

POLICY AND PROCEDURE

POLICY NUMBER: 3.5-020		Access to and Release of Information – Trauma NB Registry	
Section: Learning and Innovation			
Prepared by: A. Chisholm, Registry Manager	Signature: 	Date: March 12, 2024	
Approved by: P. Waggott, Interim Admin Director	Signature: 	Date: March 12, 2024	
Version: 3.0	Replaces: 2.0		
Implementation Date: March 12, 2024			

DIRECTLY AFFECTED:	☒ Trauma NB	☐ Level 1 Trauma Centre	☐ Level 2 Trauma Centre
	☐ Level 3 Trauma Centres	☐ Level 5 Trauma Centres	☒ Ambulance NB
	☐ All Trauma Centres	☐ Other: _____	

PURPOSE:

To contribute to trauma research, quality initiatives, and injury prevention initiatives through the dissemination of trauma registry data to authorized individuals or groups, while abiding by the Trauma NB Policy # 3.5-010: Confidentiality of Patient Information.

DEFINITIONS:

Internal Requests: Requests for information within or between Trauma NB staff/physicians and staff/physicians of Trauma NB partners (specifically, Horizon Health Network, Vitalite Health Network, Ambulance New Brunswick (ANB) or the NB Department of Health).

External Requests: Requests for information from any individual or organization that is not a Trauma NB partner (as noted above).

Need to know: the need to know is based on the need to access information for the normal execution of the job.

POLICY:

Trauma NB will ensure that the following procedure is adhered to for all requests for information from the NB Trauma Registry.

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PROCEDURE:

1. Data Requests to the Trauma Registry:

- 1.1. Requests for information are to be submitted in writing through Trauma NB offices in Saint John, NB, to the attention of the Trauma Registry Manager/Analyst. No verbal requests will be accepted.
- 1.2. All requests for information from the New Brunswick Trauma Registry (NBTR) will be reviewed and authorized by Trauma NB Medical or Administrative Director.
- 1.3. Internal requests are made by completing the "NB Trauma Registry Release of Information Request" Form.
- 1.4. External requests also require an accompanying cover letter on official letterhead.
- 1.5. External requests for information which includes individual patient identifiers or that represents aggregate data of <5 patients must be accompanied by written patient consent or Research Ethics Board approval for such data.
- 1.6. All persons or groups requesting information from the NB Trauma Registry are required to sign the "Declaration of Confidentiality portion at the bottom of the "NB Trauma Registry Release of Information" form, Appendix A.
- 1.7. A copy of each request received, and report generated, will be maintained by Trauma NB for a period of 1 year from date of completion of the request.
- 1.8. Modifications to initial request will be completed on a first-come first-serve basis using the "NB Trauma Registry - Addendum to Request for Information" form. A maximum of two modifications to any pending request for information applies; additional changes will be considered a new request and the former pending requests will not be completed.
- 1.9. Trauma NB is not responsible for any misinterpretation, manipulation, or misrepresentation of data by the recipients. The requestor must agree not to use the data for any purpose other than that for which it was approved.
- 1.10. Trauma NB must be acknowledged as the data supplier in any presentation or publication of its data.
- 1.11. A copy of any presentation or publication using NB Trauma Registry data must be supplied to Trauma NB.
- 1.12. Original data received from the NB Trauma Registry must be securely destroyed within one year of receipt or as soon as use of the data has been completed. Written confirmation of secure destruction of data may be requested by Trauma NB.

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- 1.13. To submit a request for information from the NB Trauma Registry, contact the NB Trauma Registry Manager/Analyst via email at TraumaNB@HorizonNB.ca or go to www.TraumaNB.ca to download a "NB Trauma Registry – Release of Information Request" form.
- 1.14. Complete the form and submit a copy, with cover letter and ethics approval (if applicable), and original signature to the NB Trauma Registry Manager/Analyst.
- 1.15. Requests, once approved by the Medical Director or Administrative Director will be forwarded to the NB Trauma Registry Manager/Analyst or other appropriate Trauma NB personnel for processing.
- 1.16. The requestor and the NB Trauma Registry Manager/Analyst will discuss and agree upon an acceptable timeframe, format, and delivery method in which to process the request.
- 1.17. Provision of the fulfilled request will be forwarded to the requestor based on a pre-agreed upon secure format (i.e.: hard copy or electronic).
- 1.18. Any modifications to a pending request must be requested using the "Trauma NB Addendum form", available from the NB Trauma Registry Manager/Analyst. Completion of the modified request is subject to the approval of the Medical or Administrative Director of Trauma NB.

