



Statements of Purpose for Data Holdings Containing PHI/PI Policy

Department	Document Number	Organizational Scope	ICES Site	IPC Scope
PLO	PO.013	ICES Network Policy	ICES Network	All Acts
Original Date (Month yyyy)	Last Review Date (Month yyyy)	Frequency of review	Next Review Due Date (Month yyyy)	Supersedes (if applicable)
September 2022	N/A	Triennially	September 2025	N/A
Authority (Title)		Policy Owner (Title)		
Chief Privacy and Legal Officer		Director, PLO		
Required Reviewers (Titles)				
N/A				

Please refer to the [glossary](#) for terms and definitions.

1.0 PURPOSE

1.1 The purpose of this **Policy** is to set out that **Statements of Purpose (“SOP”)** for **ICES Data Holdings** containing **Personal Health Information (“PHI”)** and **Personal Information (“PI”)** must be:

- 1.1.1 developed and implemented each time ICES collects **PHI/PI** as authorized in a **Privacy Impact Assessment (“PIA”)**;
- 1.1.2 reviewed and maintained regularly to ensure accuracy;
- 1.1.3 amended in accordance with any **Data Sharing Agreement (“DSA”)**; and
- 1.1.4 approved by the ICES Manager, Privacy.

2.0 SCOPE

2.1 This policy applies to all **ICES Agents** involved in the development, implementation, review, and maintenance of **SOPs**.

3.0 ROLES AND RESPONSIBILITIES

4.0 DETAILS

4.1 Collection

- 4.1.1 All **SOPs** must include:
 - a. The purpose of the **ICES Data Holding**,
 - b. The **PHI/PI** contained in the **ICES Data Holding**;
 - c. The source(s) of the **PHI/PI**; and
 - d. The need for the **PHI/PI** in relation to the identified purpose.



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- 4.1.2 ICES Privacy **Subject Matter Experts** (“**SMEs**”) are expected to complete the **SOPs** following the conclusion of a **PIA** for each **ICES Data Holding** containing **PHI/PI**.
- 4.1.3 ICES Privacy **SMEs** are expected to consult with the ICES Director, Strategic Partnerships or their delegate to confirm the **SOP** before finalizing the **PIA**.
- 4.1.4 From time to time, other ICES departments may need to be consulted in the development of a **SOP**. All ICES Privacy **SMEs** are expected to engage those individuals who can contribute to an accurate **SOP**.
- 4.1.5 All ICES Privacy **SMEs** have delegated authority to approve the **SOP** in the **PIA**, as directed by the ICES Manager, Privacy.
- 4.1.6 The ICES Manager, Privacy has been delegated day-to-day authority to manage the privacy program with respect to **SOPs** and can, at their discretion, review any **SOP** completed by the ICES Privacy **SME**.
- 4.1.7 All **SOPs** must be included in **DSAs** which are executed between ICES and the **Data Provider** disclosing the **PHI/PI** to ICES.
- 4.1.8 Following the execution of a **DSA**, all **SOPs** must be posted on the ICES **Data Holdings Obligations** (“**DHO**”) page by the ICES Risk and Compliance Analyst such that access is enabled to all **ICES Agents**.
- 4.2 Review and Maintenance
 - 4.2.1 The ICES Director, **Privacy and Legal Office** (“**PLO**”) must review **SOPs** on an ongoing basis to ensure:
 - a. Their continued accuracy; and
 - b. That the **PHI/PI** collected for the purposes of the **ICES Data Holding** is still necessary for the identified purpose.
 - 4.2.2 The ICES Director, **PLO** must set out a schedule at the beginning of each fiscal year which outlines the plan for reviewing **SOPs**.
 - 4.2.3 Such plan for reviewing **SOPs** must be approved by the ICES **Chief Privacy and Legal Officer** (“**CPLO**”) and included in any operational work for the ICES **PLO**.
 - 4.2.4 Any changes to the **SOPs** must be discussed at the ICES Science Office, Privacy, Research & Development (“**SOPRAD**”) meeting, which includes individuals from the Science Office, Compliance, Privacy, Strategic Partnerships, and Research and Analysis at ICES.
 - 4.2.5 Any changes to the **SOPs** must be ultimately approved at the ICES **Change Advisory Board** (“**CAB**”).
- 4.3 Amendment
 - 4.3.1 An **SOP** must be amended prior to undertaking activity that is inconsistent with the **SOP** as approved.
 - 4.3.2 Any amendments to **SOPs** must be mutually agreed to by ICES and the applicable **Data Provider** and reflected in an amendment to the **DSA** and, if applicable, **REB** approval.



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5.0 RELATED DOCUMENTATION

- 5.1 *Ongoing Review of Privacy and Security Policies, Procedures, Practices, and Exceptions Policy*
- 5.2 *Change Management Policy*
- 5.3 *Privacy and Security Audit Policy*
- 5.4 *Termination or Cessation of Employment or Contractual Relationship in Relation to ICES Data Policy*
- 5.5 *Discipline and Corrective Action in Relation to ICES Data Policy*
- 5.6 *Privacy and Security Incident Breach Management Policy*

6.0 TRAINING AND COMMUNICATION

- 6.1 Policies are available on the **ICES Intranet**.
- 6.2 This **Policy** and any administrative **Procedures** are communicated to all **ICES Agents** across the **ICES Network** during onboarding and on a yearly basis. **Policy** awareness is also supported and promoted by the **Policy Owner**.
- 6.3 Once new **Policies** are published to the **ICES Intranet**, they are communicated to **ICES Employees** in ICES OnTap, the weekly email with the organization's internal updates.

7.0 COMPLIANCE AND ENFORCEMENT

- 7.1 **ICES Agents** must comply with all applicable ICES **Policies** and **Procedures**.
- 7.2 **ICES Agents** must notify an ICES Privacy **Subject Matter Expert ("SME")** or ICES Security **SME** at the first reasonable opportunity if they breach or believe there has been a breach of ICES' privacy and security **Policies** or **Procedures**, in accordance with ICES' *Privacy and Security Incident Breach Management Policy* and associated **Procedures**, as set out in the framework posted on the ICES **PLO/Cybersecurity** site on the **ICES Intranet**.
- 7.3 All other violations under ICES privacy and security **Policies** and **Procedures** may be subject to a range of **Disciplinary Actions** including warning, temporary or permanent loss of **Access Privileges**, legal sanctions and/or termination of employment for cause, or contract with ICES pursuant to *ICES' Discipline and Corrective Action in Relation to ICES Data Policy* and *ICES' Termination or Cessation of Employment or Contractual Relationship in Relation to ICES Data Policy* and associated **Procedures**.
- 7.4 Compliance is subject to annual audit by an ICES Privacy **SME** or ICES Risk & Compliance Analyst pursuant to the **Annual Audit Schedule** established under ICES' *Privacy and Security Audit Policy*.

8.0 EXCEPTIONS

- 8.1 Any exceptions requested pursuant to this **Policy** must be in accordance with ICES' *Ongoing Review of Privacy and Security Policies, Procedures, Practices, and Exceptions Policy* and ICES' *Change Management Policy*.



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