

Consent:

In most cases, we require your permission to collect, use or share your personal information. Staff will explain the process for you to give permission and provide you with a consent form that will be kept in your health record.

With limited legal exceptions, we do not and are not allowed to give out your personal health information (PHI) to people who do not provide your health care, such as family members, without your explicit consent.

Stella's Place is allowed or may be required to use or give out some of your PHI without consent in a limited number of situations, including:

- Reporting , when required, to Public Health
- Suspected child abuse
- To comply with a court order
- To reduce the risk of significant bodily harm to you or another person

Accessing Your Own Personal Health Records:

As a current or past participant of Stella's Place, you have the right to:

- See your health records and request a copy for yourself
- Authorize another person to access your personal health information on your behalf
- Request a correction to any personal health information that you think is inaccurate or incomplete
- Request help from Stella's Place in locating or correcting specific health information in your records

Questions or Complaints?

Internal Privacy Officer
Stella's Place
18 Camden St.
Toronto M5V 1V1
416-461-2345, ext. 332
privacyofficer@stellasplace.ca

External Information and Privacy
Commissioner of Ontario
2 Bloor Street East, Suite
1400
Toronto, ON M4W 1A8
416-325-3333 or
1-800-387-0073

Stella's Place Privacy Statement:

Collection, use and disclosure of personal health information

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Artwork by Carleigh A. Loshusan

Our Commitment to Your Privacy

Stella's Place respects your privacy and is committed to protecting your personal health information (PHI). PHI is any recorded information about you, your health, and your health care that Stella's Place collects and keeps in order to provide you with appropriate support.

Examples of personal health information that we collect include your name, date of birth, health history, and notes about your ongoing care.

We collect PHI about you directly from you, or from a person you have designated to act on your behalf. We may share your PHI with other providers who are part of your health care team in order to coordinate care, unless you ask us not to.

Content and Purpose of Health Records

- We keep health records to provide an accurate account of a participant's health care in order to plan, deliver, and evaluate ongoing support.
- Health records provide participants with information they may request about themselves and the services they have received.
- We also compile and use statistics (e.g., in annual reports) to help us plan and evaluate services but you will remain anonymous in all reports.

Protecting Your Health Records:

We make sure that only staff who need your information for direct care or administrative purposes are allowed to look at your health records. The information you provide is used only for the reason for which it was originally obtained.

Stella's Place Follows all current and federal legislation regarding the collection, storage, use and disclosure of personal health information, including the Personal Health Information Protection Act (PHIPA), the Health Care Consent Act, 1996, and the Mental Health Act.

Use and Disclosure of Your Health Records

We may use your health records to:

- Monitor, plan for, and provide your health and mental health support at Stella's Place.
- Plan, administer and manage our internal operations.
- Train staff and teach in the community.
- Comply with legal requirements and fulfill other purposed permitted or required by law.

We may share your records with:

- You or anyone you have authorized to access your information.
- Other health care providers in your circle of care unless you tell us otherwise.
- Health regulatory agencies if funding is provided for the service you are receiving. Your information will be provided anonymously.
- A public authority, other service provider, family member or emergency contact where it is reasonably judged that there is an urgent threat to your safety or the safety of another person.