

COLLECTION, USE, AND DISCLOSURE OF PERSONAL HEALTH INFORMATION AND PRIVACY CONSENT FORM

Pursuant to the [Personal Health Information Protection Act, 2004 \(PHIPA\)](#) and
the [Freedom of Information and Protection of Privacy Act, 1990 \(FIPPA\)](#)

Accessible Learning at Conestoga College is committed to the protection of your personal health information and privacy, as well as following an integrative and comprehensive approach to student success planning. Our team of professionals follow standards set out in PHIPA and FIPPA with respect to the collection, use, and disclosure of your personal information. This personal information can include details on appointments, electronic and phone communications that you have had with Accessible Learning Services, accommodation information, documentation on your disability, and any other relevant details.

Our team will safeguard your privacy and the confidentiality of your personal information by:

- Requesting only the information that may be necessary to provide appropriate support;
- Storing all personal information collected in a secure electronic file. Electronic file information is only accessed on a “need to know” basis;
- Not disclosing personal health information to someone outside our service area without your consent; except in the following situations where disclosure is required by law and/or to ensure safety;
 - There are reasonable grounds to believe you are at risk to harm yourself or others;
 - The service provider has information or concerns that a child (or children) 17 years of age or younger, has been harmed, is at risk of being harmed, and/or has witnessed domestic violence and therefore the service provider must report these concerns to the local child welfare agency;
 - If you are in crisis or a risk/concern to the Conestoga community we may consult with other professionals (i.e., Campus Security, Care Team) to best support you and protect the community. These other professionals are also bound by privacy legislation;
 - When the court orders us to release your information due to a warrant and/or subpoena;
 - If sexual contact by a regulated health care professional is reported.

Please review this document in its entirety and provide confirmation of your consent by signing below.

I acknowledge that:

- Accessible Learning may collaborate with other service areas at the college on my behalf to provide me with the most appropriate support. These service areas most commonly include the Assistive Technology Team, the Learning Skills Advising Team, Student Financial Services, Work-Integrated Learning and my Academic Team;
- Accessible Learning may also connect with external, but related, organizations where courses are jointly facilitated such as Student Accessibility Services at McMaster University (BScN students) and Ontario Learn;
- Accessible Learning may obtain or release information with the above parties to support my success, which may include discussions about the functional impacts of my disability. I understand that my specific diagnostic details will not be shared without explicit consent and only when necessary;
- There may be times when I request that Accessible Learning communicate with additional parties on my behalf, or where Accessible Learning requests to communicate with additional parties that are not listed within this document. I understand that these additional communications are not covered by this form and that these permissions will be obtained on an as-needed basis with my explicit consent.

My signature on this form indicates that I have reviewed the above, had an opportunity to ask questions, and indicates that I understand and consent to the collection, use, and disclosure of my personal health information and privacy in accordance with the conditions outlined in this form.

Student Name

Student ID Number

Student Signature

Date

You should let us know if you would like to withdraw consent at any time for the collection, use, or disclosure of some or all of your personal health information and privacy. Please note, your withdrawal of consent cannot reverse any action that was already taken.

