

PRIVACY STATEMENT

Dr. Rappaport is committed to protecting your privacy and ensuring the confidentiality of your personal health information. Please read this Privacy Statement carefully. It explains how Dr. Rappaport collects, uses, handles, discloses, and safeguards his patient's personal health information.

"Personal health information" or "**PHI**" is a defined term under the Ontario *PHI Protection Act* ("**PHIPA**") and includes any information in oral or recorded form (including written, audio or video) about an individual's physical, cognitive, and/or emotional health, health care history, or health care treatment that could identify you when used alone or with other information. Once you become Dr. Rappaport's patient, any information that identifies you as our patient will also be considered PHI.

A. Accountability

Dr. Rappaport is the health information custodian of your PHI, including records related to your sessions with him. Please contact Dr. Rappaport if you have any questions about your records.

B. Collection and Use of PHI

The types of PHI that Dr. Rappaport may collect may include your name, date of birth, address, phone number, OHIP number, health history, and records of the care provided to you. Dr. Rappaport may collect, use, and disclose PHI for the following purposes:

- to provide you with psychological services, such as psychological assessment and psychotherapy
- to create a Jane account for secure email and teletherapy services
- to obtain payment for services provided (i.e., from you, OHIP, WSIB, your private insurer, or others)
- to conduct quality improvement and risk management activities
- to comply with our regulatory obligations to the College of Psychologists and Behaviour Analysts of Ontario
- for other purposes permitted by law

We will collect, use, and disclose only as much PHI as is needed to achieve these purposes.

C. Your Choices

If you have provided consent to our collection, use or disclosure of PHI, you can withdraw your consent at any time by telling Dr. Rappaport at the contact information set out below. If you withdraw your consent on a go-forward basis, Dr. Rappaport may not be able to provide services to you if he cannot meet professional obligations related to record keeping.

D. Contents of Patient Record

The laws and standards that govern psychologists require that we keep a patient record.

All patient records must include:

- a. patient's name(s), address(es) and (if available) telephone number(s), as well as any other information needed to identify the patient;
- b. the patient's date of birth;

- c. a dated log of all contact between Dr. Rappaport and the patient;
- d. a dated log of any consultation, either given or received by Dr. Rappaport, regarding services to the patient;
- e. a description of any presenting problem and of any history relevant to the problem, including any relevant records from external sources;
- f. relevant information about service activity related to the patient by Dr. Rappaport, including, but not limited to: assessment procedures; resulting assessment findings; diagnoses; goals or plans of service developed; reviews of progress on the goals and/or of the continued relevance of the plan of service; activities related to crises or critical incidents; and interventions carried out or advice given;
- g. relevant information about every service activity that was commenced but not completed, including reasons for the non-completion;
- h. all reports or correspondence about the patient, received by Dr. Rappaport, which are relevant and material to Dr. Rappaport's service to the patient;
- i. all reports and communications prepared by Dr. Rappaport regarding the patient;
- j. a copy of every written consent and/or documentation of the process of obtaining verbal consent related to Dr. Rappaport's service to the patient; and
- k. information about every referral of the patient, by Dr. Rappaport, to another professional.

E. Disclosure of PHI to Third-Parties

Your privacy is protected by professional standards and applicable privacy legislation. Dr. Rappaport will not sell or disclose your information to third parties without your consent, except as described below or as required or permitted by applicable law.

F. Exceptions to Confidentiality and Privilege

Dr. Rappaport may be required or permitted by law to disclose information if he:

- 1) Suspects that a child is at risk of abuse or neglect.
- 2) Suspects that a person who lives in a retirement home or long-term care facility is at risk of abuse or neglect.
- 3) Suspects that a patient has been sexually abused by their health care provider.
- 4) Suspects that a patient could be a danger to themselves or to another person.
- 5) When the law or the courts requires Dr. Rappaport to disclose it (such as with a court order).
- 6) If the College of Psychologists and Behaviour Analysts of Ontario is investigating Dr. Rappaport's practice.
- 7) If Dr. Rappaport's records are audited by the Canada Revenue Agency.
- 8) If payments are made by a third-party provider (e.g., extended health care benefit provider, WSIB, MVA, VAC), the third-party provider may need information about you to pay for Dr. Rappaport's services. They may also need to see your records to show that you had the treatment that they paid for. This information may include: the type(s), cost(s), date(s), and providers of any services received and/or attendant diagnoses, if applicable.

G. Access and Correction

Dr. Rappaport has an obligation to maintain patient records that are as accurate and complete as possible. You have the right to seek access to your records and to ask Dr. Rappaport to correct a record if you believe it is inaccurate or incomplete. Usually, a correction is made by adding

information to the file and not by deleting or destroying the information. Dr. Rappaport cannot correct records made by other professionals.

Because these are professional records, they can be misinterpreted by and/or upsetting to untrained readers. Dr. Rappaport recommends that you review them together or let him summarize them so that the contents are not misunderstood. You are entitled to receive a copy of your records unless Dr. Rappaport believes that seeing them would be emotionally damaging, in which case he will discuss them with you or send them to another mental health professional of your choosing.

H. Confidentiality and Consent for Patients Under 16

If you are under 16 years of age, your parent(s) or legal guardian may give or refuse consent to disclose information on your behalf, unless the information relates to treatment that you are able to consent to on your own. If you are capable of making a decision, your choice supersedes that of your parent or guardian. If you are 16 years of age or older, we will not share any information about you without your permission unless one of the other exceptions listed above apply.

It is Dr. Rappaport's policy to request an agreement from your parent(s) or legal guardian that they agree to avoid unnecessary review of records and involvement in your treatment before he provides any services. If they agree, Dr. Rappaport will only provide them with general information about your work together, unless he believes there is a significant risk that you will seriously harm yourself or someone else. In this case, Dr. Rappaport may need to disclose information to reduce this risk of harm, but he will disclose the minimum information needed to do so.

If your parent or legal guardian requests information about you, Dr. Rappaport's policy is to discuss the request with you and try to arrive at an agreement about what information is provided to them. Dr. Rappaport may also provide a written summary answering their question instead of providing direct access to your records.

I. Family Law Issues

Parents with joint custody have equal authority as substitute decision makers for their child, but a parent with only a right of access/parenting time only has authority if the parent with custody/decision making authority is not available. The hierarchy of substitute decision makers is provided in the *Health Care Consent Act*.

It is Dr. Rappaport's policy that for children and youth under the age of 16, where parents are no longer married or cohabiting and have joint custody of the child, he will obtain the consent of both parents prior to the child receiving services (unless the patient is capable of providing consent for themselves).

J. Safeguards

Dr. Rappaport implements administrative, technical, and physical measures that are reasonable in the circumstances to safeguard the PHI in his custody and control against theft, loss, disposal and unauthorized access, use, copying, modification, and disclosure.

Temporary paper records are stored in Dr. Rappaport's office in a locked filing cabinet. These paper records are transcribed or scanned into your Jane patient record, which is stored in secure data centres in Canada and protected by encryption, user account and password controls, restricted access by service providers and logging, auditing and monitoring of all access to electronic records

of PHI. Once your PHI is digitized, Dr. Rappaport will securely destroy the paper record as described below.

K. Retention

Dr. Rappaport retains your PHI only for as long as necessary to carry out the purposes discussed in this Privacy Statement or to meet our legal, medico-legal, or business requirements. PHI that forms part of your medical record will be retained for 15 years, or for 15 years following your 18th birthday.

Dr. Rappaport may also create and retain de-identified or anonymized personal information for internal use to improve the provision of services and business operations. If you have agreed to participate in Dr. Rappaport's research by consenting to his adding your de-identified PHI to an aggregate data set, he will retain that data set for the period required by the approving Research Ethics Board.

L. Disposal

Dr. Rappaport will take reasonable steps to ensure secure and permanent destruction of PHI records following the retention period and following digitizing of paper records. If a third-party is retained to dispose of this information, Dr. Rappaport will enter into a written agreement with the third-party that sets out the requirements for secure disposal and require the third-party to confirm in writing that secure disposal has occurred. Dr. Rappaport keeps a record of all PHI that has been destroyed, including the date, how the information was disposed of, and to whom the information relates.

M. Privacy Breach Management

If Dr. Rappaport learns that a patient's PHI has been stolen, lost or subject to unauthorized use, access, disclosure, copying or modification, he will immediately take steps to manage the breach, including notifying anyone else who should be involved in addressing the breach (such as Jane staff or legal counsel).

Dr. Rappaport's first priority will be to identify and contain the breach, and then to take steps to correct it and to minimize chances of similar breaches in the future. Dr. Rappaport will notify any patient whose PHI may have been stolen, lost, or accessed in an unauthorized manner, at the first reasonable opportunity. Dr. Rappaport will also advise patients of their right to contact the Information and Privacy Commissioner of Ontario ("IPC"). We will then investigate the breach and take any reasonable steps to resolve it. Finally, we will consider whether a report to the IPC is required.

N. Updates to the Privacy Statement

Dr. Rappaport may update this Privacy Statement periodically to reflect changes to the law and his privacy practices. If Dr. Rappaport makes material changes to our privacy practices we will let you know.

O. Questions or Concerns?

If you have questions or want to make a complaint about Dr. Rappaport's privacy practices, please contact: **Lance M. Rappaport, Ph.D. C.Psych. at lrappaport87@protonmail.com.**

You also have the right to complain to the IPC at the address below if you have concerns about Dr. Rappaport's privacy practices or how your PHI has been handled:

Dr. Lance M. Rappaport, Ph.D. C.Psych.

Phone: (519) 948-1623

Email: lrappaport87@protonmail.com

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)

TDD/TTY: (416) 325-7539

Fax: (416) 325-9195

www.ipc.on.ca

Implemented on August 15, 2024. Last reviewed by Dr. Lance M. Rappaport on August 15, 2024.