



PRIVACY AND CONFIDENTIALITY	Digital Health B-PH5-2003-002
Approver(s)	Ron Johnson, Chief Executive Officer (Interim) Signed by Ron Johnson Dated: March 3, 2026
Portfolio/Program/Department of Administrative Responsibility	Privacy & Access to Information
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Purpose

To communicate obligations, expectations, and requirements with respect to protecting the privacy and Confidentiality of Personal Information (PI), Personal Health Information (PHI) and Business Information (collectively referred to as Information) in the custody and control of the Provincial Health Authority, operating as Newfoundland and Labrador Health Services (NL Health Services).

To provide guidance on the handling (i.e., collection, use, access, and disclosure) of Information in support of NL Health Services' ongoing commitment to privacy and Confidentiality and in compliance with statutory obligations set out in legislation, including, but not limited to, the *Access to Information and Protection of Privacy Act, 2015 (ATIPPA, 2015)* and the *Personal Health Information Act (PHIA)*.

To provide a consistent framework for the administration of an Oath/Affirmation of Privacy and Confidentiality (herein referred to the Oath) within NL Health Services.

Scope

This document applies to:	☒ Provincial	☐ Labrador	☐ Western	☐ Central
	☐ Eastern Rural	☐ Eastern Urban	☐ Other (as specified below)	

This policy applies to NL Health Services Board of Trustees (herein referred to as "Board") and to ex-officio subject matter experts who may serve on Board Committees or provide advice to the Board; employees; officers; associates; affiliates; Agents; vendors; contractors; student placements; community placements; volunteers; regional health councils and their members; boards and commissions and their members; Health



Care Professionals, including Members of Medical Staff; any individuals or corporations either directly or indirectly associated with NL Health Services; as well as any other entities established by NL Health Services (collectively referred to as NL Health Services Board, Employees and Others).

Definitions & Acronyms

Terms / Acronyms	Definitions / Descriptions
Agent	"Agent", in relation to a custodian, means a person that, with the authorization of the custodian, acts for or on behalf of the custodian in respect to PHI for the purposes of the custodian, and not the Agent's purposes, whether or not the Agent has the authority to bind the custodian, is paid by the custodian or is being remunerated by the custodian. <i>PHIA Section 2 (1) (a)</i>
Business Information	Proprietary, commercially sensitive, and other information in any format with respect to NLHS' business that is not generally Disclosed publicly by the organization. NL Health Services Board, Employees and Others may come in contact with such information that is not generally known to the public as they perform their duties. Examples include, but are not limited to: • legal matters involving the organization; • financial information that is not available in the annual report; • information about intellectual property such as development of new technology or treatments or unpublished reports; and • information pertaining to NLHS information technology access and security system.
Client	A person who avails him/herself of the services of NL Health Services and includes a patient and/or resident.
Confidentiality	The duty to protect, respect and maintain the privacy of PI, PHI, and Business Information, and the obligation to refrain from Disclosing this Information to others not permitted to access the information in the normal course of their authorized work.
Disclose/Disclosure	"Disclose", in relation to Information in the custody or control of a custodian or other person, means to make the Information available or to release it but does not include a use of the Information, and "Disclosure" has a corresponding meaning.
Execute	Execute means (1) to carry out, perform, or complete as required, usually to fulfill an obligation, such as executing a contract or order; (2) to sign or complete all formalities necessary to make a contract or document effective, such as signing, stamping, or delivering.
Health Care Professional	A person, including a corporation, that is licensed or registered to provide health care by a body authorized to regulate a Health Care Professional under one of the following enumerated Acts but does not include an employee of a Health Care Professional when acting in the course of his or her employment:



