



**NutriProCan**

(Nutrition Professionals of Canada Inc.)

## Privacy Policy

The privacy of personal and health information is an important principle for NutriProCan. We are committed to collecting, using and disclosing personal information responsibly and only to the extent necessary for the services we provide. We try to be open and transparent about how we handle personal information. This document describes our privacy policies.

### What is Personal Health Information?

Personal health information (PHI) is information about an identifiable individual. Personal health information includes information that relates to:

- the physical or mental health of the individual (including family health history)
- the provision of health care to the individual (including identifying the individual's health care provider)
- a plan of service under the Home Care and Community Services Act, 1994
- payments or eligibility for health care or coverage for health care
- the donation or testing of an individual's body part or bodily substance
- the individual's health card number
- the identification of the individual's substitute decision-maker.

### Who We Are

Our organization, NutriProCan is a nutrition counselling services provider with fewer than 30 team members. We use a number of subcontractors, consultants and agencies who may, in the course of their duties, have limited and supervised access to personal health information we hold. These may include consulting dietitians, IT and software providers, office security and maintenance personnel, bookkeepers and accountants, legal counsel, temporary workers, credit card processors, website support and other service agencies.

All subcontractors and service providers are required to follow appropriate privacy and security practices, and we obtain assurances, contractual or otherwise, that they comply with PHIPA and with our privacy expectations.

### **We may collect the following information:**

- Name
- Address and other contact information
- Occupation/profession
- Employer
- Credit card or other payment information
- Age
- Health history of the individual Family health history
- Health measurements, samples or examination results
- Health conditions, assessment results or diagnoses
- Health services provided to or received by the individual
- Prognosis or other opinions formed during assessment and treatment • Compliance with assessment and treatment

## **Why We Collect Personal Health Information**

We collect, use and disclose personal information in order to provide safe, effective and high-quality services to our clients.

**Our primary purpose** for collecting PHI is to provide nutrition counselling and third-party nutrigenomic testing services. This includes collecting information about a client's health history, including their family history, physical condition and function and social context in order to help us assess what their health needs are, to advise them of their options and then to provide the health care they choose to receive.

**A second primary purpose** is to obtain a baseline of health and social information so that in providing ongoing health services, we can identify changes that are occurring over time. We also collect, use and disclose PHI for related or secondary primary purposes, including:

### **Related Purpose #1: Payment**

To obtain payment for services or goods. The payment may be obtained from the individual or a third party, depending on the individual's situation.

### **Related Purpose #2: Quality Improvement and Risk Management**

To review client files to ensure we provide high-quality services, including assessing our staff's performance. External consultants (such as auditors, lawyers, practice consultants) may conduct audits and quality improvement reviews on our behalf under strict confidentiality obligations.

### **Related Purpose #3: Regulatory Compliance**

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To comply with external regulators. Our professionals are regulated by the provincial Colleges of Dietitians, which may inspect our records and interview our staff as part of their regulatory activities under their public-interest mandate. The Colleges of Dietitians have their own strict confidentiality and privacy obligations. In addition, as professionals, we may report serious misconduct, incompetence, or incapacity of other practitioners, whether they belong to other organizations or to our own. Also, our organization believes that it should report information suggesting illegal behaviour to the authorities. In addition, we may be required by law to disclose personal health information to various government agencies (e.g., the Ministry of Health, children's aid societies, the Canada Customs and Revenue Agency, the Information and Privacy Commissioner, etc.).

#### **Related Purpose #4: Education**

To support the training and development of our staff and students. Client records may be reviewed in a controlled and confidential manner for educational purposes about the provision of health care.

#### **Related Purpose #5: Business Continuity**

If the organization or its assets were to be sold, a potential purchaser may review records under strict confidentiality agreements as part of a due-diligence process. The potential purchaser must first enter into an agreement with the organization to keep the information confidential and secure and not to retain any of the information longer than necessary to conduct the due diligence. If a sale is completed, the organization may transfer records to the purchaser, but it will make reasonable efforts to notify the individual before doing so.

#### **Other Uses of Collecting Personal Information (non-PHI)**

We may use individual non-health personal information (such as name and email address) to inform you about our business, new services, blog posts, seminars, or other events we offer. Opt-out mechanisms are available to stop receiving these informational or promotional emails at any time.

## **Protecting PHI and Personal Information**

We understand the importance of protecting personal information. For that reason, we have taken the following steps:

- We conduct a careful review of our platform and system vendors and always choose a PHIPA-compliant or equivalent system when available and required
- All electronic personal health information (PHI) is stored in secure, cloud-based systems that meet industry standards for privacy and security. Access to these systems is made through each team member's dedicated

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device configured with appropriate security settings and authentication. practices. All system access is restricted to authorized personnel and protected through strong authentication measures, including strong passwords and, where available, multi-factor authentication.

