

# Privacy and Confidentiality

## How to Contact Us

If you have questions or concerns about our information and privacy practices, or if you want to find out how to look at your record, please contact:

### Privacy Officer, CMHA Toronto

T. 416-789-7957 ext. 6879 F. 416-289-6843

E. [privacy@cmhato.org](mailto:privacy@cmhato.org)

If you have concerns about our information and privacy practices you have the right to contact the Ontario Commissioner at:

### Information and Privacy Commissioner / Ontario

2 Bloor St. E., Suite 1400, Toronto, ON M4W 1A8

T. 416-326-3333 W. [www.ipc.on.ca](http://www.ipc.on.ca)



### Main Sites:

Lawrence Avenue West Site  
700 Lawrence Avenue West, Suite 480  
Toronto, ON M6A 3B4

Markham Road Site  
1200 Markham Road, Suite 500  
Scarborough, ON M1H 3C3

### Contact Us:

☎ 416-789-7957

✉ [info@cmhato.org](mailto:info@cmhato.org)

🌐 [www.toronto.cmha.ca](http://www.toronto.cmha.ca)

### Follow Us on Social Media:

🐦 @CMHAToronto

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Charitable Registration Number: 89344 9884 RR0001



# CMHA Toronto

## Privacy and Confidentiality

Providing information on CMHA Toronto's privacy practices and our commitment to your privacy and confidentiality. It is your right to know how we collect, use and share your personal health information.

## Sharing Your Personal Health Information

### Your information may be shared with the following persons or agencies:

You or anyone you have authorized to have access to your information, including the professionals and other health agencies involved in your health care.

A health regulatory agency, such as the Ministry of Health and Long-Term Care, if health regulations or laws require personal information.

A public authority, another service provider or family member where it is reasonably judged that there is an urgent threat to your safety or the safety of another person(s), or for purposes of legal or anticipated legal proceedings in relation to a CMHA Toronto program.

Other persons, if you agree, or when the law requires it, e.g., a Medical Officer of Health to diagnose, investigate, prevent, treat or contain communicable diseases.

## Your Choices

### You have the right to:

See and ask for a copy of your personal health information.

Ask us to make corrections to your personal health records if there is an error (subject to some legal restrictions).

Withdraw a consent previously given to us to use or share your personal health information.

Living

Working

Belonging

## Our Commitment to Your Privacy and Confidentiality

At CMHA Toronto, we follow the guidelines laid out by the Province of Ontario's Personal Health Information Protection Act (PHIPA).

Here are those guidelines:

### We Require Your Consent

We need your permission to collect, use or share your personal health information.

#### **Unspoken Permission (Implied Consent):**

When you request and accept admission to our programs, you are giving your permission to CMHA Toronto to properly use your personal health information. However, it is our practice to ask you for your verbal or written permission to collect, use and share your personal health information.

#### **Verbal or Written Permission (Express Consent):**

For purposes other than providing your health care (e.g., insurance claims), we must get your verbal or written permission.

Living

Working

Belonging

## Protecting Your Privacy

We take steps to protect your personal health information from theft, loss and unauthorized access, copying, modification, use, disclosure and disposal. Additionally, we conduct audits of our procedures to ensure that your personal health information remains protected.

### Collecting Information

The personal health information we collect may include, for example, your name, date of birth, address, health card number, mental and physical health history, and records of the care you have received at CMHA Toronto. Your health record may also include video surveillance that is collected in some of the housing programs for safety purposes.

We also collect information from other organizations where you may have received services, to ensure the best possible care planning. These organizations can include hospitals, social service agencies (e.g. the Children's Aid Society), other mental health agencies, or government programs (e.g. ODSP). In all these cases you would have previously given consent for the sharing of this information. We are careful to collect only what is needed to provide you with quality care.

## Using Your Information

Your information may be used for the following purposes:

#### **Your Health Care:**

Your information is used by those staff at CMHA Toronto who are involved in your health care, to ensure you receive the best possible service. We also use your information to communicate and consult with other health care providers involved in your care. This can be done by fax or through a secure health database.

#### **Reviewing our Programs and Services:**

Your records may be reviewed to evaluate the quality of programs and services offered at CMHA Toronto, but you will remain anonymous in all our reports.

We use statistics to help us plan, evaluate and manage our services, and to report to our funders about our operations, but you will remain anonymous in all of our statistical reports. We may contact you for your opinion when we do satisfaction surveys.

#### **Administration of Rents:**

CMHA Toronto administrative staff may have access to your contact information to process rent (if you live in CMHA Toronto housing).

Your information may be used for other purposes as permitted or required by law e.g., to take part in a court proceeding or a tribunal such as the Ontario Review Board or Landlord and Tenant Board.