	(i) <i>Chiropractors Act,</i> (ii) <i>Dental Act,</i> (iii) <i>Denturists Act, 2005,</i> (iv) <i>Dieticians Act,</i> (v) <i>Dispensing Opticians Act, 2005,</i> (vi) <i>Hearing Aid Practitioners Act,</i> (vii) <i>Licensed Practical Nurses Act, 2005,</i> (viii) <i>Massage Therapy Act, 2005,</i> (ix) <i>Medical Act, 2005,</i> (x) <i>Occupational Therapists Act, 2005,</i> (xi) <i>Optometry Act, 2012,</i> (xii) <i>Pharmacy Act, 2024,</i> (xiii) <i>Physiotherapy Act, 2006,</i> (xiv) <i>Psychologists Act, 2005,</i> (xv) <i>Registered Nurses Act, and</i> (xvi) <i>Social Workers Association Act</i> <i>PHIA Section 2 (1) (j)</i>
Oath/Affirmation of Privacy and Confidentiality	An Oath is a promise or a statement of fact calling upon something or someone that the Oath maker considers sacred, usually a God, as a witness to the binding nature of the promise of the statement. An Affirmation is solemn declaration made by those who object to taking an Oath to avoid the religious implications of an Oath. An Affirmation has the same legal effect as an Oath.
Personal Health Information (PHI)	Identifying information in oral or recorded form about an individual that relates to: a. the physical or mental health of the individual, including information respecting the individual's health status and history and the health history of the individual's family; b. the provision of health care to the individual, including information respecting the person providing the health care; c. the donation by an individual of a body part or bodily substance, including information derived from the testing or examination of a body part or bodily substance; d. registration information; e. payments or eligibility for a health care program or service in respect of the individual, including eligibility for coverage under an insurance or payment arrangement with respect to health care; f. an individual's entitlement to benefits under or participation in a health care program or service; g. information about the individual that is collected in the course of, and is incidental to, the provision of a health care program or service or payment for a health care program or service;



	h. a drug as defined in the <i>Pharmacy Act, 2024</i>, a health care aid, device, product, equipment, or other item provided to an individual under a prescription or other authorization issued by a Health Care Professional; or i. the identity of a person referred to in section 7 of <i>PHIA</i>. <i>PHIA Section 5 (1)</i>
Personal Information (PI)	Recorded information about an identifiable individual, including: a. the individual's name, address, or telephone number, b. the individual's race, national or ethnic origin, colour, or religious or political beliefs or associations, c. the individual's age, sex, sexual orientation, marital status, or family status, d. an identifying number, symbol or other particular assigned to the individual, e. the individual's fingerprints, blood type or inheritable characteristics, f. information about the individual's health care status or history, including a physical or mental disability, g. information about the individual's educational, financial, criminal or employment status or history, h. the opinions of a person about the individual, and i. the individual's personal views or opinions, except where they are about someone else. <i>ATIPPA, 2015 Section 2 (u)</i>
Privacy Breach	A Privacy Breach occurs when there is unauthorized access, collection, use, Disclosure, or disposal of PI/PHI. Such activity is "unauthorized" if it occurs in contravention to laws such as <i>ATIPPA, 2015</i> or <i>PHIA</i>. This includes PHI or PI that is lost or stolen.

Policy Statements

- It is the responsibility and obligation of NL Health Services Board, Employees and Others to ensure that Information to which they have access is kept private and Confidential and handled in a manner consistent with statutory obligations; NL Health Services policy, practice, procedure, and directives; professional standards, scope of practice or responsibility; and codes of ethics.
- Information must only be handled on a need-to-know basis by NL Health Services Board, Employees and Others and only where the handling of that information is authorized and a function of their roles and responsibilities with NLHS.
- The handling of Information must be limited to the minimum amount necessary to achieve the purpose for which it is being handled and, in the case of PI or PHI, should occur only where other information is insufficient to fulfill the purpose, unless required or permitted by law.



- Unauthorized or inappropriate handling of Information, whether intentional or unintentional, is a breach of NL Health Services policy and/or applicable legislation and may result in the restriction of access to Information and Information systems and may lead to penalty or discipline up to and including cancellation of contract or services; termination of the employment, appointment, affiliation, or arrangement with NL Health Services; withdrawal of privileges; and/or legal action. Where applicable, reporting to a professional regulatory body may also be considered and occur.
- Direct access to one's own PHI that is not expressly authorized or made available through means not generally accessible to the public is deemed to be an unauthorized or inappropriate handling of PHI for the purposes of this policy and may lead to penalty or discipline up to and including cancellation of contract or services; termination of the employment, appointment, affiliation, or arrangement with NL Health Services; withdrawal of privileges; and/or legal action. Where applicable, reporting to a professional regulatory body may also be considered and occur.
- Upon conclusion of employment, contract/services, appointment, affiliation or arrangement with NL Health Services, as applicable, NL Health Services Board, Employees and Others have an on-going obligation to maintain the Confidentiality of Information in accordance with this policy and must not Disclose it to any third party, for any reason, unless having first received written authorization from NL Health Services or, if required by law, provided prior notice to NL Health Services of the legal requirement to Disclose to provide NL Health Services a reasonable opportunity to investigate the requirement.

