



Privacy Inquires and Privacy Complaints Policy

Department	Document Number	Organizational Scope	ICES Site	IPC Scope
PLO	020-00-00	ICES Network Policy	ICES Network	All Acts
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June 2014	2025-07-31	Triennially	July 2028	PO.020
Authority (Title)		Policy Owner (Title)		
Chief Privacy & Legal Officer		Director, Privacy & Legal		
Required Reviewers (Titles)				

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

1.0 PURPOSE

- 1.1 This **Policy** addresses how ICES manages **Privacy Complaints** and **Privacy Inquiries** from the public and relevant stakeholders.

2.0 SCOPE

- 2.1 This **Policy** applies to any **Privacy Complaint** or **Privacy Inquiry** received by **ICES Central** or an **ICES Site**.
- 2.2 A **Privacy Complaint** includes concerns or complaints relating to the privacy **Policies**, **Procedures**, and **Practices** implemented by ICES, and/or relating to the compliance of ICES with Ontario's *Personal Health Information Protection Act* ("**PHIPA**"), the *Coroners Act*, the *Child, Youth and Family Services Act, 2017* ("**CYFSA**"), and their applicable regulations.
- 2.3 A **Privacy Inquiry** includes inquiries relating to the privacy **Policies**, **Procedures**, and **Practices** implemented by ICES, and/or relating to the compliance of ICES with **PHIPA**, the *Coroners Act*, the **CYFSA**, and their regulations.

3.0 ROLES AND RESPONSIBILITIES

- 3.1 ICES **Chief Privacy and Legal Officer** ("**CPLO**")
- 3.2 approving and overseeing establishment of a process for responding to **Privacy Complaints** and **Privacy Inquiries**, as part of the delegated day-to-day authority to manage the Privacy Program;
- 3.3 ICES Privacy **Subject Matter Expert** ("**SME**")
- 3.4 managing and implementing the process for responding to **Privacy Complaints** and **Privacy Inquiries**
- 3.5 **ICES Employees**, **ICES Agents**, **Non-Appointed ICES Agents** ("**NAIAs**"), **Collaborating Researchers**, and **Third Party Researchers** ("**TPRs**")



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- 3.6 Cooperating and assisting with the **Privacy Complaints** and **Privacy Inquiries** management process

4.0 DETAILS

4.1 Responsibility for managing **Privacy Complaints** and **Privacy Inquiries**

4.1.1 The ICES **CPLO** is responsible for approving and overseeing establishment of a process for responding to **Privacy Complaints** and **Privacy Inquiries**. This process shall be designed to:

- a. communicate to the public how and to whom to make **Privacy Complaints** and **Privacy Inquiries**;
- b. receive **Privacy Complaints** and **Privacy Inquiries** from the public;
- c. determine when to investigate **Privacy Complaints** and communicate the outcomes of those determinations to complainants;
- d. create a process to investigate **Privacy Complaints**;
- e. identify and remediate the causes of and factors contributing to **Privacy Complaints**;
- f. track implementation of measures to remediate the causes of and factors contributing to **Privacy Complaints**;
- g. inform complainants of investigation outcomes and resultant remediation measures;
- h. notify third parties, where required, of **Privacy Complaints**;
- i. respond to **Privacy Inquiries**; and
- j. ensure documentation related to **Privacy Complaints** and **Privacy Inquiries** is created.

4.2 Guiding principles for management for **Privacy Complaints** and **Privacy Inquiries**

4.2.1 ICES' management of **Privacy Complaints** and **Privacy Inquiries** is informed by the *Model Code for the Protection of Personal Information (CAN/CSA-Q830-96)*, having particular regard to the need to balance between accountability, openness and individual access, and safeguards.

4.3 Specific principles for management of **Privacy Complaints**

4.3.1 A **Privacy Complaint** will be investigated when it relates to ICES' functions as a **Prescribed Entity** under **PHIPA**, the *Coroners Act*, and/or the **CYFSA**, and one of two of the following apply:

- a. the **Privacy Complaint** provides reasonable grounds to believe that non-compliance with ICES' privacy **Policies**, **Procedures**, and **Practices**, **PHIPA**, the *Coroners Act*, and/or the **CYFSA** has occurred or will occur—in other words, that there has been or there will be a **Privacy Breach**; or
- b. the **Privacy Complaint** may indicate a deficiency in ICES' privacy **Policies**, **Procedures**, or **Practices**.



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- 4.3.2 An investigation of a **Privacy Complaint** must follow the rules of procedural fairness, applied in a manner that is appropriate to the legal, institutional, and social context of the decision.

5.0 RELATED DOCUMENTATION

6.0 TRAINING AND COMMUNICATION

- 6.1 Policies, standards, and procedures are available on the **ICES Intranet**.
- 6.2 This policy and any related standards and/or 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's **Owner**.
- 6.3 Once new policies, standards, and procedures are published to the **ICES Intranet**, they are communicated to **ICES Agents** on the **ICES Intranet** and through ICES' weekly email with the organization's internal updates.

7.0 COMPLIANCE AND ENFORCEMENT

- 7.1 **ICES Agents** must comply with all applicable policies, standards, and procedures.
- 7.2 **ICES Agents** must notify a Privacy and/or Security **Subject Matter Expert ("SME")** at the first reasonable opportunity if they breach or believe there has been a breach of ICES' privacy and security policies, standards, or procedures in accordance with applicable policies and standards, including:
- 7.2.1 *Privacy Breach Management Policy*
 - 7.2.2 *Security Incident Management Standard*
- 7.3 Enforcement of compliance with this policy is the responsibility of the the **ICES Agent** identified as the Authority of this policy.
- 7.4 All violations of policies, standards, and procedures may be subject to a range of **Disciplinary Actions** in accordance with applicable policies, including:
- 7.4.1 *Discipline and Corrective Action Policy*
 - 7.4.2 *Termination of Employment Policy*
 - 7.4.3 *Discipline and Corrective Action in Relation to ICES Data Policy*
 - 7.4.4 *Termination or Cessation of Employment or Contractual Relationship in Relation to ICES Data Policy*
- 7.5 Compliance is subject to audit in accordance with applicable policies, including:
- 7.5.1 *Privacy and Security Audit Policy*

8.0 EXCEPTIONS

- 8.1 Any exceptions requested pursuant to this policy must be in accordance with applicable policies, including:



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- 8.1.1 *Ongoing Review of ICES' Policy Suite Policy*
- 8.1.2 *Change Management and Exceptions Policy*
- 8.2 Exceptions cannot relieve ICES of its legal requirements, including but not limited to those established under:
 - 8.2.1 *Personal Health Information Protection Act, 2004 ("PHIPA")* and its regulation;
 - 8.2.2 *Coroners Act* and its applicable regulations;
 - 8.2.3 *Child, Youth and Family Services Act, 2017 ("CYFSA")* and its applicable regulations; and
 - 8.2.4 The **IPC Manual**, **Coroners Addendum**, and **CYFSA Addendum**.

9.0 CHANGE TABLE

Change Date (YYYY-MM-DD)	Change Notes