

June 10, 2024

Diane McLeod
Information & Privacy Commissioner of Alberta
Office of the Information and Privacy Commissioner of Alberta
410, 9925 - 109 Street
Edmonton, Alberta, T5K 2J8

Dear Commissioner McLeod,

RE: Amendment to the My Recovery Plan (MRP) Privacy Impact Assessment
Previous AHS File Number: 2650
Current AHS File Number: 545
OIPC File Number: 026457

I am writing to inform you of an amendment to the above noted Privacy Impact Assessment which your office has not yet reviewed. This amendment is an update to the PIA, changes or new additions are indicated in **red** text, and any deletions are marked with **strikethrough**.

The original Privacy Impact Assessment (AHS file #2650/OIPC file #026457) described My Recovery Plan (MRP) is a third-party website developed by Last Door Recovery Services (LDRS) to measure recovery capital. MRP will allow Alberta Health (AH) to track how Recovery Capital scores increase over time and what interventions are providing better health outcomes. Alberta Health Services (AHS) contracted service providers create and access client portals in MRP, in order to complete recovery capital assessments and create measurable treatment plans for Albertans seeking substance use treatment. In addition, MRP has a wait list function for tracking bed availability for contracted service providers. A client's recovery capital will be influenced by every intervention, treatment, or support provided, which should result in a measurable increase in recovery capital.

This amendment addresses the following changes:

- Removal of "Provincial" and "Zone" pertaining to Addiction & Mental Health throughout document.
- Removal of "clinician(s)" to "service provider(s)" throughout document.
- Alberta Health (AH) replaced with the Ministry of Mental Health and Addiction (MHA).
- Implementation of a My Recovery Plan reporting dashboard for the MHA to provide real-time data for reporting. MHA submitted a separate PIA to the OIPC on January 26, 2024.
- Section A(1) summary section changes to reflect current project scope.
- Addition of AHS operated bed-based addiction treatment services.
- Addition of researchers/research activities.
- Implementation of multifactor authentication (MFA) to confirm a user's identity.

- Implementation of security questions to confirm a client's identity when accessing the client portal.
- Alberta Health Services' Organizational Privacy Management Framework was conditionally accepted by the Office of the Information & Privacy Commissioner July 8, 2022 (AHS file #2232, OIPC file #009600).
- Section C(2)(b) Legal Authority and Purpose Table: Type of information is updated to capture current data element elements described in the respective process.
- Section C(3) Notice: Added the new AHS privacy collection notice poster. The old poster has been removed from the document.
- Section C(4)(a) Consent: Updates on the consent process.
- Section C(4)(b) Expressed Wishes: Updates on the expressed wishes process.
- Section C(6) Agreements: Tri-party Services Agreement has been amended to add an Information Sharing Schedule for the new reporting dashboard.
- Section D(1)(a) Access Registration: Separated process to describe Service Provider site access and AHS site access.
- Section D(1)(d) Access to Information by Role: Updated table to reflect current users, their respective roles and access types. Additional user roles added to support AHS operated bed-based addiction treatment services.
- Section D(2) Education and Training: Revised to reflect current education and training process.

Should you have any questions in this regard, please contact Helena Huynh at 587-774-9363 or via email at Helena.Huynh@albertahealthservices.ca.

Sincerely,
Alberta Health Services



Victoria E. Lane
Chief Privacy Officer and Legal Counsel

cc: Helena Huynh, AHS Information & Privacy Advisor

My Recovery Plan (MRP)

AHS Amendment Reference #545

Information & Privacy Advisor

Helena Huynh

AHS Responsible Affiliate

Victoria E. Lane
Chief Privacy Officer
780-735-1259

Expected Date of Implementation: In Production

This Privacy Impact Assessment Replaces the Following PIAs

PIA Name	OIPC File Reference #
N/A	N/A

Source / Destination Repositories and Their Associated PIAs

Source / Destination Repository	OIPC File Reference #
Business Intelligence (BI) Cluster	012857, 024705
Research Electronic Data Capture (REDCap)	004517
My Recovery Plan (Last Door Recovery Society PIA)	021622
My Recovery Plan Reporting Dashboard (Mental Health and Addiction)	032931

Section A – System or Practice Summary

Alberta Health Services (AHS) will be transitioning to a provincial service delivery refocus plan. Any references to AHS in this document are inclusive of the provincial refocus plans. A PIA review will be conducted in the future to ensure legislative compliance is met to reflect the organizational transition.

