

Statement of Information Practices

Collection of Personal Health Information

We collect personal health information about you directly from you or from the person acting on your behalf. The personal health information that we collect may include your name, date of birth, health history, records of your visits to the clinic, and the care you received during those visits. Occasionally, we collect personal health information about you from other sources if we have obtained your consent to do so or if the law permits.

Uses and Disclosures of Personal Health Information

We use and disclose your personal health information to:

- assess your health and education needs;
- communicate or consult about your health care with other health care and education providers, health and education specialists, and students in training;
- notify you of an appointment or to change an appointment;
- distribute information related to health care, education and special events;
- offer goods and services;
- submit claims for payment of goods and services to authorized government or health and education agencies, as well as your private insurer;
- plan, administer and manage clinic operations;
- compile group-based statistics for health system planning;
- educate and teach students;
- conduct research as approved by the Research Ethics Board of authorized institutions (e.g., the University of Western Ontario, etc.);
- improve the care we provide by conducting quality improvement and risk management activities;
- meet legal and regulatory requirements of the provincial government according to the provisions of the Regulated Health Professions Act; and
- fulfill other purposes permitted or required by provincial law.

Withdrawing your Consent

You may withdraw your consent for some of the above uses and disclosures by contacting us (subject to legal exceptions).

Important Information for Security

We maintain physical, administrative, and technical safeguards to protect your personal health information from theft, loss, and unauthorized access, copying, modification, use, disclosure and/or disposal.

Access and Correction

You may request, in writing, access to your personal health information by delivering such request to us at the address noted below. If you believe your record is inaccurate or incomplete, you have the right to ask for it to be corrected.

We have instituted policies and practices to ensure that everyone who performs services for us protects your privacy and only uses your personal health information for the purposes you have consented to.

How to Contact Us

Our privacy contact person is Dr. Colin King, Director, Mary J. Wright Child and Youth Development Clinic.
For more information about our privacy protection practices, or to raise a concern you have with our practices, contact us at:
Mary J. Wright Child and Youth Development Clinic
Western University
1137 Western Road
London, ON N6G 1G7
519-661-4257/ Fax: 519-661-3809

Information & Privacy Commissioner

You have the right to contact the office of the Information and Privacy Commissioner/Ontario if you have a complaint about our privacy policies. The Commissioner can be reached at:

Information and Privacy Commissioner/Ontario
2 Bloor Street East, Suite 1400
Toronto, ON M4W 1A8
Tel: 1.800.387.0073
TDD/TTY: 1.416.325.7539
Fax: 1.416.325.9195
Website: www.ipc.on.ca