

## ADMINISTRATIVE Policy and Procedure

Title:	Electronic Messaging of Personal Health Information	Number:	AD-AO-045
Sponsor:	General Counsel, Legal Services	Page:	1 of 13
Approved by:	VP, Quality and System Performance Executive Leadership Team	Approval Date:	Feb. 4, 2019
		Effective Date:	May 15, 2019
Applies To:	All Team Members		

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## POLICY STATEMENTS

1. The Electronic Messaging of Personal Health Information (E-Messaging) policy establishes standards expected of Nova Scotia Health Authority (NSHA) Health Care Providers (HCPs) who send and receive Provider-Patient and/or Provider-Provider email communications or Text Messages (E-Message).
  - 1.1. This policy also applies to all NSHA Team Members who:
    - 1.1.1. E-Message with Patients in the context of a professional relationship, in which the provider has taken an explicit measure of responsibility for the Patient's care, **and/or**
    - 1.1.2. E-Message with other Team Members and providers where the message contains Patient Personal Health Information.
2. Provider-Provider and/or Provider-Patient E-Messages are considered part of the legal NSHA Patient health record (PHR) and are subject to the same storage, retention, retrieval, privacy, security, and confidentiality provisions as other Personal Health Information (PHI) and must be in compliance with the [Nova Scotia Personal Health Information Act \(PHIA\)](#).
  - 2.1. A record of E-Messages must be placed in the PHR.
3. Certain E-Messaging mediums such as email and text, carry the risk of a breach of privacy, as confidentiality and security cannot be assured. Unauthorized individuals may be able to access, read, and possibly modify messages that are sent to or from NSHA. In addition, there are risks associated with possible delays in the receipt of the information and documenting the content on the PHR.
4. E-Messaging can only be performed using NSHA authorized devices.
5. Only use an employer-issued device, not a personal device, to communicate with a Patient or Delegate/Substitute Decision Maker (SDM) by text messaging (Texting).
6. Providers must be aware that Texting contains the added risk of confusion or misinterpretation as it is an informal, short-hand form of communication.
7. E-Messaging is not used as the primary communication between Patient and care provider. Other modes of communication that provide direct contact with Patients may be more appropriate for ensuring safe and supportive care. The added risk of using E-Messaging must be weighed against convenience or preference.
8. NSHA HCPs may only communicate a Patient's PHI via E-Messaging with other HCPs or with the Patient for the purposes of providing health care in accordance with the procedures outlined.
9. NSHA HCPs must have the Patient's or Delegate/SDM's consent prior to communicating via E-Messaging with the Patient or Delegate/SDM unless one of the following exceptions applies:
  - 9.1. Exceptions to obtaining prior consent:

- 9.1.1. In the situation of an emergency when it is necessary to avert or minimize an imminent and significant danger to health or safety of the Patient or any other individual. In this case, the HCP must document in a progress note of the PHR; a description of the emergency, other attempts to communicate with the Patient that were unsuccessful or insufficient, and the reason why E-Messaging was used, or
- 9.1.2. As a last resort for non-urgent, logistical communications (e.g. appointment time reminders, etc.), provided the Patient has not indicated otherwise.

10. Email communication sent from an nshealth.ca email account to another nshealth.ca email account is secure as it travels within the internal nshealth.ca firewall. Use of external email accounts (e.g. Gmail, dal.ca, etc.) is **not** permitted for communicating PHI between/among providers.

## GUIDING PRINCIPLES

E-Messaging is one of the dominant forms of communication. Individuals and Health Care Providers rely on its convenience, speed, and efficiency. NSHA recognizes that E-Messaging between Health Care Providers, Team Members and Patients can offer many benefits to the Patient experience and health outcomes.

E-Messaging use needs to be balanced with the risks it can pose to the privacy of individuals and to the security of their PHI. These need to be considered prior to using E-Messaging to determine if the benefits outweigh the risks.