1. What does the information system or administrative practice do?

My Recovery Plan (MRP) is a clinical tool to assist clients who are experiencing substance misuse disorder. MRP is a third-party web-based software solution site developed by The Last Door Recovery Society Services (LDRS) to measure recovery capital¹. MRP is not a clinical electronic management record (EMR), the service providers will continue to use their designated EMR or other clinical record management system to record care interactions with clients.

MRP aligns with the following Recovery Oriented System of Care (ROSC) principles: strengths-based, Self self-directed, collaborative decision-making; 24 (1) (a); 24 (1) (b) MRP will allow the Ministry of Mental Health and Addiction (MHA) 24 (1) (a); 24 (1) (b) to track how the change in Recovery Capital scores increase over time and what interventions are providing better health treatment outcomes. The MHA 24 (1) (a); 24 (1) (b) has identified bed-based 24 (1) (a); 24 (1) (b) addiction treatment as the first priority for implementation and has mandated AHS implement MRP in all bed-based addiction treatment services. Participation in MRP is voluntary for clients and AHS will not refuse care if a client chooses not to engage with the software. The client can continue to obtain addiction-related health care services.

~~Alberta Health Services (AHS) contracted~~ Through their own service provider portal, AHS addiction treatment service providers (contracted and operated) collect client information in MRP and complete a Recovery Capital (RECCAP) assessment to measure an individual's recovery capital. Based on their RECCAP assessment score, goals and tasks are suggested to a client and in collaboration with the service provider, goals and tasks are identified for the client to focus on for the next 30-45 days. A RECCAP assessment is completed every 30-45 days, with new goals and tasks selected each time. MRP allows service providers using MRP to customize the goals and tasks, and resources to align with their programming. 24 (1) (a); 24 (1) (b)

24 (1) (a); 24 (1) (b)
24 (1) (a); 24 (1) (b) As part of the intake process, a client portal is created for the client so they can ~~Clients may have access to~~ their individual RECCAP assessment score and check off their goals and tasks as needed.

24 (1) (a); 24 (1) (b) In addition, MRP has a wait list

¹ Recovery Capital is defined as “all identifiable resources, internal and external, that a person may call upon to enter recovery and rely upon to help navigate their ongoing journey.”

function for tracking bed availability for **bed-based** [24 (1) (a); 24] **addiction treatment** service providers.

The data will be stored in a secure online platform hosted on an Amazon AWS cloud platform hosted in Canada. Data will be **extracted from the AWS on a nightly basis and sent** to AHS via GlobalScape and pulled into the BI Cluster for analysis **and reporting.** [24 (1) (a); 24 (1) (b)]

[24 (1) (a); 24 (1) (b)] Aggregate and non-identifiable data **following the AHS Non-Identifying Health Information Privacy Standard** will also be reported to **the MHA AH** via a dashboard **created by LDRS.**

~~LDRS~~ **AHS will be completing an implementation evaluation of MRP, with a focus on AHS sites that are utilizing MRP.** [24 (1) (a); 24 (1) (b)] **Data will be collected from AHS-operated service providers and possibly clients, as determined in the evaluation framework.** [24 (1) (a); 24 (1) (b)]

[24 (1) (a); 24 (1) (b)] **No health or personal information will be collected. Surveys will be circulated, via REDCap to AHS staff and clients for evaluation purposes. The survey does not contain identifiable information.**

[24 (1) (a); 24 (1) (b)]

2. Why does the project need to collect, use, or disclose health information to achieve its objectives?

A client's recovery capital will be influenced by every intervention, treatment, or support provided, which should result in a measurable increase in recovery capital. This will help identify which treatment and interventions are most effective. Through the use of MRP, AHS will be able to measure a client's recovery capital and track its impact on treatment outcomes. AHS will be able to link recovery capital scores to health service utilization **in the BI Cluster** and therefore be able to determine if an improved recovery capital score leads to decreased health service utilization **(for example)**. Linking to health service utilization will also help identify and address service gaps.

