

Statements of Purpose for ICES Data Holdings Containing PHI/PI Policy



Department	Reference Number	Organizational Scope	ICES Site	IPC Scope
PLO	009-00-00	ICES Network	ICES Network	All Acts
Original Date (YYYY-MM-DD)	Current Version (YYYY-MM-DD)	Review Frequency	Next Review (Month YYYY)	Supersedes (if applicable)
September 2022	2025-10-31	Triennial	October 2028	2025-07-31
Authority (Title)	Chief Privacy and Legal Officer			
Policy Owner (Title)	Director, Privacy and Legal Office			
Required Reviewers (Titles)	Director, Data Quality and Information Management			

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

Provisions highlighted in grey are not yet in effect and are subject to review and approval by the Information and Privacy Commissioner.

1.0 PURPOSE

1.1 The purpose of this policy is to set out the requirement to have **Statements of Purpose (“SOP”)** for, at minimum, **ICES Data Holdings**, including **ICES Derived Data Holdings**, containing:

1.1.1 **Personal Health Information (“PHI”)** that ICES collected as a **Prescribed Entity** under the *Personal Health Information Protection Act, 2014 (“PHIPA”)*; and

1.1.2 **Personal Information (“PI”)** that ICES collected as a Prescribed Entity under:

(a) The *Coroners Act*, or

(b) *The Child, Youth and Family Services Act, 2017 (“CYFSA”)*.

1.2 While not required, ICES should have SOPs for all ICES Data Holdings, including ICES Derived Data Holdings, even if they do not contain PHI/PI identified in section 1.1 above. These SOPs would comply with the requirements set out in this policy and the *Statements of Purpose for ICES Data Holdings Containing PHI/PI Procedure*.

1.3 SOPs must be:

1.3.1 Developed and implemented each time ICES creates an ICES Data Holding containing PHI/PI, which may be via collection of new PHI/PI or creation of an ICES Derived Data Holding;

1.3.2 Reviewed and maintained regularly to ensure accuracy;

1.3.3 Amended as needed; and

1.3.4 Approved by a Privacy **Subject Matter Expert (“SME”)** via a **Privacy Impact Assessment (“PIA”)**.

Statements of Purpose for ICES Data Holdings Containing PHI/PI Policy



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

3.1 Compliance SME

- 3.1.1 Implements the schedule for ongoing review of SOPs on an annual basis;

3.2 Privacy SME

- 3.2.1 Reviews and approves initial SOPs and SOP amendments as part of the PIA review process.

3.3 Manager, Privacy Services / Managing Privacy Counsel

- 3.3.1 Delegated day-to-day authority to manage the Privacy program;

3.4 Legal Services

- 3.4.1 Negotiates legal agreements and notifies Privacy Services if there are inconsistencies between SOPs and applicable legal agreements;

3.5 Director, Privacy and Legal Office (“**PLO**”)

- 3.5.1 Conducts ongoing review of SOPs;
- 3.5.2 Consults with the Compliance SME regarding scheduling of the ongoing review process for SOPs.

3.6 Director, Strategic Partnerships

- 3.6.1 Conducts ongoing review of SOPs;

3.7 Director, Data Quality and Information Management (“**DQIM**”)

- 3.7.1 Conducts ongoing review of SOPs;

3.8 Director, Research and Analysis

- 3.8.1 Conducts ongoing review of SOPs;

3.9 Chief Privacy and Legal Officer (“**CPLO**”)

- 3.9.1 Determines if SOPs should be posted on ICES' website.

4.0 DETAILS

4.1 Required content of SOPs

- 4.1.1 All SOPs must include the following information:
 - (a) The specific purpose of the ICES Data Holding,
 - (b) A description of the PHI/PI contained in the ICES Data Holding;
 - (c) The source(s) of the PHI/PI including, but not necessarily limited to:
 - (i) The source(s) of the PHI collected by ICES as a Prescribed Entity under *PHIPA*;

Statements of Purpose for ICES Data Holdings Containing PHI/PI Policy



- (ii) The Chief Coroner for the PI collected by ICES as a Prescribed Entity under the *Coroners Act*; or
- (iii) The **Service Providers** and any other source(s) of the PI collected by ICES as a Prescribed Entity under the *CYFSA*;
- (d) An explanation for the need for the PHI/PI in relation to the identified purpose; and
- (e) An explanation of why **De-Identified Information** will not serve the identified purpose.

4.2 Creating new SOPs

- 4.2.1 A SOP must be prepared in accordance with the process set out in the *Statements of Purpose for ICES Data Holdings for PHI/PI Procedure*.
- 4.2.2 The **Requestor** of the PIA for the new ICES Data Holding is responsible for preparing the initial draft of the SOP.
- 4.2.3 The Requestor may collaborate with the Privacy SME conducting the PIA, however the accountability remains with Requestor.