## PROCEDURE

### General Requirements for E-Messaging

#### 1. Requirements for Sending and Receiving PHI via E-Messaging

- 1.1. Do not include PHI identifying the Patient in the subject line of an E-Message.
- 1.2. Type “Confidential” or use the confidential flag and use a general description of the reason for the communication in the subject line.

**Example:** Confidential – Appointment Details.

- 1.3. Prior to sending E-Messages that contain PHI, send an initial message requesting verification that it is the correct address.
- 1.4. Immediately delete E-Messages containing PHI when the information is no longer required
- 1.5. Do not use the ‘reply all’ function during correspondence and take particular care to ensure recipient(s) of the E-Message are correct.
- 1.6. When communicating via email, use the following disclaimer messages:

**Note:** This disclaimer can be added to the User’s email signature to ensure inclusion.

“This email message may contain confidential information and is intended only for the individual named. If you are not the named addressee you should not disseminate, distribute or copy this email. Please notify the sender immediately by email if you have received this email by mistake and delete this email from your system. Email transmissions cannot be guaranteed to be secure or error free as information could be intercepted, corrupted, lost, destroyed, arrive late or incomplete, or contain viruses. The sender therefore does not accept any liability for errors or omissions in the contents of this message that arise as a result of email transmissions. If verification is required please request a hard copy version.”

- 1.7. Ensure that your signature block is included in all E-Messages.
- 1.8. **Under no circumstances** auto-forward E-Messages to any other E-Messaging account of your own or to others.
- 1.9. Obtain specific Research Ethics Board (REB) approval for E-Messaging communication with research participants whether the participants are NSHA Patients or not.
- 1.10. Unless authorized by the NSHA Privacy Office, accessing E-Messaging contents or attachments containing PHI or confidential information must be done exclusively using NSHA Hardware.
- 1.11. If it is suspected that PHI sent via E-Messaging has been sent to the wrong recipient, sent externally without Patient consent, or is otherwise compromised:
  - 1.11.1. Immediately report to the Manager of the area involved.
  - 1.11.2. Report as a Patient safety incident in the Safety Improvement Management System (SIMS).
  - 1.11.3. Contact the Privacy Officer in your zone for privacy breach protocols to be implemented (see [Appendix B](#) for contact information).
- 1.12. If an E-Message is sent to someone in error:
  - 1.12.1. Re-call the E-Message as soon as possible, contact the unintended recipient explaining that they received a message in error and ask that they permanently delete the message (i.e. deleting from both the inbox and deleted items).
  - 1.12.2. If multiple recipients received the E-Message and one received the email in error, re-call the E-Message as soon as possible, and notify all recipients to remove the unintended recipient before they use the ‘reply all’ function.

### **Provider to Provider E-Messaging Communication**

1. NSHA HCPs send communications to other providers via Secure E-Messaging platforms as necessary for consultation, diagnosis, provision of health care, and reimbursement. Communicating by internal email is allowed where a Secure E-Messaging platform is not a viable option.
  - 1.1. Consider whether it is possible to refer other providers to the relevant PHI if already available through NSHA and/or NS provincial clinical applications (e.g. Meditech, HPF) rather than sending a copy of the PHI via E-Messaging. This helps to

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ensure PHI is kept secure and the recipient is always making care decisions based on the most current information available.

2. Use De-Identified Information when E-Messaging in all instances where it will still achieve the purpose of the communication.
3. Send only the minimum amount of PHI necessary for the purpose you are communicating with the other provider.
4. Do not use E-Messaging to transmit orders. An exception can be made for hand-signed, scanned medication orders or prescriptions sent through internal NSHA email accounts.
5. Use only:
  - 5.1. Internal email addresses with nshealth.ca to email someone who has an nshealth.ca email address,
  - 5.2. The secure file transfer service to anyone who does not have a nshealth.ca email address, or
  - 5.3. Any other E-Messaging platform approved by NSHA privacy to be used for that purpose.
6. Maintain a record of the provider care decisions or recommendations that are contained in an E-Message by adding suitable notes to an NSHA clinical application, or by printing the E-Message and placing on the PHR, in situations where this has not already been documented.
  - 6.1. Apply a Patient identifier label to all E-Messaging documents for electronic filing to the PHR.