3. Who are the key players?

a. Alberta Health Services

- **Provincial** Addiction & **and** Mental Health (AMH) 24 (1) (a); 24 (1) (b)
24 (1) (a); 24 (1) (b)
- Information Technology
- **AHS contracted and AHS operated bed-based addiction treatment services**

b. Non-Alberta Health Services

- **The Last Door Recovery Society (LDRS) (vendor)**
- 24 (1) (a); 24 (1) (b) **The Ministry of Mental Health and Addiction (MHA)**
24 (1) (a); 24 (1) (b)
- Clients (patients)
- **Researchers with Research Ethics Board (REB) approval**

4. Where will health information be stored and accessed?

Data is stored on an external Amazon web services (AWS Central, Cloud based service) in Montreal, Canada. Controlled through application credentialing. There is no failover to United States, only available in Canada. Users can log-in to **the service provider portal** ~~the client portal~~ with a unique username and password, **multifactor authentication (MFA)** is used to confirm a user's identity. **Clients have their own username and password for accessing the client portal.**

Section B – Organizational Privacy Management

~~Alberta Health Services' Organizational Privacy Management Framework was submitted to the Office of the Information & Privacy Commissioner in November, 2019 (AHS File 2232, OIPC 009600).~~

Alberta Health Services' Organizational Privacy Management Framework was conditionally accepted by the Office of the Information & Privacy Commissioner July 8, 2022 (AHS file #2232, OIPC file #009600).

Section C – Project Privacy Analysis

1. Information Listing:

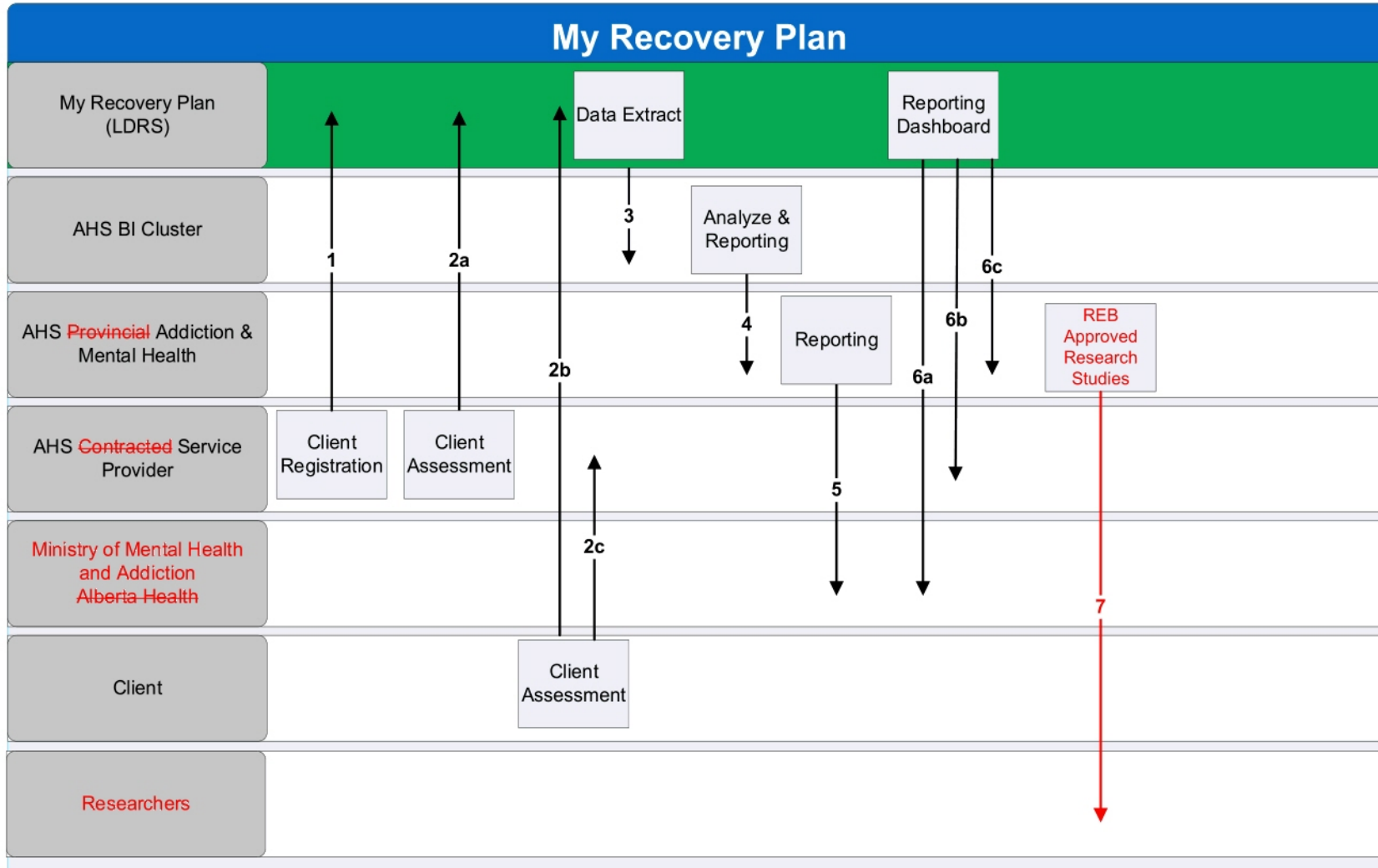
For the full list of data elements, please see **Appendix 1**.

