WinterLight Labs Inc.



Privacy Policy

1. PURPOSE

The purpose of this Privacy Policy is to provide guidance to the management, employees and contractors of WinterLight Labs Inc (WLL) on matters concerning the protection of Personal Health Information (PHI) with respect to the WinterLight Assessment ("WillAssess") and the business operations of WLL.

Healthcare Providers expect and trust that WLL will protect the confidentiality, integrity and availability of their patients' PHI. WLL is committed to meeting these expectations and to ensuring compliance with any applicable privacy laws in the jurisdictions of its operation, as well as privacy best practices.

2. SCOPE

This policy applies to all WLL permanent employees and temporary staff and third party service providers whom it has retained to support the delivery of its operations and services. Applicable provisions of this policy must be addressed in WLL's agreements with third party service providers as required. This policy applies to WLL services which may impact the privacy of PHI in its care.

3. GUIDING PRINCIPLES

WLL strives to uphold a corporate pledge to respect personal privacy and safeguard individual record confidentiality and system security. The following principles give substance to this commitment. They are based on those contained in the CSA Model Code for the Protection of Personal Information.

3.1 Accountability

- 1. The Board of Directors of WLL is responsible for ensuring that WLL is in compliance with applicable privacy laws and regulations, and with the privacy and security policies of WLL.
- 2. Responsibility for implementing a privacy program is delegated to the CPSO of WLL. The CPSO of WLL is responsible for the day-to-day management of the WLL privacy program to ensure the protection of PHI and the protection of patient privacy rights under applicable legislation.
- 3. All employees and contractors of WLL are responsible for:
 - a) Understanding and following all privacy and security policies and procedures established by WLL.
 - b) Safeguarding the privacy and confidentiality of PHI collected, used and disclosed in the course of their duties.
 - c) Acting in a timely and cooperative manner to prevent, detect and respond to security and privacy breaches or other incidents.
 - d) Protecting their passwords and other devices (e.g. keys, access cards, access tokens) that enable access to WLL information assets.

3.2 Identified Purposes

- 1. WLL collects, uses and discloses PHI for the following purposes:
- (a) Assisting with the provision of healthcare, to individuals.
- (b) Improving WLL's internal data processing, speech recognition, and machine learning algorithms, and statistical models used for analysing PHI, in order to allow WLL to continuously improve the services it offers to its clients.
- (c) Conduct academic research in compliance with protocols approved by a Research Ethics Board (REB).

2. PHI collected by the WLL cannot be used for any other purpose without the written authorization of WLL's clients.

3.3 Consent

1. WLL relies on the consent policies of the client organization for the collection, use and disclosure of PHI and their execution of consent directives on behalf of individuals or their substitute decision makers, or direction given by a Research Ethics Board for academic research.

3.4 Limiting Collection

- 1. WLL will collect, directly or indirectly, only those data necessary to satisfy the purposes identified in section 3.2.
- 2. WLL will limit collection of personal data to those data which are relevant, necessary and consistent for the purposes for which they are collected, as identified at the time of collection.
- 3. Data shall be collected by fair and lawful means.

3.5 Limiting Use, Disclosure and Retention

1. WLL will only use, disclose and retain PHI for purposes consistent with those for which they were originally collected or as permitted or required by law.

3.6 Accuracy

1. WLL shall endeavour to ensure the integrity (quality, accuracy, and reliability) of records under its control, whether in written, electronic, or other form.

Questions regarding the accuracy of individual records are to be directed back to the original data collector for resolution.

3.7 Safeguards

1. WLL applies physical, administrative, and technical safeguards to protect PHI against loss or theft, or from unauthorized access, disclosure, copying, use, disposal or modification. Refer to the *WLL Information Security Policy* for more information.

3.8 Openness

 Upon request, WLL will make specific information about its policies and practices relating to its handling of PHI available to stakeholders including client organizations and individual clients.

3.9 Individual Access

- 1. Where PHI is supplied to WLL by client organizations and healthcare providers, requests for individual access and/or correction of PHI will be referred to the original data collector.
- 2. Where WLL collects PHI directly from individuals, they shall be informed, upon request, of its existence, use, and disclosure, and shall be given access to it.
- 3. In certain situations, WLL may not be able to provide access to all the PHI it holds about an individual. For example,
 - a. WLL may refuse to disclose PHI if the disclosure could reasonably be expected to result in immediate and grave harm to the individual's safety or mental or physical health.

- b. WLL may refuse to disclose PHI that contains references to other individuals and information subject to solicitor-client privilege.
- 4. An individual shall be able to challenge the accuracy and completeness of PHI and to have the PHI amended as appropriate.

3.10 Challenging Compliance

An individual shall be able to challenge WLL's compliance with the above principles. Challenges must be submitted in writing to the CPSO.

4. INFORMATION PRIVACY PROGRAM

WLL shall implement an Information Privacy Program that shall include:

- 1. Privacy and security training for employees and contractors of WLL.
- 2. Ensuring that all agents of WLL and the client organizations who have access to PHI held by WLL have signed a confidentiality agreement.
- 3. A process to receive, investigate and resolve questions or complaints from patients, substitute decision makers and the public.
- 4. A program to monitor and audit access to records of PHI to detect privacy breaches.
- 5. Investigation of privacy breaches and recommendations for corrective action to avoid similar breaches in the future.
- 6. Conducting, or overseeing the development of Privacy Impact Assessments for WLL and WillAssess.

- 7. Development and publication of a Statement of Information Handling Practices for stakeholders and the public.
- 8. Ensuring that agreements or contracts with third parties who require access to PHI contain provisions to adequately protect PHI.

5. VIOLATIONS OF THIS PRIVACY POLICY

- 1. Any violation of this Privacy Policy by an employee of WLL is subject to disciplinary sanctions as determined by WLL, up to and including dismissal.
- 2. Any violation of this Privacy Policy by a supplier, vendor or contractor of WLL or their respective employees and agents, is subject to remedies identified in the agreement or contract. WLL may request the removal of a supplier, vendor or contractor employee who has violated this Privacy Policy.
- 3. Any violation of this Privacy Policy by an employee or agent of a client organization is subject to the disciplinary policies and procedures of the client organization. WLL may suspend individual users of WLL's WillAssess until any issues are resolved by the client organization.

6. POLICY ADMINISTRATION

This policy will be reviewed on an annual basis by the CPSO.

7. CONTACT

For more information about our privacy protection practices, or to raise a concern you have with our practices, contact us at:

Chief Privacy and Security Officer info@winterlightlabs.com

Individuals have the right to complain to the commissioner or regulator in the jurisdiction in which they reside.