



## QUINTE HEALTHCARE CORPORATION

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### Corporate - Procurement of Third Party Service Providers Privacy Requirements

<b>Title: Corporate – Procurement of Third Party Service Providers Privacy Requirements</b>		<b>Policy No:</b>	<b>2.11.46</b>
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<b>Manual:</b>	<b>Administration</b>	<b>Approva Date:</b>	March 11, 2021
<b>Department:</b>	<b>Corporate</b>	<b>Policy Lead:</b>	Chief Privacy Officer
<b>Approved By:</b>	<b>Leadership Committee</b>		

#### 1. POLICY

##### 1.1 Overview

This policy and its associated procedures will enable Quinte Health Care (QHC) to meet its obligations under the *Personal Health Information Protection Act, 2004* (PHIPA) as well as the Ministry of Government Services Broader Public Sector Procurement Directive (2011).

##### 1.2 Purpose

The purpose of this policy is to ensure that QHC assesses the privacy risks associated with its procurement of third party service providers who may have access to personal information or personal health information, and executes agreements with third party service providers that include appropriate privacy and security provisions.

##### 1.3 Scope

This policy applies to QHC’s relationships with third party service providers in which the providers will have access to personal health information in the course of providing services to QHC.

#### 2. POLICY

##### 2.1 Privacy Risk Assessment of Potential Contractors

**2.1.1** Prior to undertaking any procurement of goods and/or services that may result in the release of personal information or personal health information, QHC must conduct a risk assessment that includes a Privacy Impact Assessment (PIA) of potential risks associated with the use of a third party for the procured services.

**2.2 Agreements Prior to access to Personal Health Information**

**2.2.1** QHC will execute agreements with all third party service providers for services before providing the third party service provider with access to PHI, or to environments where employees of the service provider may have access to PHI.

**2.2.2** Key terms in the agreement will include:

- a) Third party service providers with access to personal health information will be subject to the same conditions, where applicable, as QHC employees regarding the handling of personal health information.
- b) The Privacy Officer will ensure that agreements with a third party service providers that have access to PHI:
  - Describe the purposes and associated services for any access (including incidental access) of service provider employees to PHI:
  - Identify the service provider's privacy responsibilities related to the service provided:
  - Obligate the service provider to meet all obligations in QHC's privacy policy that apply to the activities of the service provider employees;
  - Specify privacy and security terms for the exchange of information between QHC and the service provider, if applicable;
  - Include the right of QHC to audit the service provider to ensure that specified privacy and security safeguards and service delivery terms have been implemented as required in the agreement with the service provider

**2.2.3 Provisions regarding controls in agreements with third party service providers**

a) The Privacy Officer will ensure that provisions addressing the following controls and related procedures are included in agreements with third party service providers where relevant to protect the privacy of PHI, or that service providers are mandated to comply with the QHC Information Security Policy and Procedures:

- Physical protection controls
- Protection against malicious software
- Controls to ensure the return or destruction of information and assets at the end of, or at an agreed point in time during, the agreement
- Restrictions on copying and disclosing information
- Privacy and security awareness training provided by the service provider for all service provider employees
- Change management procedures for software and systems
- Access control policies and procedures that indicate
  - All reasons for access to systems and to personal health information by agents of the third party service provider
  - Permitted access methods
  - User authorization methods
  - The requirement to maintain a list of all users with access to the system and to personal health information
  - A process for revoking access rights

### **3. ROLES AND RESPONSIBILITIES**

The Privacy Officer develops, maintains and reviews this policy.

The Leadership Committee approves this policy.

### **4. ENFORCEMENT**

Breaches of this policy and related privacy policies may be subject to disciplinary action, up to and including termination. QHC and its agents are also subject to the fines and penalties set out in PHIPA.

### **5. POLICY MAINTENANCE**

While this policy is expected to be long-term changes will be needed to keep it up to date with the changes in internal and external environment. This policy should be reviewed on a periodic (at least annually) basis, which will drive any changes to this policy.

## **APPENDICES AND REFERENCES**

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