### Provider to Patient Email Communication

1. Prior to commencing **any** E-Message communication with a Patient or SDM you must obtain written consent. Approval of the Privacy Office is required to do so without written consent.
  - 1.1. Give the Patient or SDM a copy of [Patient-Provider Email Fact Sheet](#) and Consent Form, check to make sure they understand the documents and obtain the Patient's or SDM's signature on the form.
  - 1.2. Inform the Patient that E-Messaging should never be used for emergency health care services, or advice, or whenever an immediate response is required.
  - 1.3. Review the Consent Form with the Patient or SDM on an annual basis and document in the PHR.
2. Use Secure E-Messaging platforms like SEND.nshealth.ca when communicating health information to Patients. Find the "[Secure File Transfer User Guide](#)" here.
3. Prior to commencing or responding to E-Messages from a Patient, ensure that the recipient matches the recipient on the consent form. For future communication, to minimize misdirecting E-Messages to the wrong recipient, do not reply using the 'reply all' function.

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4. Do not store Patient E-Messages on a provider's personal device(s) or NSHA owned equipment such as laptop, computer Hardware, mobile devices, tablets, etc.
5. Never send PHI through a group message.
6. Respond to all Patient E-Messages in a timely manner.
7. Ensure that an automatic out-of-the-office reply is set-up in the event of absences when E-Messaging will not be serviced. Indicate in the automatic reply the estimated date of return and instructions on whom to contact for immediate assistance.

### Texting/Instant Messaging

1. Use Text/Instant Messaging (IM) for non-urgent, logistical communications only (e.g. appointment time reminders, etc.) and only after written consent has been obtained. Approval of the Privacy Office is required to do so without written consent.
2. Prior to communication with a Patient or SDM via Text/IM, provide the Patient or SDM with the Patient-Provider Text/IM Consent Form, ensure they understand the document and then obtain the Patient's or SDM's written informed consent.
3. Double check that the contact information for the Patient or SDM is correct by sending a verification message while the Patient or SDM is with you.
4. If you are unable to send a verification message at that time, send this message: "Is this (first name of the individual)". If the answer is yes, ask the Patient or SDM to call you to verify their identity.
5. Ensure that all text/IM conversation threads which are relevant to clinical Patient care are filed in the PHR.
  - 5.1. If there is a limited ability to print a paper record of text/IM, transcribe from the device to a progress note on the Patient record and indicate that it is information from Texting.
  - 5.2. Immediately delete text/IM containing PHI from the device when the information is no longer required and the text/IM has been stored in the legal health record.

### REFERENCES

- Eastern Health. (n.d.). Policy RM-CR(V)-200: Patient/resident/client health record retention and destruction.
- Personal Health Information Act, Statutes of NS (2010, c. 41). Retrieved from the Nova Scotia Legislature Website [https://nslegislature.ca/legc/bills/61st\\_2nd/3rd\\_read/b089.htm](https://nslegislature.ca/legc/bills/61st_2nd/3rd_read/b089.htm)
- Freedom of Information and Protection of Privacy Act, Statutes of NS (1993, c. 5). Retrieved from the Nova Scotia Legislature <https://nslegislature.ca/sites/default/files/legc/statutes/freedom%20of%20informatio n%20and%20protection%20of%20privacy.pdf>

## RELATED DOCUMENTS

### Policies

[NSHA AD-AO-030 Privacy and Confidentiality of Personal Health Information](#)

[NSHA AD-AO-040 Auditing of Access to Personal Health Information in Electronic Information Systems](#)

[NSHA AD-HIM-015 Retention, Storage, and Destruction of Clinical Documentation within the Health Record](#)

[NSHA AD-IT-005 Acceptable Use of Electronic Infrastructure](#)

[NSHA AD-IT-050 Information Security](#)

[NSHA AD-HR-040 Whistleblower / NSHA AD-HR-040 Divulgateur](#)

