

NORTH BAY REGIONAL HEALTH CENTRE (NBRHC)

Policy and Procedure		Policy Number	ADM-BO-016	
Title Director Confidentiality		Policy category		<input type="checkbox"/> Departmental <input type="checkbox"/> Organization Wide <input checked="" type="checkbox"/> Board
		Manual		Board
		<input checked="" type="checkbox"/> New	<input type="checkbox"/> Minor	<input type="checkbox"/> Major
Origination Date		Developer		
Effective Date (date this version came into effect)	Reviewed by Governance June 11, 2015; January 25, 2018 Approved by Board October 16, 2015; February 8, 2018	Governance Committee		
Cross References (NBRHC or legacy organization policies) Not applicable		Comparable Policy from service provider within NBRHC Facility Not applicable		

NOTE: This is a **CONTROLLED** document. Any document appearing in a paper form should **ALWAYS** be checked against the online version prior to use.

1.0 Purpose

To preserve and promote the reputation of North Bay Regional Health Centre by ensuring that confidential matters are not disclosed until disclosure is authorized by the Board through its Chair, and/or the CEO.

2.0 Policy

Every member of the Board of Directors and its Committees shall respect the confidentiality of information relating to all matters before the Board and its Committees, including, but not limited to, the personnel and client records and all administrative and financial business of North Bay Regional Health Centre; and shall not release, copy, discuss or distribute any portion of these records or information unless he/she is expressly authorized to do so by the Board through its Chair or designate (Vice-Chair) or CEO or the CEO's designate.

Every Director shall keep in mind that unauthorized statements could adversely affect the interests of the Corporation and the interests of those persons served by the Corporation.

3.0 Minor Revision History

Not applicable

4.0 Definitions

Not applicable

5.0 Materials required

Not applicable

6.0 Procedure

6.1. Maintaining Board Confidences

- The aspect of confidentiality permeates any interaction a Board member may have with others, exclusive of fellow Board members. This includes other individuals, colleagues, governments and organizations.
- All matters that are the subject of closed sessions of the Board are confidential unless disclosed in an open session of the Board.
- All information about the Board of Directors and its activities should be presumed to be confidential. The business of the Board should not be discussed outside the boardroom.
- All matters that are before a committee or task force of the Board are confidential unless they have been determined not to be confidential by the Chair of the relevant committee or task force.
- Should an instance arise which prompts a Board member to have concern, it should be discussed with the Chair, at the earliest opportunity.
- Minutes of closed sessions of the Board shall be recorded by the Secretary or designate or if the secretary or designate is not present, by a Director designated by the Chair of the Board.
- All minutes of closed sessions of the Board shall be marked confidential and shall be handled in a secure manner.
- All minutes of meetings of committees and task forces of the Board shall be marked confidential and shall be handled in a secure manner.
- All matters that are the subject of open sessions of the Board are not confidential.
- Notwithstanding that information disclosed or matters dealt with in an open session are not confidential, no Director shall make any statement in public as a Director unless such statement has been authorized by the Board Chair or, CEO or CEO's designate.
- In the event of a breach of confidentiality, the Board Chair shall report to the Governance Committee for discussion. Any individual who breaches these provisions of confidentiality is subject to disciplinary action, up to and including possible removal from the Board.

“Confidential”, “Personal” and “Internal Use” information is the sole property of the Hospital and may not be used or retained by any Director or employee after leaving such capacity with North Bay Regional Health Centre and may not be used for any personal gain or benefit while serving as a Director or employee, or thereafter.

Every member of the Board and its Committees has the right to have all information about him/her kept strictly confidential; and has a responsibility to report and take appropriate action at any time he/she becomes aware that a breach in these provisions of confidentiality has taken place. Personal information, as defined in the Freedom of Information and Protection of Privacy Act, will not be released without the consent of the affected individual unless required to do so by law.

Information which the Hospital regards as “Confidential” will only be released if the North Bay Regional Health Centre chooses to do so, or if subject to the right of access under the Freedom of Information and Protection of Privacy Act, or if required to do so by force of law or other authority.

6.2. Freedom of Information and Protection of Privacy Act (FIPPA)

In the event of an access request to Board records under the Freedom of Information and Protection of Privacy Act (FIPPA), the Hospital policy “Access to Information under the Freedom of Information and Privacy Act” will apply. The Hospital FOI Coordinator and Privacy Officer will obtain and review the requested records to determine any applicable legislative exemptions and/or exclusions, and consult with the Board Chair and/or CEO to ascertain if the responsive records may be considered sensitive or contentious.

The protection of personal privacy is a key principle under the Freedom of Information and Protection of Privacy Act. As such, personal information is excluded from disclosure under the Act, providing that it meets the following definition:

Personal Information means recorded information about an identifiable individual, including:

- Information relating to the race, national or ethnic origin, color, religion, age, sex, sexual orientation or marital or family status of the individual
- Information relating to the education or medical, psychiatric, psychological, criminal or employment history of the individual or information relating to financial transactions in which the individual has been involved
- Any identifying number, symbol or other particular assigned to the individual
- The address, telephone number, fingerprints or blood type of the individual
- The personal opinions or views of the individual except where they relate to another individual
- Correspondence sent to an institution by the individual that is implicitly or explicitly of a private or confidential nature, and replies to that correspondence that would reveal the contents of the original correspondence
- The views or opinions of another individual about the individual, and
- The individual’s name where it appears with other personal information relating to the individual or where the disclosure of the name would reveal other personal information about the individual

6.3. Policy Oversight

The Governance and Nominating Committees, in particular through its Chair(s), are responsible for implementing and enforcing this policy, with the support and assistance of the Administrative Assistant who maintains records and prompts consideration.

7.0 Appendices/Educational Materials

Not applicable

8.0 References

NBRHC Administrative Bylaws

9.0 Content Experts/Stakeholders

Content Expert/Stakeholder	Date Sent
Governance Committee	January 2018
Board of Directors	February 2018

10.0 Signing Authority Approval

Position	Date Signed
Chair, Board of Directors	