Recognition of Professional Standards/Regulations:

- NL Health Services Board, Employees and Others may have Disclosure/advocacy obligations arising from professional standards and regulations and/or concerns regarding the safety of Clients and services delivered. NL Health Services acknowledges the responsibility of NL Health Services Board, Employees and Others for appropriate Disclosure of safety-related concerns to regulatory bodies or other relevant third parties; however, safety concerns must first be directed through the operational departments and programs of NL Health Services as the initial step toward resolution.

Reasonable Limits:

- Every reasonable effort must be made to maintain privacy and Confidentiality while recognizing that, in practice, the facilities and dynamic environments in which NL Health Services operates (e.g., 4-bed patient rooms, crowded emergency departments, home visit environments) can limit the degree to which privacy and Confidentiality can be protected.
- Notwithstanding the environmental limitations inherent in health care settings in which NL Health Services operates, Information that is considered private and Confidential is not to be discussed in any public location (e.g., elevators, lobbies, cafeterias, off premises, etc.) where others, not entitled to receive that information, are present and may overhear.

Legal Limits:



- Protection of privacy and Confidentiality may be subject to law, statutory, regulatory and/or ethical obligations that permit or require the production of Information, including, but not limited to, the Disclosure of PHI without Client consent to a third party (e.g., police or other authorities) to prevent risks or harm to that individual or another person. For example, the law may permit or require the Disclosure of PHI without consent to avert a serious risk of harm to an identifiable person. Also, the law may require Disclosure of specific events or circumstances, such as suspected child abuse or a gunshot or stab wound. These exceptions and obligations can arise in many circumstances. Active NL Health Services or legacy organization policies should be reviewed regarding Disclosure of PHI without consent or Disclosure of specific events or circumstances. In addition, legal advice should also be sought.

Oath/Affirmation of Privacy and Confidentiality:

- Unless otherwise stipulated by contract, all NL Health Services Board, Employees and Others must take the Oath. Refusal to sign the Oath will result in penalty or discipline up to and including cancellation of contract or services; termination of the employment, affiliation, appointment or arrangement with NL Health Services; and/or withdrawal of privileges.

Procedures and Accountabilities

Prior to or upon commencement of employment, contract/services, appointment, affiliation or arrangement with NL Health Services, as applicable, all NL Health Services Board, Employees and Others who may have access to Information in the context of those duties or services must:

- complete the *PHIA* education session and any other privacy education sessions deemed necessary by NL Health Services;
- read this policy; and
- sign the Oath, available from your manager or Sourcing and Contracts, Human Resources, and /or Privacy and Access to Information Programs, among others.

Oath/Affirmation of Privacy and Confidentiality:

- Unless otherwise stipulated by contract, all NL Health Services Board, Employees and Others must take the Oath in a format provided by NL Health Services. The Oath must be Executed prior to assuming duties for, or providing services to, NL Health Services where the NLHS Board, Employees and Others may have access to Information in the context of those duties or services. A copy of the Oath must be provided to the NL Health Services Board, Employees and Others. This copy of the Oath document does not have to be signed.



- The Oath must be signed and witnessed in person by a Commissioner for Oaths or a Notary Public or Executed remotely using audio-visual technology in accordance with applicable law. From time to time, NL Health Services Board, Employees and Others may be required to sign a new Oath at the discretion of the VP of Digital Health and Chief Information Officer or the Chief Privacy Officer (e.g., for reasons including, but not limited to, changes to an individual's role with NL Health Services; changes to provision of services; changes to legislation or Oath format; responding to recommendations of applicable authorities, etc.). In such cases, the new Oath, once signed, shall replace the prior Oath.
- A confirmation of the Oath must be signed by NL Health Services Board, Employees and Others not later than three (3) years after the execution of the Oath and every three (3) years thereafter unless this requirement is altered at the discretion of the VP of Digital Health and Chief Information Officer or the Chief Privacy Officer. This confirmation serves as a reminder of one's legal, privacy, and Confidentiality obligations as set out in the Oath and does **not** replace the Oath or require a witness's signature.
- The Oath, once Executed, must be kept on file in perpetuity by the applicable program area (e.g., Human Resources Program; Provincial Supply Chain, Procurement and Contracts Program), as appropriate. The Executed Oath must be available for review by the NL Health Services Privacy and Access to Information Program and/or Legal Services upon request.

