

Canadian Institute for Health Information

Policy on the Security of Confidential Information and Use of Mobile Devices/Removable Media

Purpose

The purpose of this policy is to ensure

- a. That Confidential Information is protected and retained only on authorized CIHI computing devices/media and in authorized locations; and
- b. That Confidential Information temporarily stored on CIHI's mobile devices and removable media is secured in the event of theft or loss and is protected against unauthorized use, access, copying, modification, disclosure or disposal.

Scope

This policy applies to all CIHI staff.

This policy does not apply to information stored on removable media for data releases to external clients. The dissemination of data to external clients is subject to the *Methods of Dissemination Standard*.

Definitions

“CIHI Computing Devices/Media” means any computing device or media in the custody/control of CIHI or issued to CIHI staff, including but not limited to any mobile device.

CIHI staff means all full-time, part-time and contract employees of CIHI, individuals working at CIHI on secondment, students, temporary workers and certain external professional services consultants or providers who require and are authorized to access CIHI data or information systems as defined in CIHI’s Acceptable Use Policy.

“Confidential Information,” for the purposes of this policy, means Personal Health Information, Health Workforce Personal Information, De-Identified Data and Technical Information.

“De-identified Data” means Personal Health Information or Health Workforce Personal Information that has been modified using appropriate de-identification processes so that the identity of the individual cannot be determined by a reasonably foreseeable method.

“Health Workforce Personal Information” means information about a health service provider that identifies the specific individual, may be used or manipulated by a reasonably foreseeable method to identify the individual, or may be linked by a reasonably foreseeable method to other information that identifies the individual.

“Mobile Device” means any electronic device that provides mobile connectivity to CIHI’s networks. This includes but is not limited to smart phones, tablets and laptops.

“Personal Health Information” means health information about an individual that identifies the specific individual, may be used or manipulated by a reasonably foreseeable method to identify the individual, or may be linked by a reasonably foreseeable method to other information that identifies the individual.

“Privacy and Security Risk Management (PSRM)” means a formal, repeatable process for identifying, assessing, treating and monitoring risks in order to minimize the probability of such risks materializing and/or their impact should they occur.

“Removable Media” means any removable device capable of storing information. This includes but is not limited to CDs, DVDs and USB drives.

“Technical Information” means information about CIHI’s networks, servers, applications or computing environments. Technical information includes but is not limited to

- Specific technologies in use at CIHI;
- Log files and dump files;
- Network and application topologies/diagrams;
- Operating systems, software or hardware systems and versions;
- Application development tools and technologies;
- Information about CIHI’s information security controls;
- Application code;
- System configuration files;
- Data models and database schema information; and
- Results of information security audits assessing CIHI’s information processing systems.

Policy

CIHI staff are to perform work either on CIHI’s premises or over its secure networks, using CIHI-issued computing devices/media and in keeping with CIHI’s privacy and security policies, procedures, standards and guidelines, subject only to any specific and exceptional circumstances as set out below.

Specifically,

Personal Health Information

- Shall not be removed from CIHI’s premises in paper form;
- Shall not be sent by email, either internally or externally, unless authorized and with appropriate safeguards;
- Shall not be stored on mobile devices or removable media except in specific and exceptional circumstances where a PSRM assessment has been undertaken and where prior approval has been given by the relevant vice president; and
- Shall not be accessed using CIHI’s VPN from outside of Canada.

Health Workforce Personal Information

- Shall not be removed from CIHI’s premises in paper form;
- Shall not be sent by email, either internally or externally, unless authorized and with appropriate safeguards;

- Shall not be stored on mobile devices or removable media except in specific and exceptional circumstances where a PSRM assessment has been undertaken and where prior approval has been given by the relevant vice president; and
- Shall not be accessed using CIHI's VPN from outside of Canada.

De-Identified Data

- Shall not be removed from CIHI's premises in paper form;
- Shall not be sent by email, either internally or externally, unless authorized and with appropriate safeguards;
- Shall not be stored on mobile devices or removable media except in specific and exceptional circumstances where a PSRM assessment has been undertaken and where prior approval has been given by the relevant vice president; and
- Shall not be accessed using CIHI's VPN from outside of Canada.

Technical Information

- Shall not be removed from CIHI's premises in paper form;
- Shall not be sent by email externally, unless authorized and with appropriate safeguards as set out in the Third-Party Technical Information Disclosure Standard;
- May be sent by email internally only; and
- Shall not be stored on mobile devices or removable media unless the mobile device or the media is encrypted according to CIHI's current encryption standards.

CIHI staff are prohibited from retaining Confidential Information on a mobile device or removable media if other information (e.g., de-identified and/or aggregate information) will serve the identified purpose. When using mobile devices or removable media, and the requisite approval has been obtained as set out above,

1. Only the minimum amount of Confidential Information required for the identified purpose may be stored on mobile devices and removable media on a temporary basis;
2. Once the identified purpose for temporarily storing the Confidential Information on mobile devices and removable media has been accomplished, the Confidential Information shall be removed or destroyed, where possible, within 5 days of completion; and
3. Confidential Information temporarily stored on mobile devices and removable media will be
 - a. Stored on CIHI-issued equipment;
 - b. De-identified to the fullest extent possible; and
 - c. Encrypted in keeping with CIHI's *File Encryption Procedures*. Mobile devices must be password protected in accordance with the User Password Guidelines.

Compliance

CIHI Code of Business Conduct describes ethical and professional behaviour related to work relationships, information (including personal health information) and the workplace. The code requires all employees to comply with it and all of CIHI's policies, protocols and procedures. Compliance with CIHI's Privacy and Security Program is monitored, and instances of non-compliance with privacy and security policies are managed through the *Privacy and Security Incident Management Protocol*. Violations of the code, including violation of privacy and security policies, procedures and protocols, are referred to Human Resources, as appropriate, and may result in disciplinary action up to and including dismissal.

For more information:

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