

Privacy Impact Assessment: Supplementary Organization Questionnaire

This questionnaire is intended for use in projects involving more than one organization. It should be completed by participating organizations other than the lead organization. Project details are not covered by this questionnaire. They must be provided on the full questionnaire, to be submitted by the lead organization. *There must be a completed **full** questionnaire for every privacy impact assessment.*

Privacy impact assessments must be submitted to the Information and Privacy Commissioner with a covering letter from the Head of the FOIP public body or the CEO of the HIA custodian that is leading the project.

Project¹ Information	
Project Name:	Date:
Organization²:	

Contact Information:	
Name:	
Title:	
Office:	
Phone:	Fax:
Email:	

¹ Throughout this questionnaire, the term 'project' is intended to subsume the words 'scheme', 'program', 'initiative', 'application' and 'system', as well as any other word or term that refers to a defined course of endeavour.

² Throughout this questionnaire, the term 'organization' is used to refer to a public body under the *Freedom of Information and Protection of Privacy Act* or a custodian under the *Health Information Act*. When appropriate, the term may also refer to an affiliate under the *Health Information Act*.

#	QUESTION	Yes	Yes and No (partial, incomplete, in preparation, etc.)	No	N/A	Encl. Ref.
---	----------	-----	---	----	-----	---------------

A: Organizational Privacy Management

PREVIOUS PIA SUBMISSIONS

A1a	Has organizational privacy management information for questions A2 through A7 previously been provided with another PIA?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
-----	--	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

A1b	If so, has any of this information changed since the previous PIA was submitted? <i>If "No", please provide the title and date of the previous PIA. No further information is required.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
-----	---	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

PRIVACY POLICIES AND CONTROLS

A2	Is there an organizational strategic plan or business plan that addresses privacy protection? <i>If so, please enclose.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
----	---	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

A3	Does a written privacy charter or policy exist? <i>If so, please enclose.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
----	---	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

A4	Have privacy guidelines been developed for various aspects of the organization's operations? <i>If so, please enclose.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
----	--	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

A5	Is the organization subject to statutory provisions regarding privacy and confidentiality, other than those provided by the Freedom of Information and Protection of Privacy Act and the Health Information Act? <i>Please enclose details.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
----	---	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

#	QUESTION	Yes	Yes and No (partial, incomplete, in preparation, etc.)	No	N/A	Encl. Ref.
---	----------	-----	---	----	-----	---------------

A6	<p>Are organizational policies or procedures in place to ensure that:</p> <ul style="list-style-type: none"> ▪ There is a business purpose for all personal information collected ▪ There is statutory authority for the collection of all personal information ▪ Individual consent is obtained whenever possible ▪ Individuals are duly informed of the purpose and authority for collection ▪ Information about personal information collected is readily available to individuals ▪ Personal information correction and annotation are available when required ▪ Physical records are appropriately stored and managed to maintain privacy <p><i>Please enclose copies.</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
----	--	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

A7	<p>Are privacy controls in place in the organization?</p> <ul style="list-style-type: none"> ▪ Need-to-know policies and procedures for personal information access ▪ Physical security and access controls ▪ IT security and access controls ▪ Waste management controls for personal information ▪ Records management & disposition schedules ▪ Others <p><i>Please enclose copies of related documents.</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
----	--	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

PRIVACY STRUCTURE AND ORGANIZATION						
A8	<p>Is there an appointed privacy director or champion within the organization? <i>If so, please identify the position.</i></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Note/Elaboration:

A9	<p>Does a management reporting process exist to ensure that management is informed of any privacy compliance issues?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
----	--	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

A10	<p>Is senior management actively involved in the development, implementation and/or promotion of privacy measures within the organization?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
-----	--	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

#	QUESTION	Yes	Yes and No (partial, incomplete, in preparation, etc.)	No	N/A	Encl. Ref.
---	----------	-----	---	----	-----	---------------

A11	Are employees with access to personal information provided training related to privacy protection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
-----	--	--------------------------	--------------------------	--------------------------	--------------------------	--

Note/Elaboration:

General Notes: