



## How to communicate PHI securely

Ensuring the privacy and security of personal health information (PHI) is an obligation for physicians under the Personal Health Information Protection Act, 2004 (PHIPA), and is key to maintaining Ontarians' confidence in digital health and a connected health system. The following guidelines outline physician obligations with respect to communicating PHI securely.

PHI may refer to any information relating to a person's health that may identify the person (i.e., family history, health card numbers, information about a person's physical/mental health).



## Secure Messaging

### Communication Among Custodians

- Use encrypted e-communication when communicating PHI to other health care providers to prevent unauthorized access.
  - Use of encrypted e-communication is required under the [CPSO virtual care policy](#) unless there is an emergency or other circumstance that requires the use of unencrypted e-communication.
  - Use of encryption when communicating with other health care providers is [recommended by the Information and Privacy Commissioner of Ontario](#). ([Further information about encryption](#)).

### Communication Between Custodians and Their Patients

- Use encrypted e-communication when communicating PHI to patients, where possible ([CPSO virtual care policy](#)).
- If encrypted e-communication is not possible, consider whether it is reasonable to communicate with patients through unencrypted e-communication.
  - If using unencrypted e-communication, obtain and document the patient's express consent to this form of communication. ([Use this CMPA form and disclaimer](#)).
  - Inform the patient about the following when obtaining express consent:
    - i) how this kind of e-communication will be used;
    - ii) the type of information that will be communicated;
    - iii) how the e-communication will be processed; and
    - iv) the limitations and risks of using unencrypted e-communication.
- Practice the following when photographs or video recordings of a patient are required:
  - i) inform the patient about the purpose of the photograph or recording;
  - ii) include a copy of the photograph or recording in the patient's medical record; and
  - iii) permanently delete and/or destroy any back-up copy of the photograph or recording in accordance with PHIPA.
- If you and your practice offer virtual care, select a [virtual care solution](#) that is verified as a safe and secure digital platform by Ontario Health.

# Data Protection

## Communication Among Custodians

- Ensure that PHI is protected by encryption when using mobile devices or cloud-based servers to access, store, or back up PHI, even if it is temporary.
- OntarioMD resource: [How to keep PHI secure in the era of virtual care.](#)

## Communicating PHI by Email

- Physicians are expected to develop and implement a written policy for sending and receiving PHI by email.
  - The IPC expects that physicians notify their patients about this policy and obtain their consent.
- Minimize the amount and type of PHI included in an email.
  - Only store PHI on email servers and portable devices for as long as is necessary to serve the intended purpose.



## PHIPA Compliance

- Custodians have a duty to ensure that health records in their custody or control are retained, transferred, and disposed of in a secure manner.
- Use [OntarioMD's Privacy and Security Training](#) and resources to support your understanding and compliance with privacy and security requirements.
- OntarioMD resource: [Obligations for keeping PHI private](#)

## Your Options

- Refer to [Ontario Health's list of secure messaging platforms](#) when considering a secure messaging system.
- [Medeo](#): Medeo is a secure application that enables health care providers and patients to connect online with video appointments, secure messaging, and online booking.
- [HealthMyself](#): Health Myself Patient Portal extends the functionality of industry leading Electronic Medical Record systems by providing an integrated web-based interface that allows patients and providers to engage online in a secure and convenient manner.
- [Virtual Visit Solutions](#): shows the current status of virtual visit solutions that have been validated as meeting a set of mandatory requirements in the Virtual Visits Standard.

## In the Event of a Privacy Breach

- If you suspect communications containing PHI has been stolen, lost, used or disclosed without authority, notify individuals about the breach and their entitlement to make a complaint to the Information and Privacy Commissioner of Ontario (IPC).

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