

♡ Dialogue

Custodian Manual

A Reference Guide for Alberta Custodians

Introducing the Information Management Program for Custodians

The Alberta *Health Information Act* (HIA) and the regulations made under it establish the rules that must be followed for the collection, use, disclosure and protection of health information in the context of Clinical Services provided to Alberta residents.

The primary objective of the *Information Management Program for Custodians* (the “**Program**” or “**IMPC**”) is to facilitate the administration of statutory obligations that Applicable Privacy Legislation requires Custodians to obey by virtue of their chosen field of practice.

Dialogue developed this Program after careful and informed internal deliberation and consultation with external counsel and health consultants. We are confident that the Program is the most effective way **you can focus on what you do best: providing top quality care**, all while ensuring your compliance with Applicable Privacy Legislation and minimizing your regulatory and legal exposure.

This Custodian Manual aims to present the resources available to Custodians of health information who have decided to retain the services of Dialogue as Information Manager through the Program to help them administer their obligations under the HIA.

Why an Information Management Program for Custodians?

Recognizing the impracticality of having Health Services Providers independently administering their obligations under these frameworks, Dialogue has worked closely with its medical and legal advisors to design a Program which would help Health Services Providers meet their obligations as Custodians of health information and focus on their work as clinical advisors.

To this end, the *Information Manager and Custodian Agreement* (“**IMCA**”) defines the Information Management Services offered by Dialogue to health practitioners (Section 5). It also clarifies the roles and responsibilities of Dialogue, as an Information Manager (Section 4), and includes a reminder of the obligations applicable by law to Custodians of health information (Section 3).

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INFORMING CUSTODIANS : Understanding your role as “Custodian” of health information

Health Services Providers as Custodians of health information

Certain provinces have adopted laws and regulation to govern the collection, use and disclosure of health information. In Alberta, the *Health Information Act* and its regulation designate “Custodians” of health information as Health Services Providers or organizations that are in the health sector (Section 1(1)(f)), who have “health information” (Section 1(1)(k)) in their custody or under their control. This information includes “diagnostic, treatment and care information” and “registration information”.

The *Health Information Act Regulation* designates the following health professionals as Custodians:

- Regulated members of the College of Physicians and Surgeons of the Province of Alberta;
- Regulated members of the College and Association of Registered Nurses of Alberta (as of September 1, 2011).

Where Custodians operate within a collaborative structure, it is common practice for them to designate a single common agent to help them administer their various responsibilities under law. In Alberta, these agents are designated as “**affiliates**”. Affiliates can include Information Managers, as well as other agents who specialize in information management, information technology or privacy regulations.

Your obligations under the HIA and its regulation:

To help you gain a better understanding of your obligations, Dialogue has designed an optional training for Alberta Custodians on the Alberta *Health Information Act*. Please refer to the [Notion Page](#) to access all resources available to you.

SUPPORTING CUSTODIANS:

How the IMPC helps you meet your Custodian obligations

Understanding the IMPC and IMCA

Health privacy laws do not authorize Custodians to exclude or transfer their responsibility for the health information over which they have control or custody. That being said, Custodians can retain the services of agents or Health Services Providers to help administer certain responsibilities they have under the law.

These are some of the key responsibilities Dialogue offers to support you with, as your Information Manager:

- ***Develop and implement policies and procedures related to the processing of health information (s.63 HIA) :***

Dialogue's Privacy Program applies to all its employees, contractors, consultants, directors and officers (see Dialogue's Privacy Program Notion page for a list of policies and guidelines included in the Privacy Program).

These policies and procedures have been developed and reviewed to ensure compliance with laws and regulations applicable in all jurisdictions in which Dialogue operates and its employee/contractor Custodians serve their patients, including Alberta.

Through the Information Management Program, Dialogue undertakes to develop, implement and regularly review the policies and procedures that are required for Custodians to meet their obligations. These policies and procedures are already applied by Dialogue and available for your consultation.

- ***Privacy impact assessment (PIA)(s.64 HIA):***

Certain provinces (ex: Alberta) require that Custodians conduct and file, with relevant regulatory authorities, a PIA that describes how the information management systems may affect the privacy of their patients.

Dialogue, as Information Manager, undertakes to conduct required PIAs to ensure that Custodians meet the requirement under law. Although PIAs will be completed by Dialogue, Custodians will be provided with the opportunity to review and endorse any PIA performed in connection with the health information they collect and use. Dialogue will ensure the PIA is submitted to the appropriate regulatory bodies for review and to make any adjustments which may be required to ensure continued compliance.

