# Notification to Patients Affected by Privacy Breach

# Document Purpose and Overview

This document is being provided as a sample in the event that you need to notify patients affected by a privacy breach as mandated by the [Health Information Act](https://www.qp.alberta.ca/1266.cfm?page=H05.cfm&leg_type=Acts) (HIA). Please note that this is being provided as a sample only and will need to be updated to suit your clinics’ needs and unique circumstance of the privacy breach. The template provides examples and instructions throughout to assist you.

# Instructions for use

The instructions below are meant to assist you with making this document your own and to fulfill your obligations under the HIA. The letter was created in a standard word document and can be edited as needed:

* When beginning to edit the letter you may have to click the “Enable Editing” button at the top.
* Insert your clinic logo or letterhead at the top of the page.
* Follow the recommendations in yellow highlight and remove all highlighting when you are done editing the letter.
* The first paragraph provides the patient with information about the breach that occurred. Please amend this to match the specific situation but ensure not to include any information that could further expand the breach such as the detailed data that was compromised. Use the general examples provided as a guide to ensure that you provide all of the required information.
* The third paragraph acknowledges the potential harm caused to the patient and provides an opportunity for an apology. It also requests that you provide an assessment of the level of harm that was caused and why you deemed it as such.
* The fourth paragraph provides you an opportunity to comment on mitigation steps taken by the clinic to prevent further breaches and reflect on lessons learned.
* Please enter the contact information for person who is tasked to follow up with the patient, likely the lead custodian or clinic privacy officer.

# Questions?

If you have any questions about this document or require further assistance, please contact the Alberta Medical Associations’ Security Privacy and Data Sharing (SPaDS) team at privacySPaDS@albertadoctors.org.

Tuesday, December 22, 2020

<Insert address of recipient>

Dear <Insert name>,

We regret to inform you that there has been an unauthorized disclosure of your health information. On <DATE>, a <describe mode of breach (e.g. email, fax, paper records, etc.)> including personal information <list which information (e.g. name, address, etc.)> and health information <list which information (e.g. diagnostic results, treatment plans, etc.)> was sent to an incorrect <insert destination (e.g. email address, fax number, patient).>

This notice is being provided to you in accordance with the requirement to notify an individual of an unauthorized access to their health information under section 60.1 of the Health Information Act, and as a precautionary measure to prevent or reduce possible risk of harm to you.

We have conducted a risk of harm assessment and determined that there is a risk of harm resulting from this privacy breach. We understand that the incident may have resulted in an embarrassing situation for you, and we sincerely apologize. We believe that the risk of harm is <low, medium, high> because <explain your reasoning for the risk of harm level>.

The clinic has completed a Privacy Impact Assessment (PIA) that was submitted to the Office of the Information and Privacy Commissioner (OIPC) on <DATE OF SUBMISSION>. A staff meeting was held to discuss the clinic policies and procedures. Each member will read through privacy training handouts and attend a privacy training session. The clinic has <describe what has been done to mitigate the risk of this happening again>.

Please be advised that the Information and Privacy Commissioner of Alberta has the authority to investigate any activity that violates the Health Information Act. If you would like to report any concerns to the Commissioner, please contact the Office of the Information and Privacy Commissioner at 780-422-6860 (Toll-free at 1-888-878-4044) or generalinfo@oipc.ab.ca.

If you have questions regarding this incident or notice, please feel free to contact me at <CLINIC PHONE NUMBER>

Kind regards,

<PRIVACY OFFICER NAME>,

Privacy Officer / Lead Custodian

<CLINIC ADDRESS>