

**Holland Bloorview Kids Rehabilitation Hospital Research Ethics Board (REB)  
Standard Operating Procedures**

	<b>GENERAL ADMINISTRATION</b>		
<b>POLICY: REB-108</b>	<b>USES AND DISCLOSURES OF PROTECTED HEALTH INFORMATION</b>		
<b>Responsibility for executing this policy:</b>	Director, Research Operations, Bloorview Research Institute and Chair, Holland Bloorview REB (or designate)		
<b>Approval authority:</b>	Research, Teaching & Learning Advisory Committee (RTLAC) of the Holland Bloorview Board of Trustees		
<b>Effective Dated:</b>	September 30, 2014	<b>Supersedes documents dated:</b>	V2: February 2012
<b>Approved:</b>	Chair of the REB Research, Teaching & Learning Advisory Committee		

## 1. PURPOSE

The purpose of this SOP is to describe the safeguards to protect the privacy of personal information, defined by the Ontario Freedom of Information and Protection of Privacy Act as “recorded information about an identifiable individual”, disclosed to the REB by staff and students of the various covered entities of Holland Bloorview Kids Rehabilitation Hospital.

## 2. POLICY

It is the policy of the REB Office that personal information will be used and disclosed in a manner that respects an individual’s right to privacy, and in accordance with federal and provincial privacy regulations and applicable laws.

REB members and REB Office staff shall comply with relevant REB and Holland Bloorview policies that relate to privacy and confidentiality.

## 3. SPECIFIC POLICIES

### 3.1. Use and disclosure by REB Office

REB Office staff are permitted to receive personal information from a Holland Bloorview Kids Rehabilitation Hospital entity and use or disclose such PHI for purposes necessary for the review, approval, ongoing monitoring and auditing of REB protocols.

If REB staff use or disclose personal information for purposes other than REB review as described above, they must consult with the Privacy Officer at Holland Bloorview, prior to such use or disclosure.

## REFERENCES

Ontario Personal Health Information Protection Act  
Freedom of Information and Protection of Privacy Act

CAN/CGSB-191.1-2013 – (4.3.4.7)  
Holland Bloorview Organizational Policies :00145, 00148, REB-303

CAN/CGSB-191.1-2013 – (4.2.3.3 (b))

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**3.2. Safeguarding PHI from Prohibited Access**

REB staff must adopt reasonable safeguards to ensure that members of its workforce protect personal information from unauthorized access. REB staff who receive personal information for REB review activity shall not share such personal information with any person, including any other member of the workforce of the REB itself or REB members, that does not require such personal information for such activity.

**3.3. Minimum necessary**

REB staff should receive from Holland Bloorview entities only the amount of personal information reasonably necessary to provide services. If REB staff are receiving more personal information than is reasonably necessary, the REB Chair, or designate, shall promptly notify the Holland Bloorview Privacy Officer.

**3.4. Training**

Training on the policies and procedures set forth in this document must be provided for the existing workforce of the REB Office, to the extent applicable to such workforce members.

CAN/CGSB-191.1-2013 –  
(4.2.4.2 (c))

New members of the workforce of the REB Office will receive such training, to the extent applicable to such workforce members, within a reasonable period of time of joining the REB Office.

Revision History

V3/July 2014: CAN/CGSB-191.1-2013 references incorporated to reflect compliance. Changed Research Advisory Committee to Research, Teaching & Learning Advisory Committee. Revised section 2: clarified that REB staff and members must comply with REB and institutional privacy policies.