Returning of Information to NL Health Services upon Conclusion of Employment:

- Upon conclusion of employment, contract/services, affiliation, appointment or arrangement with NL Health Services, as applicable, NL Health Services Board, Employees and Others are required to return to NL Health Services all Information covered in this policy or destroy the Information in a manner authorized by NL Health Services, subject to applicable legislation and other processes so defined in the contract or agreement between the parties.

Breach of Confidentiality and/or Privacy:

- NL Health Services Board, Employees and Others must report breaches, or suspected breaches, of Confidentiality and/or privacy. If a Confidentiality or Privacy Breach has occurred or is suspected, it must be reported to one's immediate supervisor, NLHS Privacy and Access to Information staff member and/or NL Health Services contact, as applicable, as soon as possible, as per the Privacy Breach Management and Notification Policy B-PH5-2003-001, unless otherwise expressly agreed in writing with NL Health Services by contract.

Referenced and Sourced Materials

- Canadian Medical Protective Association. (2023). *Duty to report: Knowing how to balance duty of confidentiality and reporting obligations*. Retrieved from <https://www.cmpa-acpm.ca/en/education-events/good-practices/medico-legal-matters/duty-to-report>.



- Government of Newfoundland and Labrador ATIPP Office, Office of Public Engagement. (2015). *Protection of privacy – Privacy breach protocol*. Retrieved from <https://www.gov.nl.ca/atipp/files/info-privacy-breach-protocol.pdf>.
- Government of Newfoundland and Labrador. House of Assembly. SNL2015 CHAPTER A-1.2 - Access to Information and Protection of Privacy Act. (2015). Assembly.nl.ca. <https://assembly.nl.ca/legislation/sr/statutes/a01-2.htm>.
- Government of Newfoundland and Labrador. House of Assembly. Bill 23, Alternate to Witnessing to Documents Act. (2023). Assembly.nl.ca. <https://www.assembly.nl.ca/housebusiness/bills/ga50session2/bill2323.htm>
- Government of Newfoundland and Labrador. House of Assembly. SNL2024 CHAPTER P-12.3 – Pharmacy Act, 2024. (2024). Assembly.nl.ca. www.assembly.nl.ca/Legislation/sr/statutes/p12-3.htm

Related Resources

Legislation

- Government of Newfoundland and Labrador. (n.d.). PHIA online education course. <http://nlchi.skillbuilder.ca/home>.
- Government of Newfoundland and Labrador. House of Assembly. SNL2008 CHAPTER P-7.01 - Personal Health Information Act. (2008). Assembly.nl.ca. <https://assembly.nl.ca/Legislation/sr/statutes/p07-01.htm>.
- Government of Newfoundland and Labrador. House of Assembly. Newfoundland and Labrador Regulation 38/11 - Personal Health Information Regulations. (2011). Assembly.nl.ca. <https://www.assembly.nl.ca/legislation/sr/regulations/rc110038.htm#5>

Policy

NLHS

- B-PH5-2003-001 Privacy Breach Management and Notification
- Oath/Affirmation of Privacy and Confidentiality

Key Words

Oath/Affirmation of Confidentiality, Personal Health Information, Personal Information

Cross-Reference

Health Organization	Document Reference	Document Name	Date Rescinded / Archived / NA
Labrador-Grenfell Health	B-120	Privacy and Confidentiality	Redacted: Reference to rescinded policy (PA-9-10) on pg.1 and direct to updated policy March 4, 2026



Labrador-Grenfell Health	P&A-9-020	Oath/Affirmation of Confidentiality	Rescinded: March 4, 2026
NL Health Services	B-PH5-00-004	Privacy and Confidentiality	Rescinded: March 4, 2026
NL Health Services	I-PH4-200-2003-002	Privacy and Confidentiality	Archived: March 4, 2026
NL Health Services	N/A	Board of Trustees Governance Policies NL Health Services section 3.04	Redacted: Section 3.04 Privacy and Confidentiality (pgs. 17-19) March 4, 2026