[CBDHA A-3-35 Retention of Records](#)

[CDHA CH 07-055 Retention of Records](#)

[CEHHA 114-006 Retention of Records](#)

[CHA 110-010 Retention of Records](#)

[GASHA 1-35 Retention of Records](#)

[PCHA 12-r-30 Retention of Records](#)

[SSH-HE-190-101 Records Retention](#)

[SWDHA 407.0 Document Retention](#)

### Forms

[Patient Consent for Use of Email](#)

[Patient Consent for Communicating Through Text Messages](#)

### Other

[MOVEit User Guide Link](#)

[MOVEit System](#)

[Patient-Provider Email Fact Sheet](#)

[E-Messaging Tip Sheet](#)

### Appendices

[Appendix A](#) – Definitions

[Appendix B](#) – Privacy Officers Contact Info

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## Appendix A: Definitions

<b>De-Identified Information</b>	Information that has all identifiers removed that identify the individual or where it is reasonably foreseeable in the circumstances could be utilized either alone or with other information to identify the individual.
<b>E-Messaging</b>	Messages exchanged between individuals using electronic devices. This includes email, Texting/Instant Messaging, and messages sent between individuals through online messaging services/applications.
<b>Hardware</b>	Computers and mobile devices authorized for use by NSHA
<b>Health Care Provider (HCP)</b>	A person who is registered and licensed in the province of NS to provide health care and/or delegate.
<b>Instant Messaging (IM)</b>	Type of online chat that offers real-time messaging over the internet through a stand-alone application or embedded software. Skype/Lync are examples of an NSHA application with IM capability.
<b>Patient</b>	Means a Patient/client/resident or individual seeking healthcare services (if the Patient lacks capacity, his or her Substitute Decision Maker).
<b>Personal Health Information (PHI)</b>	Any information about an individual, whether living or deceased, and in both recorded and unrecorded forms*, that relates to: <ul style="list-style-type: none"> <li>(a) the physical or mental health of an individual, including information that relates to the health history of the individual's family,</li> <li>(b) the application, assessment, eligibility and provision of healthcare to the individual, including the identification of a person as a provider of health care to the individual,</li> <li>(c) payments or eligibility for health care in respect of the individual,</li> <li>(d) the donation by the individual of any body part or bodily substance or is derived from the testing or examination of any such body part or bodily substance,</li> <li>(e) the individual's registration information, including the individual's health card number,</li> <li>(f) the identification of an individual's Substitute Decision Maker .</li> </ul>



\* This includes photographs and video material which is relevant to clinical care and contains Personal Health Information.

<b>Provider-Patient E-Messaging</b>	Electronic-based communication between providers and Patients within a professional relationship, in which the provider has taken on an explicit measure of responsibility for the Patient's care.
<b>Provider-Provider E-Messaging</b>	Electronic-based communication exchanged between two direct care providers of a Patient which contains Personal Health Information about the Patient.
<b>Secure E-Messaging</b>	E-Messaging where users register with a secure messaging or file transfer platform like MOVEit. Users log into their account with username and password (or strong authentication). Messages are sent over an IT-confirmed secure connection, utilizing encryption or equally protective methods to any recipient. SEND.nshealth.ca is an example.
<b>Delegate/Substitute Decision Maker (SDM)</b>	As defined in the <i>Personal Health Information Act</i> (PHIA), the person who has legal authority to consent or refuse to consent to the collection, use, disclosure of Personal Health Information if the Patient lacks capacity to make the decision for themselves (see definition in Section 21 of PHIA).
<b>Team Member</b>	Unless specifically limited by a certain policy, refers to all Employees, physicians, learners, volunteers, board members, contractors, contract workers, franchise employees, and those with affiliated appointments and other individuals performing activities within NSHA.
<b>Texting (Text)</b>	An informal, usually short typed message sent between two mobile devices over a cellular network or internet connection.

