



PRIVACY PRACTICE IN THE CMMS

1. Introduction

1.1 Purpose

The purpose of this policy is to clearly define the Privacy Practice of BCBME.

1.2 Scope

1.2.1 Included

This policy covers Personal Information (PI) of patients/clients and Business Contact Information of staff, and vendors.

1.2.2 Excluded

None

2. Policy

BCBME will:

- Comply with all aspects of the Freedom of Information and Protection of Privacy Act (FIPPA)
- Adhere to the specific actions described in this procedure to ensure that no PI gets recorded in the CMMS
- Under no circumstances enter, attach documents or other articles of information that include PI into the CMMS
- Record staff and vendor Business Contact Information only if considered essential for business continuity. (Note that vendor reports attached to work orders are considered essential).
- Audit the CMMS regularly to check for any PI

3. Procedure

3.1 All Staff

- Personal Information
 - Types of PI are presented in Table 1
 - Under no circumstances shall patient, staff, or vendor PI be recorded in any field of the CMMS
- Business Contact Information:
 - Types of Business Contact Information are presented in Table 2

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- Business Contact Information of staff and vendors can be recorded in the CMMS if considered essential for business continuity.
- Staff and Vendor Business Contact Information
 - Record Staff and Vendor Business Contact Information only when essential for Quality Improvement purposes or to meet the following requirement of work order recording: *"What would someone need to know about the work I did, at a later time, if they were looking at the work order?"*
 - Vendor Business Contact Information that is included in service reports or vendor letters that need to be uploaded into the CMMS is acceptable and can be attached in the CMMS
 - Do not record any statements/actions of a staff member or assumptions without factual evidence
 - Prior to recording staff Business Contact Information, ask yourself the following questions:
 - 1) Is this information essential for the understanding of the WO?
 - 2) Is this information relevant now, and will it still be in 5 years' time?
- Examples of best practices for recording information in the CMMS can be found in Appendix A
- Review all Web Request work orders submitted by the customer for any PI and redact it immediately in the CMMS (Customer business contact information is considered essential and should not be redacted)
- Review PSLs event descriptions for any PI and redact it before entering the information in the CMMS
- Review the following types of attachments for PI. If any is discovered, do not attach the document until the information is removed, redacted, or made unreadable:
 - Incident investigation reports
 - PSLs Biomedical Engineering Safety Reports (exported from PSLs), in applicable HAs
 - Photographs of people or medical equipment having visible PI (e.g. screen captures)
 - Recorded conversations by video and/or audio

Table 1: Types of Personal Information

Personal Information Type	Patient	Vendor	Staff
First Name	Never	If essential	If essential
Last Name	Never	If essential	If essential
Home Address	Never	Never	
Home Phone Number			
Personal Email			
Date of Birth			
Age			
Gender			
Sexual Orientation			
Marital or Family Status			
Personal Health Number (PHN)			
Insurance Plan Code			
Racial Origin or Ethnicity			
Skin Colour			
Religious Beliefs or Associations			
Primary Diagnosis			
Blood Type			
Social Insurance Number (SIN)			
In-patient Hospital Number			
Digital Image of Body			
Other personal identifying information not identified herein			

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Table 2: Types of Business Contact Information

Business Contact Information Type	Vendor	Staff
First Name	If essential	If essential
Last Name		
Business Email		
Position Name or Title		
Pager Number		
Business Address		
Business Phone Number		
Business Fax		

3.2 System Administrators

- Do NOT include any PI, in the Resource Module of the CMMS. Per Table 2, business contact information of vendor or staff is acceptable.
- Record search tools and strategies and perform biannual audits that search for PI
- Immediately redact any PI that is discovered
- Take steps to prevent and/or minimize the risk of reoccurrence, including any further education or training of staff
- Document the statistical results of the audits and report them to the Health Authority Director (or Executive Director)

3.3 Health Authority/Executive Director

- Should there be an observed breach of this policy regarding PI, report the audit results and corrective actions to the relevant Privacy Office immediately.
- Follow the recommended actions of the Privacy office and provide direction to remediate the breach of PI.
- Note that it is a duty of our organizations' privacy policies to report a breach.
- LMBME Executive Director only: As required, oversee the Privacy Policy and Procedure for the LMBME and report to PHC privacy group and the Customer Service Committee if there is a breach.
- Biomed Manager or Director of other health authorities: report breach to the privacy department.