- ***Third-party Service Providers (s.8(4)(7) Alberta Health Information Regulation):***

Dialogue is committed to upholding the highest standard of health information protection and has accordingly stated in its Information Management Program that any third-party Service Provider agreement would be with third-parties operating in Canadian jurisdictions and that medical records would be stored on servers physically located in Canada.

In addition, Dialogue undertakes to ensure that all agreements with third-party Service Providers include the

required safeguards, which are meant to ensure continued control by Custodians as well as a reasonable opportunity to monitor compliance with terms and conditions. These safeguards are listed in section 5(c) of the IMCA.

- ***Individual Rights Requests & Other Requests to Access (Part 2 HIA) :***

The Alberta *Health Information Act* provides for multiple instances where a patient or another third-party (for instance, a researcher) may request access to health information held by a Custodian.

The IMCA provides for different mechanisms which will allow Custodians to process these requests efficiently and within the delays provided by law. These mechanisms are detailed in section 5 of the IMCA.

- ***Incident Response :***

While the various administrative, technical and physical safeguards put in place by Dialogue are designed to provide the highest level of protection for the confidentiality of health information, there always remains a residual risk of Privacy Incidents pertaining to that health information.

As Information Manager, Dialogue undertakes to investigate and respond to any Privacy Incident involving health information on behalf of Custodians. Dialogue will notify Custodians of any Privacy Incident pertaining to the health information in their control or custody as soon as practicable. To learn more about Dialogue's Incident Response commitment, please refer to section 5(g) of the IMCA and to Dialogue's Incident Response Plan.

To facilitate your review of the Program, we have prepared, for your convenience, a checklist table of the HIA Regulation requirements with their corresponding sections in the IMCA. Please refer to [Appendix A - Checklist - Compliance with HIA Regulation](#).

Your Protection under the IMPC

This Program aims to reduce to a minimum the risks of non compliance by ensuring that the duties for which Custodians are accountable are integrated in a company-wide structure of compliance and risk management, overseen notably by Dialogue's Privacy Officer and Director of Risk Management and Compliance.

While the risk of non compliance cannot be fully excluded, Dialogue undertakes to indemnify and defend Custodians who may be implicated in an allegation of non compliance, provided that such allegation is not related to the Custodian's own negligence (Section 7 IMCA).

Monitoring Compliance under the HIA

This Program provides a series of measures designed to help Custodians monitor their and Dialogue's compliance under Applicable Privacy Legislation.

Dialogue notably undertakes to provide Custodians with access to its records related to the provision of Information Management Services to the extent necessary to ensure we respect our obligations as Information Manager, subject only to operational constraints. In the event that any such monitoring reveals that Dialogue is non-compliant with its obligations under this Program, it will ensure prompt actions to bring itself into compliance.

In the spirit of optimizing support in the administration of the Act as well as opportunities for meaningfully monitoring of compliance with the terms and conditions of the IMCA, Custodians will benefit from the support of Dialogue's expert Privacy and Security Committee (the “**Committee**”), who is already responsible for ensuring the security and protection of health information processed by Dialogue, as required by Applicable Privacy Legislation.

The Committee is composed of senior representatives from the departments mostly concerned with the protection of health information, notably the Privacy Officer, Chief Information Security Officer, Chief Technology Officer, Chief Financial Officer, Medical Director, Director of IT & Security and Director of Risk Management and Compliance.

In this role, the Committee will ensure that Custodians are well informed about the measures put in place by Dialogue to administer compliance and coordinate all efforts required to obtain Custodian's approval, where required by the IMPC. In addition, at least once annually, the Committee will assess and confirm Dialogue's compliance under the IMCA to Custodians.

We strongly encourage you to refer back to Dialogue's Internal Privacy Policy and Privacy Program (which you have been asked to acknowledge) for more details about how the company is structured to meet the highest standards in terms of information privacy and confidentiality.

Your Support Team

Under the HIA, the Custodian has the obligation to establish the structure necessary to administer the Health Information Act :

- Designate a responsible person(s)
- Establish an appropriate implementation support team
- Identify and communicate with other “affiliated” Custodians

As an Information Manager for Custodians, Dialogue provides you with information management, administrative and clinical support services and staff, including maintenance, quality control, quality improvement and support (“**Information Management Services**”).