**Appendix B: Privacy Officer Contact Information**

Privacy Officers:	Facility:	Location:	Zone:
<b>Privacy Officer Eastern Zone T: Phone: (902) 794-5469 E: privacy@nshealth.ca</b>	Cape Breton Regional Hospital	Sydney	Eastern
	Buchanan Memorial Hospital	Neil's Harbour	Eastern
	Eastern Memorial Hospital	Canso	Eastern
	Glace Bay Health Centre	Glace Bay	Eastern
	Guysborough Memorial Hospital	Guysborough	Eastern
	Harbour View Hospital	Sydney Mines	Eastern
	Inverness Consolidated Memorial Hospital	Inverness	Eastern
	New Waterford Consolidated Hospital	New Waterford	Eastern
	North Side General Hospital	North Sydney	Eastern
	Sacred Heart Community Health Centre	Cheticamp	Eastern
	St. Martha's Regional Hospital	Antigonish	Eastern
	St. Mary's Memorial Hospital	Sherbrooke	Eastern
	Strait Richmond Hospital	Cleveland	Eastern
	Taigh Gradach	Cape Breton	Eastern
Taigh Na Mara	Glace Bay	Eastern	
Victoria County Memorial Hospital	Baddeck	Eastern	
<b>Privacy Officer Northern Zone T: 902.893.5554 Ext. 42398 E: privacy@nshealth.ca</b>	Aberdeen Regional Hospital	New Glasgow	Northern
	All Saint's Springhill Hospital	Springhill	Northern
	Bayview Memorial Health Centre	Advocate Harbour	Northern
	Colchester East Hants Health Centre	Truro	Northern
	Cumberland Regional Health Care Centre	Amherst	Northern
	Lillian Fraser Memorial Hospital	Tatamagouche	Northern
	North Cumberland Memorial Hospital	Pugwash	Northern
	South Cumberland Community Care Centre	Parrsboro	Northern

	Sutherland Harris Memorial Hospital	Pictou	Northern
<b>Privacy Officer Central Zone T: 902.473.4866 E: privacy@nshealth.ca</b>	Cobequid Community Health Centre	Lower Sackville	Central
	Dartmouth General Hospital	Dartmouth	Central
	East Coast Forensic Hospital	Dartmouth	Central
	Eastern Shore Memorial Hospital	Sheet Harbour	Central
	Hants Community Hospital	Windsor	Central
	Musquodoboit Valley Memorial Hospital	Middle Musquodoboit	Central
	Nova Scotia Hospital	Dartmouth	Central
	NS Rehabilitation Centre	Halifax	Central
	Victoria General	Halifax	Central
	Mackenzie Building	Halifax	Central
	HI Site	Halifax	Central
	Veterans Memorial Building	Halifax	Central
Twin Oaks Memorial Hospital	Musquodoboit Harbour	Central	
<b>Privacy Officer Western Zone T: 902.825.6160 Ext.1762269 E: privacy@nshealth.ca</b>	Annapolis Community Health Centre	Annapolis Royal	Western
	Dawson Centre	Bridgewater	Western
	Chipman Building	Kentville	Western
	Digby General Hospital	Digby	Western
	Eastern Kings Memorial Health Centre	Wolfville	Western
	Fishermen's Memorial Hospital	Lunenburg	Western
	Inpatient Mental Health, SSRH	Bridgewater	Western
	Queen's General Hospital	Liverpool	Western
	Roseway Hospital	Shelburne	Western
	Soldiers Memorial Hospital	Middleton	Western
	South Shore Regional Hospital	Bridgewater	Western

	Valley Regional Hospital	Kentville	Western
	Western King Meorial Health Centre	Berwick	Western
	Yarmouth Regional Hospital	Yarmouth	Western

**District Health Authority Policies Being Replaced**

SSH-HE-190-107 E-Mail Communication Provider-Patient Client

**Version History**

<b>Major Revisions (e.g. Standard 4 year review)</b>	<b>Minor Revisions (e.g. spelling correction, wording changes, etc.)</b>
NEW 2019-05-15	Updated reference to secure messaging platform (2021-04-28 Approved by Director of Privacy)