4. Compliance

All BCBME staff members are responsible for adhering to this policy and monitoring their activities in accordance with the policy. If a staff member recognizes an unintentional breach of the policy, they MUST contact their supervisor to receive guidance on how to remedy the breach. Staff members MUST advise their respective leadership if they observe a violation of this policy. Failure by staff to comply with this

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policy may result in disciplinary action up to and including termination of employment, services, or privileges.

5. Definitions

5.1 BCBME Definitions

Acronym or Word	Description
BCBME	British Columbia Biomedical Engineering
CMMS	Computerized Maintenance Management System, which is the database that houses all medical device records, including repairs, inspections, purchase information, warranties, parts, etc.
HA	Health Authority
PHC	Providence Health Care
PSLS	Patient Safety Learning System
System Administrator	A BCBME person assigned the responsibility of system administrator for the CMMS. There is at least one system administrator for each Health Authority.

5.2 FIPPA Definitions

Acronym or Word	Description
FIPPA	Freedom of Information and Protection of Privacy Act
Personal Information (PI)	PI is defined as “any recorded information about an identifiable individual, other than business contact information”. This could be patient, staff, or vendor personal information.
Business Contact Information	Business Contact Information is defined as “information to enable an individual at a place of business to be contacted and includes the name, position name or title, business telephone number, business address, business email or business fax number of the individual.”
Privacy	The right to disclose one’s personal information.
Private Information	All patient, staff, and vendor personal information is considered private information, and it shall not be recorded. Business Contact Information is not considered private information, but should only be recorded in exceptional circumstances.

6. References

Providence Health Care - [B-00-11-10108: Information Privacy & Confidentiality Policy](#)

Vancouver Coastal Health – [D-00-11-30025: Information Privacy & Confidentiality Policy](#)

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Fraser Health: [Confidentiality and Security of Personal Information Policy](#)

Provincial Health Services Authority – [C-99-11-20353: Privacy and Confidentiality Policy](#)

Vancouver Island Health Authority – [Policy 1.5.1: Confidential Information – Privacy Rights of Personal Information](#) & [Policy 1.5.2: Confidential Information - Third Party, VIHA Business and Other Non-Personal Information](#)

Northern Health Authority – [Protection of Personal Information and Privacy Delegation](#)

Interior Health Authority – [AR0400: Privacy and Management of Confidential Information](#)

BCBME SOP P-14-16-40007 – [Work Order Recording](#)

Freedom of Information and Protection of Privacy Act. 1992 [1993 in force] (R.S.B.C. 1996, c.165.)

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APPENDIX A EXAMPLES OF BEST PRACTICE FOR RECORDING INFORMATION IN THE CMMS
Examples of Best Practice

Type of Information	Prohibited	Best Practice	Rationale
Patient	John Doe (Personal Health Number 1234567891) was injured when the medical device failed.	The patient was injured when the medical device failed.	<u>Under no circumstances record any PI in any field of the CMMS.</u>
Staff	Cardiologist Dr. Jane Doe said the medical device failed because a nurse was operating the device improperly.	Cardiologist Dr. Jane Doe can be contacted at 111-111-1111 for more information regarding the medical device failure.	Quoting a clinical staff member's opinion/statement could be misinterpreted, presenting an opportunity for misinformation to be recorded in the CMMS. To mitigate this, reference the staff member's Business Contact information so they can be contacted for the required information if needed.
	BMET John Doe at Lions Gate Hospital advised that the failure of the medical device was due to a faulty valve.	-	This situation should never occur. BMET's should be recording their own time charge for all of their work. If BMET John Doe worked on the device, he should create a time charge for himself on the work order. His opinion of the cause of medical device failure can be recorded in a comment attached to the time charge.
Vendor	GE technician Jane Doe performed service on the medical device to fix the faulty valve. [No external service report provided]	GE technician Jane Doe performed service on the medical device to fix the faulty valve. [External service report provided]	It is acceptable to record this statement only if it is factually accurate according to documentation provided by the vendor. An external service report should be provided by the vendor indicating precisely the work that they performed. A time charge should be created with the "ext-OEM" option and the comment should then be attached to that time charge.