



## STATEMENT OF INFORMATION PRACTICES

### Collection of Personal Health Information (PHI)

We collect personal health information about you either directly from you or from a person designated to make care decisions on your behalf. We collect PHI in order to provide you with health care by us or to assist in the provision of healthcare to you by other healthcare providers. The personal health information that we collect may include your name, date of birth, address, treaty number, health history, other records of your visits, the care that you received either at Sioux Lookout First Nations Health Authority or from other healthcare providers and the care you received during those visits.

Occasionally, we collect personal health information about you from other sources if we have obtained your consent to do so or if the law permits us to do so. We make sure that only those people who need to see your personal health records are allowed to look at them. We protect your Personal Health Information /Personal Identifiable Information through our privacy policies and by adopting appropriate safeguards and security measures.

### Permitted uses and disclosures of PHI

We may use and disclose your PHI:

- To communicate with your various health care providers including your family physician and/or other health care institutions for continuity of care, to treat/support and care for you (unless you tell us otherwise)
- To receive payment for your treatment and care (e.g. from OHIP, NHIB, WSIB, your private insurer, or other payors)
- To plan, administer and manage our internal operations; deliver programs and services; and to conduct risk management activities
- To conduct quality improvement activities (such as sending client satisfaction surveys)
- To teach, conduct research (only under strict rules overseen by a research ethics board) and compile statistics
- For funding purposes to improve our programs and services
- To contact a relative, friend or alternate decision maker, if the client is unable to make decision
- To comply with legal and regulatory requirements
- To fulfill other purposes as permitted or required by law

### Your choices and rights on your PHI:

You may access and correct your PHI or withdraw or withhold your consent by contacting us (subject to legal exceptions).

### Our commitments to protect your PHI:

- We take steps to protect your personal health information from theft, loss and unauthorized access, copying, modification, use, disclosure and disposal
- We conduct audits and complete investigations to monitor and manage our privacy compliance
- We take steps to ensure that everyone who performs services for us to protect your privacy and only use your personal health information for the purposes you have consented to

### Contact Information

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

#### By Mail:

Kiruthika R, Privacy Officer  
Sioux Lookout First Nations  
Health Authority,  
P.O. Box 1300, 61 Queen St,  
Sioux Lookout, ON P8T 1B8.

**By Telephone:** 807-737-3933

**By Email:** [privacy@slfnha.com](mailto:privacy@slfnha.com) /  
[Kiruthika.Radhakrishnan@SLFNHA.COM](mailto:Kiruthika.Radhakrishnan@SLFNHA.COM)

You have the right to complain to the Information and Privacy Commissioner of Ontario, if you think we have violated your rights.

The commissioner can be reached as follows:

#### Information and Privacy Commissioner of Ontario:

2 Bloor Street East, Suite 1400,  
Toronto, Ontario M4W 1A8.  
Ph: 416-326-3333 / 800-387-0073  
Fax: 416-325-9195  
TTY: 416-325-7539  
Email: [info@ipc.on.ca](mailto:info@ipc.on.ca) /  
[commissioner@ipc.ca](mailto:commissioner@ipc.ca)

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