring Act will be masked in the Drug Information System in the same way as
other prescriptions, these prescriptions will still be transmitted to the Prescription Monitoring Program. As a result, prescriptions for monitored drugs can be viewed through the PMP eAccess secure web viewer even though the patient's profile is masked.

Individuals who make a consent directive request will be advised of the possible impacts of doing so. Questions about how to request masking of a profile or the possible impacts of masking, should be directed to the Privacy and Access Office.

Please note: Even though a patient can limit or prevent access to their medication profile, if they wish to have a prescription dispensed, they cannot prevent that prescription from being sent to the Drug Information System. Disclosure of prescriptions to the Drug Information System is required by law under the Pharmacy Act.

**Slide 12**

**Accessing a masked profile (Override)**

**Notes:**

Accessing a masked patient profile (otherwise known as overriding a consent directive) can only occur in two specific situations: (a) if the patient provides consent; or (b) if it is an emergency.

The next two slides provide more information about each situation.
Notes:

There may be situations where a patient has masked their Drug Information System medication profile, but they permit a particular pharmacy to access their profile when dispensing a prescription. In that case, the patient must provide express consent to override their consent directive. Only a regulated health care professional has the authority to override a consent directive. The regulated health care professional will transmit the override reason code of “professional judgment” to access the profile in the Drug Information System. Please note- Although the name of the reason code suggests that professional judgment can be used when deciding to override a masked profile, it is VERY important to understand that this code can only be used when a patient has given express consent for the override.

When the override reason code is transmitted to the Drug Information System, the patient’s profile will be displayed for this interaction only. At this point, dispensary staff in the patient’s circle of care may also view the profile under the authority of the regulated health care professional.

It is important to know that any override of a consent directive will be flagged for audit by a Privacy Auditor and pharmacies may be required to confirm they had the patient’s consent to access their profile.
Accessing masked profile-Emergency

Duration: 00:01:15
Advance mode: Auto

**Notes:**

Emergency

A masked profile in the Drug Information System can also be accessed in another situation – an emergency. Emergency access is only permitted when the patient is in need of healthcare and accessing the Drug Information System will avert or minimize an imminent and significant danger to the health or safety of a patient.

It is VERY unlikely that community pharmacists will need to access a masked profile for emergency reasons. It is really intended for use in true emergency situations so hospital emergency departments can access Drug Information System profiles. In those cases, the regulated health care professional would transmit the override reason code “emergency” to the Drug Information System. The masked profile will be displayed for that interaction only.

A Patient Note should be used to document the reason for accessing the masked profile in this type of situation. Any access of a masked Drug Information System profile in an emergency will be flagged for audit.
### Slide 15
**Quiz**
Duration: 00:00:06
Advance mode: Auto

**Notes:**
The next slide will test your knowledge of the information provided in this module.

### Slide 16
**Consent Quiz**
Duration: 00:00:00
Advance mode: Auto

**Notes:**
1. You need to obtain express consent from an individual to access their Drug Information System medication profile when:
   - Your pharmacy has posted a Privacy notice and a regular patient/customer drops off a new prescription.
   - You wish to view the medication profile of a person (who is not a patient / customer of the pharmacy) without dispensing a medication or adding any new information to the profile.
   - A patient with a masked medication profile wants you to dispense his medication.
   - A physician calls you asking for information about an individual who is not a patient / customer of your pharmacy.

Answer:
- You wish to view the medication profile of a person (who is not a patient / customer of the pharmacy) without dispensing a medication or adding any new information to the profile.
- A patient with a masked medication profile wants you to dispense his medication.
- A physician calls you asking for information...
<table>
<thead>
<tr>
<th>#2</th>
<th>Express consent must be obtained in writing.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Answer:</td>
<td>False. Express consent can be given verbally or in writing.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#3</th>
<th>Consent is considered to be knowledgeable if your customer is aware that your pharmacy is connected to the Drug Information System.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Answer:</td>
<td>False. Consent is considered to be &quot;knowledgeable&quot; when it is reasonable to believe that the patient is aware of:</td>
</tr>
<tr>
<td></td>
<td>(a) the purpose of the collection, use or disclosure of their personal health information; and</td>
</tr>
<tr>
<td></td>
<td>(b) the fact that s/he has the right to decide to give consent or to withhold consent.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#4</th>
<th>You can use knowledgeable implied consent to access a patient’s medication profile in the Drug Information System when:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Answer:</td>
<td>- disclosing information to another health care professional if both you and the requesting health care professional are within the patient’s circle of care (and the patient's profile is not masked).</td>
</tr>
<tr>
<td></td>
<td>- your pharmacy has posted the PHIA notice and an existing patient provides a prescription or requests a service.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#5</th>
<th>All overrides of masked medication profiles will be subject to audit.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Answer:</td>
<td>True. All overrides of masked profiles (whether the reason for overriding was patient consent or</td>
</tr>
<tr>
<td>Slide 17</td>
<td>Patient Requests</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>Duration:</strong> 00:01:55</td>
<td><strong>Introduction</strong> Under PHIA, an individual has the right to access their record of personal health information held by a custodian. Individuals may also request copies of reports, that corrections be made to their information or voice concerns about privacy issues regarding their personal health information. In these instances, individuals should be directed to the Department of Health and Wellness Privacy and Access Office. Information about how to contact the Privacy and Access Office will be included on patient brochures provided to your pharmacy.</td>
</tr>
<tr>
<td><strong>Advance mode:</strong> Auto</td>
<td><strong>Record of User Activity Report</strong> A record of user activity is a report produced at the request of an individual for a list of users who accessed their personal health information in the Drug Information System during a specified time period. This report is provided by the Privacy and Access Office.</td>
</tr>
<tr>
<td></td>
<td><strong>Personal Health Information Record</strong> A copy of an individual's personal health information record stored in the Drug Information System is also available to patients upon request. This report is provided by the Privacy and Access Office.</td>
</tr>
</tbody>
</table>
### Corrections
Individuals who believe that their information in the Drug Information System is incorrect, may request that a correction be made to that information. This request is made to the Privacy and Access Office.

### Complaints
Individuals can also make complaints about privacy issues regarding their personal health information to the Privacy and Access Office.

---

**Slide 18 📂**

**Summary**

Duration: 00:01:38

Advance mode: Auto

**Notes:**

In this module, we focused on the privacy and confidentiality requirements of the Personal Health Information Act (PHIA) as they relate to the Drug Information System. You learned the definitions of important terms such as: personal health information; custodians, agents, circle of care and health care. You also learned that there are two types of consent that are required in order to access an individual's personal health information: express consent and knowledgeable implied consent. You also learned which type of consent should be used in what circumstances. You were provided with two real-life scenarios to help you understand the requirements for consent and the types of situations that are considered inappropriate access to the Drug Information System.

You are now aware that patients can make a consent directive request to have their Drug Information System medication profile masked and that there are only two specific situations...
where consent directives can be overridden. You also know to direct patients to the Privacy and Access Office if they request reports about what information is in their profile, who accessed their profile; or if they wish corrections be made to their profile or if they have privacy complaints.

The next module in this series focuses on the two registries of demographic information that are fundamental to the operation of the Drug Information System: the provincial Client Registry and the Provider Registry.