- NutriProCan uses Practice Better as our secure, cloud-based practice management system. Clients access Practice Better via a mobile app or a web browser, using their own secure, individual profiles. Within the platform, clients can attend video counselling sessions, view and update personal information, access nutrition plans, educational materials, and recipes, and make payments.
- Practice Better also supports appointment scheduling, reminders, and secure messaging. It is the primary system we use for booking and paying for appointments, delivering and accessing services, maintaining client records, and conducting our clinical work.
- Practice Better is designed to meet PHIPA and PIPEDA requirements. Personal health information (PHI) within the platform is encrypted during transmission and while stored in the system's secure cloud environment.
- Mobile devices may display limited, non-identifiable information such as a client's first name and last initial for scheduling or appointment-management purposes. Personal health information (PHI) is not stored on mobile devices.
- When working from home or other flexible locations, team members access personal health information (PHI) only through our secure, cloud-based systems using secure internet connections. PHI is not stored or transported on laptops or other devices.
- If paper records are used, they are kept to a minimum. Any physical documents are stored securely in a locked or restricted area and are accessible only to authorized team members.
- Paper information is transferred through sealed, addressed envelopes or delivered in person.
- Our staff members are trained to collect, use, and disclose personal information only as necessary to perform their duties and in accordance with this privacy policy and the professional standards set by the colleges of dietitians in the provinces where we operate.
- External consultants and agencies with access to personal information must enter into confidentiality agreements with us.

## Retention and Destruction of Personal Information

We retain personal information for a period of time to ensure that we can answer any questions you might have about the services provided and to meet our accountability obligations to regulatory bodies. We keep our client files for at least ten years from the date of the last client interaction or from the date the client turns 18, whichever is longer.

Paper records containing personal health information are destroyed by cross-cut shredding. Electronic records stored within our secure, cloud-based systems are deleted in a manner that prevents recovery. When hardware is retired, any data stored on the device is securely erased, or the device is physically destroyed to ensure information cannot be retrieved.

## Access to Records

With limited exceptions, clients have the right to access the personal information contained in their records. Upon request, the organization will provide access by allowing the client to view the record or by providing a copy, as appropriate in the circumstances. Staff can assist clients in identifying relevant records and in understanding any terminology, abbreviations, or technical language used. Identity verification may be required before access is granted.

We may ask you to put your request in writing. The organization will respond as promptly as possible and generally within 30 days. If access cannot be provided, the client will be informed of the reason.

Clients who believe that their record contains an error may request a correction. Correction requests apply to factual information and not to professional opinions. Documentation may be required to demonstrate that an error exists. When a correction is accepted, the record will be amended, and upon request and where reasonably possible, any third parties who previously received the incorrect information will be notified. If a correction request is denied, a brief statement of disagreement provided by the client will be added to the record.

## If there is a Privacy Breach

The organization takes precautions to prevent any breach of client privacy. If there is a loss, theft, or unauthorized access to personal health information (PHI), affected individuals will be notified.

Upon learning of a possible or confirmed breach, the organization will take immediate steps to contain the incident, which may include:

- retrieving any hard-copy records that may have been disclosed
- confirming that no copies have been made or retained
- taking steps to prevent further unauthorized access to electronic information (e.g., changing passwords, restricting access, or temporarily disabling systems)

Affected individuals will be notified and provided with contact information for further questions. Where required, the organization will also provide the contact information for the Information and Privacy Commissioner of Ontario.

The organization will investigate and remediate the breach by:

- conducting an internal review of the incident
- determining what additional safeguards or policy changes may be required
- ensuring staff receive appropriate training, including additional training if necessary

Depending on the nature and severity of the breach, the organization may notify the Information and Privacy Commissioner of Ontario and cooperate with them. The organization may also report the breach to the relevant regulatory college if there is reason to believe it resulted from professional misconduct, incompetence, or incapacity.

Depending on the circumstances of the breach, the organization may notify and cooperate with the Information and Privacy Commissioner of Ontario. The organization may also report the breach to the relevant regulatory college if there is reason to believe it resulted from professional misconduct, incompetence, or incapacity.

## Do You Have Questions or Concerns?

Our Data Protection Officer, Lisa Spriet, can be reached at: 1.877.672.1622 or at [lisa@nutriprocan.ca](mailto:lisa@nutriprocan.ca).

She will attempt to answer any questions or concerns you might have. If you wish to make a formal complaint about our privacy practices, you may do so in writing to our Privacy and Data Protection Officer. She will acknowledge receipt of your complaint, and ensure that it is investigated promptly and that you are provided with a formal decision and reasons in writing.

You also have the right to complain to the Information and Privacy Commissioner of Ontario if you have concerns about our privacy practices or how your personal health information has been handled, by contacting:

**Information and Privacy Commissioner/Ontario**

2 Bloor Street East, Suite 1400 Toronto, Ontario M4W 1A8

Telephone:

Toronto Area: (416) 326-3333 Long Distance: 1 (800) 387-0073 (within Ontario)

This document is modified from the College of Dietitians resource:

<https://www.collegeofdietitians.org/resources/privacy-and-confidentiality/hipa-a-guide-2013.aspx>