4.3 Approving new SOPs

- 4.3.1 All Privacy SMEs are delegated authority to approve the SOP in the PIA, as directed by Manager, Privacy Services / Managing Privacy Counsel.
- 4.3.2 Manager, Privacy Services / Managing Privacy Counsel is delegated day-to-day authority to manage the Privacy program with respect to SOPs and may, at their discretion, review any SOP completed by the Privacy SME.
- 4.3.3 The SOP must be included in the approved PIA that is then provided to Legal Services for review when executing the **Data Sharing Agreement (“DSA”)** between ICES and the Data Provider disclosing the PHI/PI to ICES, if applicable.
- 4.3.4 In the course of negotiating the DSA, if Legal Services identifies that the SOP is no longer consistent with the planned agreement, Legal Services must re-direct the SOP to Privacy Services for further review and amendments as needed.

4.4 Ongoing Review of SOPs

- 4.4.1 SOPs must be reviewed on an annual basis by the following individuals, or their delegates, to ensure the review reflects a broad understanding of how the ICES Data Holdings are used and managed at ICES:
 - (a) Director, Strategic Partnerships;
 - (b) Director, Research and Analysis;
 - (c) Director DQIM; and
 - (d) Director, PLO.
- 4.4.2 During the review the Directors must ensure:
 - (a) The SOPs are accurate to their applicable ICES Data Holdings;
 - (b) That the PHI/PI collected for the purposes of the ICES Data Holding is still necessary for the identified purpose;
 - (c) That De-Identified Information will not serve the identified purpose; and

Statements of Purpose for ICES Data Holdings Containing PHI/PI Policy



(d) No new ICES Data Holdings, including ICES Derived Data Holdings, exist without an SOP in place.

4.4.3 The Compliance SME, in consultation with the Director, PLO, must implement a schedule that ensures each SOP is reviewed on an annual basis.

4.5 Amending SOPS

4.5.1 An SOP must be amended prior to undertaking activity that is inconsistent with the SOP as currently approved in the PIA.

4.5.2 Amendments must be approved in accordance with the process set out in the *Statements of Purpose for ICES Data Holdings Containing PHI/PI Procedure*.

4.6 Communicating new and amended SOPs

4.6.1 New and amended SOPs must be posted on the **ICES Intranet** so that they are available to ICES Agents.

4.6.2 New and amended SOPs must be communicated to applicable Data Providers.

4.6.3 The CPLO may also determine that SOPs should be posted on ICES' website so that they are available to the public.

4.6.4 Communication of SOPs must be in accordance with the process set out in the *Statements of Purpose for ICES Data Holdings Containing PHI/PI Procedure*.

5.0 RELATED DOCUMENTATION

5.1 Policies

5.2 Standards

5.3 Procedures

5.3.1 *Statements of Purpose for ICES Data Holdings Containing PHI/PI Procedure*

5.4 Tools

5.5 Guidelines

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.

Statements of Purpose for ICES Data Holdings Containing PHI/PI Policy



- 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 may have 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 standard is the responsibility of the ICES Agent identified as the Authority in the policy governing this standard.
- 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:
 - 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 The *Coroners Act* and its applicable regulations;
 - 8.2.3 The *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
2025-07-31	<ul style="list-style-type: none">■ Reviewed for compliance with ICES’ obligations as a Prescribed Entity:<ul style="list-style-type: none">○ IPC Manual:

Statements of Purpose for ICES Data Holdings Containing PHI/PI Policy



	<ul style="list-style-type: none"> ▪ 01-06: Policy, Procedures, and Practices for Maintaining Statements of Purpose for Data Holdings Containing Personal Health Information ▪ 01-07: Statements of Purpose for Data Holdings Containing Personal Health Information ○ Coroners Addendum: <ul style="list-style-type: none"> ▪ 05-07: Policy, Procedures and Practices for Maintaining Statements of Purpose for Data Holdings Containing Personal Information ▪ 05-08: Statements of Purpose for Data Holdings Containing Personal information ○ CYFSA Addendum: <ul style="list-style-type: none"> ▪ 06-07: Policy, Procedures and Practices for Statements of Purpose for Data Holdings Containing Personal Information ▪ 06-08: Statements of Purpose for Data Holdings Containing Personal information ■ Added content regarding ICES’ role as a Prescribed Entity under <i>CYFSA</i> (not yet in effect) ■ Updated to reflect: <ul style="list-style-type: none"> ○ Revised document template and standardized language in Sections 6.0 to 9.0 ○ Revised glossary terms and titles of ICES policies, standards, and procedures ○ Revised to reflect updated processes regarding communicating approved SOPs, reviewing SOPs, and amending SOPs.
2025-10-31	<ul style="list-style-type: none"> ■ Revised title from “Statements of Purpose for Data Holdings Containing PHI/PI Policy; Added roles and responsibilities; Clarified the use of SOPs for ICES Data Holdings that do not contain PHI/PI; Added section regarding communicating new and amended SOPs; General revisions for clarity