2. Direct Access to the New Brunswick Trauma Registry:

- 2.1. Direct access to the NB Trauma Registry may only be granted by written request to the Administrative Director of Trauma NB. Access must be deemed to be Need to Know, and approval may be subject to additional review and approval from Chief Privacy Officer(s).
- 2.2. Procedures will be maintained to request access and change access to the Trauma Registry.
- 2.3. Roles and Responsibilities for each level of access will be maintained.
- 2.4. All employees must confirm having completed e-learning on Privacy and
 - 2.4.1. Confidentiality for their respective agency prior to being granted NB Trauma Registry access.

3. Patient access to the New Brunswick Trauma Registry:

- 3.1 The majority of the data elements collected within the New Brunswick Trauma Registry are compiled from the Clinical Information Systems of the participating facilities; therefore,
 - 3.1.1 Requests to have data deleted, added, or amended will be directed to the Health Records Department of the facility where the patient received treatment.
 - 3.1.2 Complaints from the patient with reference to the privacy of data collection will be directed to the Chief Privacy Officer of the agency (Horizon, Vitalite or ANB) where the patient received treatment.

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- 3.1.3 Complaints from the patient with reference to the content of data collection will be directed to the Health Records Department of the agency (Horizon, Vitalite or ANB) where the patient received treatment.
- 3.1.4 The Trauma Registry Manager/Analyst will keep a record of these requests and documented responses.

4. Confidential Information Sharing:

- 4.1 Trauma NB adheres to the Confidential Information Sharing policies held within Horizon, Vitalite and ANB.

5. Breach of Confidentiality:

- 5.1 In the event of a privacy breach by a Trauma NB employee or physician, the Administrative Director of Trauma NB will refer to and apply the Privacy Breach Policy for the Health Authority that employs the staff member or maintains the privileges of the physician.

EVALUATION:

- A NB Trauma Registry Evaluation form, to review user satisfaction with the process, timeliness and comprehensiveness of data provided, will be requested of every individual receiving information from the NB Trauma Registry. Aggregate results will be reported to the Trauma NB Advisory Committee.

RELATED DOCUMENTS:

- NB Trauma Registry – Release of Information Request (Appendix A)

REFERENCES:

- Horizon Health Network: Access to and Release of Personal Information Policy (HHN-IM-004)
- Vitalite Health Network: Confidentiality Policy (GEN.6.30.15)
- Horizon Health Network: Confidentiality Policy (HHN-BD-007)
- Horizon Health Network: Confidential Information Sharing (HHN-IM-003)
- Vitalite Health Network: Confidential Information Sharing (GEN.6.30.30)
- Horizon Health Network: Privacy Incident and Breach Management Policy (HHN-BD-006)
- Vitalite Health Network: Privacy Breach Policy (GEN.6.30.20)
- New Brunswick Trauma Program Policy: Confidentiality of Patient Information
- CHIMA: Code of Practice for Safeguarding Health Information

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RELEASE OF INFORMATION REQUEST

General Information / Renseignement généraux
Date of Request/Date de la demande:
Date required by / Requis pour le:
Brief description of request (Please include required data elements, facilities and time frames) / Courte description de la demande (incluant les éléments d'information)
Intended use of information / Utilisation prévue des renseignements:

Request made by / Demande faite par:		
Phone :	E-mail :	
Preferred Format of Data (check one)	Electronic :	Hard Copy :
DECLARATION OF UNDERSTANDING: By signing here, I confirm having read and understood my employer's Statement of Understanding – Confidentiality		Signature :

Trauma NB Use Only / Réservé à l'usage du Trauma NB		
Prepared by: A. Chisholm, Registry Manager	Signature:	Date:
Approved for Release by: P. Waggott, Interim Administrative Director	Signature:	Date
Report Released by :	Format Data provided:	Date
Date Received/Date reçu:	Date Completed/Date d'exécution:	

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RELEASE OF INFORMATION ADDENDUM

General Information / Renseignement généraux

Date of Addendum/Date de l' addenda:

Date required by / Requis pour le:

Brief description of request (Please include required data elements, facilities and time frames) / Courte description de la demande (incluant les éléments d'information)

Addendum made by / Addenda faite par:

Signature:

Phone :

E-mail :