

Security Camera Policy

Policy

Muscle and Spine is committed to protecting the safety of clients, patients, staff, visitors, and the security of equipment & property. To this end, Muscle & Spine has installed video surveillance where deemed necessary.

Muscle & Spine is also committed to respecting the personal privacy of individuals. To that end, this Policy is compliant with the obligations contained in the Freedom of Information and Personal Privacy Act, R.S.O. 1990 (FIPPA), Personal Health Information Protection Act, 2004 (PHIPA), and the Guidelines for the Use of Video Surveillance Cameras in Public Places from the Information and Privacy Commissioner of Ontario (IPC). This policy is also compliant with Muscle & Spine Policies regarding Privacy, Confidentiality, Confidentiality of Patient and Personnel Information and Social Media.

Definitions

1. "Authorized Personnel" - CEO, Practice Manager
2. "Personal information" is defined as recorded information about an identifiable individual, including:
 - information relating to the race, national or ethnic origin, colour, religion, age, sex, sexual orientation or marital or family status of the individual,
 - information relating to the education or the medical, psychiatric, psychological, criminal or employment history of the individual or information relating to financial transactions in which the individual has been involved,
 - any identifying number, symbol or other particular assigned to the individual,
 - the address, telephone number, fingerprints or blood type of the individual,
 - the personal opinions or views of the individual except where they relate to another individual,
 - correspondence sent to an institution by the individual that is implicitly or explicitly of a private or confidential nature, and replies to that

correspondence that would reveal the contents of the original correspondence,

- the views or opinions of another individual about the individual, and
 - the individual's name where it appears with other personal information relating to the individual or where the disclosure of the name would reveal other personal information about the individual.
3. "Personal health information" is defined as identifying information about an individual in oral or recorded form, if the information,
- relates to the physical or mental health of the individual, including information that consists of the health history of the individual's family,
 - relates to the providing of health care to the individual, including the identification of a person as a provider of health care to the individual,
 - is a plan of service within the meaning of the Home Care and Community Services Act, 1994 for the individual,
 - relates to payments or eligibility for health care, or eligibility for coverage for health care, in respect of the individual,
 - relates to the donation by the individual of any body part or bodily substance of the individual or is derived from the testing or examination of any such body part or bodily substance,
 - is the individual's health number, or
 - identifies an individual's substitute decision-maker.

In the context of video surveillance, any identifiable image of a patient is considered personal health information and is subject to PHIPA. Any identifiable image of an individual is considered personal information under FIPPA.

Procedure

Responsibility for the policy:

The CEO is responsible for ensuring compliance with the existing policy through periodic review.

Area covered by surveillance:

Surveillance shall not be placed in locations where there is a reasonable expectation of privacy, such as treatment rooms, change rooms or washrooms.

- Shipyards Medical Arts Centre: Reception including parts of the waiting room, main hallway in front of treatment rooms 5 and 6, back hallway in front of treatment rooms 10, 11 and 12.

Notification of surveillance:

Signs are prominently posted at each entry point of each building so that the public and staff have reasonable and adequate warning that surveillance is in operation (before entering the building).

In addition, the following information will be posted on Muscle & Spine's website: the legal authority for collection of personal information under FIPPA and PHIPA; the principal purpose(s) for which the personal information is intended to be used and the title and contact information of an individual who can answer questions about the collection.

Controlled access:

Muscle & Spine will retain control and responsibility for the video surveillance system and any records created by the system, including any personal information and personal health information collected.

The cloud-based storage is password protected and may be accessed by authorized personnel only.

Outsourcing of video surveillance:

Any service provider who is engaged to conduct or review video surveillance or install or repair surveillance equipment will also be subject to this policy.

Video surveillance schedule:

Video surveillance will be in effect 24 hours per day, each day.

Video surveillance use:

Active video surveillance will only be viewed by administrative staff for the purpose of safety concerns by monitoring activity at reception and public hallways. Recorded video surveillance will only be viewed by authorized personnel. The surveillance records will only be accessed once Muscle & Spine is aware of an incident necessitating their review. Surveillance records will not be reviewed on an ad hoc basis.

Any information obtained through a review of video surveillance will only be disseminated to those with a need to know for the purposes that the video was reviewed. Those receiving such information will undertake to maintain confidentiality related to any personal information they witness or of which they become aware.

Request for Review of Video Surveillance:

Requests for review of video surveillance recordings are to be approved by the CEO.

Release of video surveillance (only on presentation of legal documentation):

A Record Release Form must be completed before disclosing the record to officers of the law. The form will indicate the following:

1. Nature of the record;
2. Name of person receiving the record or a copy of the record;
3. Under what authority the record was released;
4. Date and time upon which the record was released;
5. Whether the record will be returned to RCHS or destroyed after use.

Release Forms will be logged and filed electronically by the CEO or practice manager.

Video surveillance retention and destruction:

Video surveillance records are retained for approximately 3 months. If video surveillance is used or viewed for a public safety or law enforcement reason and it contains personal information or personal health information, it must be securely retained for a minimum of one (1) year, as required by legislation.

Right of access:

An individual whose personal information or personal health information has been collected by a video surveillance system has a right of access to his or her personal information (FIPPA) or personal health information (PHIPA). Access may be granted to one's own personal information in whole or in part, unless an exemption applies

such as where disclosure would constitute an unjustified invasion of another individual's privacy.

Access to an individual's own personal information in these circumstances may also depend upon whether any exempt information can be reasonably severed from the record. Decisions regarding access will be made on a case-by-case basis in accordance with the provisions of FIPPA or PHIPA, as applicable.

An auditable log of any disclosure will be kept and include the date, time and location of the footage and, where applicable, the case file number of the law enforcement agency's investigation. The log will also include:

- a description of the circumstances justifying the disclosure,
- the amount of footage involved,
- the name, title and agency to whom the footage is being disclosed,
- the legal authority for the disclosure,
- the means used to disclose the footage and
- whether the footage will be returned or securely destroyed after use.

If digitized, the footage will be securely encrypted.

In the event of a privacy breach or unauthorized access to recorded video surveillance, Muscle & Spine will perform its due diligence and disclose such a breach to those involved where possible.

Annual audit:

The CEO is responsible to ensure that a compliance audit of electronic logs is performed annually to ensure no unauthorized access to recorded video surveillance has occurred and is responsible for reviewing the operation and effectiveness of the surveillance system on an annual basis.

Violation of this policy:

It is strictly prohibited for unauthorized individuals to view the video surveillance without legitimate reason or proper authorization. Employees who do so will be subject to disciplinary action, up to and including termination. In the event a contractor breaches this policy, Muscle & Spine retains the right to terminate the service contract.

References

Freedom of Information and Protection of Privacy Act, R.S.O 1990

Guidelines for the use of Video Surveillance Cameras in Public Places, Information and Privacy Commissioner of Ontario, September 2007

Personal Health Information Protection Act, R.S.O. 2004

Questions?

Any questions or concerns about this policy, for more information about our privacy practices or to raise a concern, please contact our Practice Manager at support@muscleandspine.ca. Click here to view our [Privacy Policy](#).

Muscle & Spine

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