

PRIVACY POLICY HVE HEALTHCARE ASSESSMENTS

Intent

HVE Healthcare Assessments is committed to protecting the privacy and security of personal and personal health information (PHI) in compliance with the Personal Health Information Protection Act (PHIPA), the Personal Information Protection and Electronic Documents Act (PIPEDA), and the CARF 2025 Medical Rehabilitation Standards.

This policy outlines the principles for collecting, using, disclosing, retaining, and safeguarding personal and personal health information to ensure the confidentiality, integrity, and security of all data entrusted to us.

1. Collection, Use, and Disclosure of Personal Information

HVE Healthcare Assessments collects personal information for the following purposes:

- To provide healthcare assessment services.
- To ensure compliance with legal and regulatory obligations.
- To process payments, and service agreements.
- To conduct quality assurance and performance improvement activities.

Consent: The collection, use, and disclosure of personal health information require informed and documented consent, except where otherwise permitted or required by law. Consent can be withdrawn at any time, subject to legal and contractual obligations.

HVE will not use or disclose personal information for purposes other than those identified unless additional consent is obtained or as required by law.

2. Confidentiality and Safeguards

HVE implements the following security measures to protect personal and personal health information:

2.1 Physical Safeguards

Restricted access to authorized personnel only.



2.2 Digital Security Measures

- Data encryption for electronic storage and transmission.
- Secure access controls, including password protection and role-based access.
- Regular cybersecurity audits and system monitoring.
- Multi-factor authentication for accessing sensitive information remotely.

2.3 Administrative Safeguards

- Mandatory confidentiality agreements for all staff and assessors.
- Annual privacy and confidentiality training.
- Designated Privacy Officers responsible for policy enforcement and compliance.

3. Access and Accuracy of Personal Information

3.1 Right to Access

Individuals have the right to request access to their personal health information. Upon receipt of a completed written request, individuals will be informed of how their information has been used and disclosed.

3.2 Right to Correction

Individuals may request correction of any inaccuracies in their personal health information by providing supporting documentation.

3.3 Retention and Secure Disposal

HVE retains personal health information only as long as necessary to fulfill its purpose or as required by law. Secure disposal methods include:

Electronic data: Permanent deletion and digital wiping.

4. Breach Notification & Incident Response

In the event of a privacy breach, HVE will:

- 1. Contain the breach by isolating affected systems.
- Assess the impact on individuals and data security.



- 3. Notify affected individuals and report to the Ontario Information and Privacy Commissioner (IPC), if required.
- 4. Investigate the cause and implement corrective actions to prevent recurrence.

Documentation will be maintained for all incidents, including remediation actions taken.

5. Communication and Policy Updates

- Changes to this policy will be communicated via management meetings, team knowledge transfer sessions, and email notifications.
- Persons served will be notified through updates in the Rights of Persons Served Handbook and posted notices at all HVE assessment centers.

6. Compliance and Accountability

HVE has designated Privacy Officers responsible for ensuring compliance with this policy and maintaining awareness of updates to PHIPA, PIPEDA, and CARF standards.

Any privacy concerns or complaints should be directed in writing to: **Privacy Officer**, **HVE Healthcare Assessments**

Micah Vernon, Vice President micahv@hvehealth.com	
	, acknowledge that I have read and understand the
	althcare Assessments . Further, I agree to adhere to this policy and the rules outlined in this policy, I may face disciplinary action, up to
and including termination o	
Signature:	
Date:	