Privacy and Security Committee

Dialogue has established a **Privacy and Security Committee** to oversee all the day to day privacy requirements for all the business operations within both Dialogue as parent company, and any subsidiaries, to ensure that compliance, legal, risk and operational needs are met.

The Committee is made up from a broad range of stakeholders from across the relevant teams including the Privacy Officer.

Privacy Officer (“PO”)

Dialogue's Custodians designate Dialogue's PO to support them in complying with their duties and obligations under Applicable Provincial Health Privacy Legislation. The Custodians remain ultimately accountable for complying with such Legislation and for ensuring the protection of Personal Health Information under their control or custody. The PO is responsible for implementing, managing and ensuring the adequacy of Dialogue's Privacy Program and overseeing the organization's general compliance with Applicable Privacy Legislation.

To support the Custodians, the PO ensures the following :

- On an annual basis and as updated from time to time, review and approve any changes to the Privacy Program to ensure for compliance with your requirements under Applicable Privacy Legislation;
- Ensure that all staff and contractors employed by Information Manager are aware of their responsibilities and duties under Applicable Privacy Legislation;
- Represent Custodians, as well as Dialogue in dealings with the provincial and federal privacy commissioners (eg. OIPC).
- Ensure that PIAs are completed, updated and submitted to regulatory bodies in accordance with Applicable Privacy Legislation;
- Ensure compliance with annual reporting requirements under Applicable Privacy Legislation;
- Oversee the incident management process and ensure that all factors relating to an assessment of whether there is risk of harm are appropriately incorporated into the process.
- Monitor compliance and address privacy compliance issues in the clinical setting;
- Ensure that all privacy policies and security procedures are developed and maintained under all applicable privacy laws and regulations, including the HIA and its regulation;
- Advise on opportunities to disclose health information;
- Process requests for access to health information; and
- Monitor adequate retention and disposal of health information

For more information about the roles and responsibilities of the Committee as well as of the Privacy Officer, please refer to the ***Privacy and Security Committee Charter*** or contact the Privacy team at privacy@dialogue.co.

TRAINING CUSTODIANS : Resources to better equip you in your role as Custodian

As part of your onboarding into the IMPC, you will be provided with access to the following resources.

[Information Management Policies and Guidelines](#)

- Disclosure of Personal Information Operating Guideline
- Privacy and Security Committee Charter
- Internal Privacy Policy
- Personal Information Retention and Destruction Operating Guideline
- Management of Individual Rights Requests Operating Guideline
- Privacy Impact Assessment Operating Guideline
- Privacy Protection Operating Guideline - Outsourcing
- Contract Review Operating Guideline
- Incident Response Plan
- And more.

Security Policies & Training

- [Dialogue Information Security Policy](#)
- [Electronic Monitoring Policy](#)
- [General Info on Information Security](#)
- [Security Best Practices and information on security awareness training](#)
- [CIRA Cybersecurity awareness training platform](#)
- [Dialogue Code of Conduct](#)
- [Talent & Culture Policies](#)

Training and Awareness

- Internal training
 - o Overview of Information Management Program for Custodians (Alberta)
 - o Overview of the Alberta HIA for Custodians
 - o Privacy Impact Assessments : A Guide for Custodians
 - o Training: Overview of Dialogue's Privacy Program
 - o Medical Operations - Privacy Training (French-English)
- Applicable Privacy Legislation and regulation
 - o [Health Information Act](#)
 - o [Health Information Regulation](#)
- Alberta Health Guidelines and Practices Manual
 - o Government of Alberta, [Health Information Act - Guidelines and Practices Manual](#), 2011
 - o Alberta Health, [Health Information Act Guidelines and Practices Manual - Chapter 15: 2020 amendments](#), 2021
 - o Alberta Health, [Health Information Act Guidelines and Practices Manual - Chapter 14: 2020 amendments](#), 2018
- Professional Standards
 - o College of Registered Nurses of Alberta, [Privacy and Management of Health Information Standards](#), March 2020
 - o College of Registered Nurses in Alberta, [Privacy and Security Policies for Custodians Information and Templates](#), March 2020
 - o College of Physicians & Surgeons of Alberta, [Physicians as Custodians of Patient Records](#), September 2018 (Last revised: Sep 2019)

Additional Information

If you have any questions concerning the Information Management Program or need to report any concern pertaining to the collection, retention, disclosure or use of health information, please contact the Privacy Officer at privacy@dialogue.co.

