

<p style="text-align: center;">Privacy Policy Privacy Breach Response</p>

Policy Purpose:

The purpose of this policy is to provide employees or contracted physicians of the Department of Health and Social Services and the Regional Health and Social Services Authorities with direction regarding appropriate response to a privacy breach. A privacy breach is an unlawful disclosure of personal information.

Application:

This policy covers information that is documented in hard copy or in any other media format, including electronic media, audio or videotape and any other new and emerging technologies that may be used in the delivery of medical care services. This policy applies to employees and contracted physicians of the Department of Health and Social Services and the NWT Regional Health and Social Services Authorities.

Policy Statement:

On occasion, healthcare professionals may discover that a breach of personal privacy has occurred. The privacy breach may have occurred accidentally or deliberately and it may relate to a single person's personal information or to a group of individuals. The breach may involve client information or the personal information of an employee or contractor. The response actions should be the same.

The policy identifies the actions and steps to be undertaken to mitigate the breach in a timely and efficient manner.

Policy Requirements:

Health professionals should immediately notify their superior and the breach response designate of the breach. The breach response designate should complete the following steps:

- Evaluate the scope of the breach to determine the extent of information that has been breached. This should include,
 - The number of people affected by the breach
 - What information / data elements were breached;
- Determine the mitigation strategy and response to the breach
 - Determine if other public bodies or outside agencies need to be informed;
 - Determine if the breach requires consultation with Legal Counsel;
 - Determine method to prevent further breaches;
- Notify affected individuals with a formal letter that should include,
 - The information about them that was breached, and
 - The contact information including name, address and phone number, of someone at the Regional Health and Social Services Authority or the Department, who can answer any additional requests that they may have;

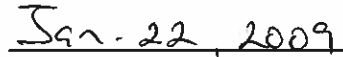
Policy Requirements cont'd:

- Create a record of the breach that should include:
 - Steps taken to respond to the breach, and
 - A strategy for ensuring the breach does not re-occur.

Approval and Effective Date:



Chad Fehr, CEO



Date