Version History:

Version Number	Effective Date	Revision Date
1	February 1, 2023	February 1, 2023
2	August 1, 2024	August 1, 2024

Appendix A: Checklist - Compliance with HIA Regulation

The following checklist table allows you to quickly compare the HIA regulation requirements with their corresponding sections in the IMCA.

Section 7.2 of the HIA Regulation states that for the purposes of [section 66\(2\)](#) of the HIA, an agreement between a Custodian and an Information Manager must include at least the following:

Section 7.2 HIA Regulation Requirement	Corresponding Sections in the Information Management Program
a) identify the objectives of the agreement and the Not addressed principles to guide the agreement,	The Preamble to the IMPC explains the context, the objectives and the principles that are meant to guide your understanding of the IMPC.
(b) indicate whether or not the Information Manager is permitted to collect health information from any other custodian or from a person and, if so, describe that health information and the purpose for which it may be collected,	Section 8 of the IMPC directs that Dialogue may offer Information Management Services to other Healthcare Services Providers and that it may, as a result, collect Health Information from them for the same purposes as those listed in this IMCA.
(c) indicate whether or not the Information Manager may use health information provided to it by the custodian and, if so, describe that health information and the purpose for which it may be used,	<p>The principles guiding the use of health information by Dialogue, as Information Manager, are listed in Section 4 of the IMPC.</p> <p>Specifically, Subsection 4(g) establishes that Dialogue shall collect, use and disclose Health Information, including Medical Records, to provide the Information Management Services and otherwise in accordance with the Privacy Policy, instructions provided by the Custodian, any wish expressed by the Member or as required by Applicable Privacy Legislation or regulations.</p> <p>In doing so, Dialogue also undertakes to limit the collection, use and disclosure of health information to the minimum extent necessary to carry out the listed purpose (Subsection 4(f) IMCA).</p>
(d) indicate whether or not the Information Manager may disclose health information provided to it by the custodian and, if so, describe that health information and the purpose for which it may be disclosed,	As it pertains to the disclosure of health information, Dialogue undertakes to act in strict accordance with the terms of the IMCA, Applicable Privacy Legislation and any other applicable legislation and to prevent access to stored health information to any person

	<p>other than for the purposes referenced in the IMPC without Member’s written consent (see Subsection 4(e) IMCA).</p> <p>Therefore, in addition to the purposes listed at subsection 4(g) IMCA (see above), Dialogue is authorized to disclose health information to other Health Services Providers or Third-Parties for purposes of facilitating the provision of Health Services; for clinical practice audits; to comply with a court order, legal proceeding or other legislative or regulatory requirement; and for research or statistical purposes, when anonymised or aggregated (Subsection 4(h) IMCA).</p>
(e) describe the process for the Information Manager to respond to access requests under Part 2 of the Act or, if the Information Manager is not to respond to access requests, describe the process for referring access requests for health information to the custodian itself,	The process for the Information Manager to respond to access requests under Part 2 of the Act is described at Subsection 5(d) IMCA .
(f) describe the process for the Information Manager to respond to requests to amend or correct health information under Part 2 of the Act or, if the Information Manager is not to respond to requests to amend or correct health information, describe the process for referring access requests to amend or correct health information to the custodian itself,	The process for the Information Manager to respond to requests to amend or correct health information under Part 2 of the Act is described at Subsection 5(d) IMCA .
(g) describe how health information provided to the Information Manager is to be protected, managed, returned or destroyed in accordance with the Act,	The description of how health information will be retained in accordance with the HIA is found in the provisions of Section 4 and Section 5 of the IMCA, which respectively state the general obligations and duties of the Information Manager, as they pertain notably to the protection, management and retention of health information.
(h) describe how the Information Manager is to address an expressed wish of an individual relating to the disclosure of that individual’s health information or, if the Information Manager is not to address an expressed wish of an individual relating to the disclosure of that individual’s health information, describe the process for referring these requests to the custodian itself	<p>Subsection 5(h) IMCA explains how, in disclosing health information, Dialogue undertakes to make reasonable efforts to respect Member’s expressed wishes and ensure the person to whom disclosure is made is the person authorized to receive such information.</p> <p>Dialogue will further ensure the respect of the HIA’s notation and data matching requirements when disclosing identifiable health information.</p>
(i) set out how an agreement can be terminated.	The “ Term and Termination ” section explains that the IMPC remains in full force and effect until such time as your employment

	or contractor relationship with Dialogue is maintained or is terminated in accordance with the terms set out therein.
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