Type of Information	Data Elements	What is the purpose for the collection, use or disclosure of each data element?	Source of Information
Demographics	First & Last Name Preferred Name Gender and gender identity (Gender, Choose not to disclose, Female, Gender Fluid, Intersex, Male, Non-Binary, Not Listed, Questioning, Transgender Male, Transgender Female, Two Spirit) DOB Ethnicity (African/Black/Caribbean, Asian (East/SE), Asian Indian, Caucasian, Inuit, Latin American, Metis, Middle East/Arab, Non-Status First Nation, Other Asian, Other Pacific Islander, Status First Nation, Unknown, Other (comment)) Priority Population (None, Person with a disability, Involved with Justice System, Pregnant, 2 SLGBTQ 2 SIA+, Veteran, Active Duty Military, Dual Diagnosis/Co-occurring Other (describe)) Recovery Path Email Phone Number Postal Code Username Preferred Communication Method	<ul style="list-style-type: none"> Identifies client Method of contact Some data elements will be used to check for duplicate clients in MRP (Last name; preferred name or first name; DOB; email; phone; postal code) 	Client BI Cluster My Recovery Plan

Type of Information	Data Elements	What is the purpose for the collection, use or disclosure of each data element?	Source of Information
	Enrollment Date Discharge Date Reason for Discharge Alumni Status Referral Source Wait List Agency Referral Source Intake Referred by Alberta Referral Source MRP ID Collection Statement		
	Employment Status Legal status Quality of Housing Active Drug Usage How old you were when you started using drugs Length of current episode Process Addictions Opioid Agonist Treatment (OAT) Returning client	<ul style="list-style-type: none"> Outcome data 	Client BI Cluster My Recovery Plan
Clinical (Diagnostic, Treatment & Care)	Navigator (Clinician-Service Provider) name;	<ul style="list-style-type: none"> Provide health services 	Clinician-Service Providers
	Bed assignment	<ul style="list-style-type: none"> Provide health services 	Clinician-Service Providers
	Case Notes	<ul style="list-style-type: none"> Provide health services 	Clinician-Service Providers
	Program History Start Date	<ul style="list-style-type: none"> Outcome data 	Client
	Rec-Cap Assessment	<ul style="list-style-type: none"> Outcome data 	Client
	Recovery Capital Scores	<ul style="list-style-type: none"> Reporting 	My Recovery Plan
	Sub-domain scores	<ul style="list-style-type: none"> Reporting 	My Recovery Plan
Goals and Tasks	<ul style="list-style-type: none"> Outcome data 	My Recovery Plan, Clinician-Service Providers & eClient	

2. Information Flow Analysis

a. Information Flow Diagram



b. Legal Authority and Purpose Table

Flow #	Flow Description	Type of Information	Purpose	Legal Authority
1	AHS Contracted service provider completes client registration and creates client MRP portal.	Client demographics, name, Reference email, phone number, postal code, gender, date of birth, ethnicity, priority population, Recovery Path, Quality of Housing, Active Drug Usage, Process Additions Addictions, Employment Status, Legal Status, Are you on any Opioid Agonist Treatment, Referral Information, Collection Statement, Admission Date, Preferred Communication Method, Discharge, Reason for Discharge, Alumni Status, Wait List Referral Information, Length of Current Episode current life-situation	To allow client to use MRP. Some of these data elements will be used to check for duplicate accounts (name, email, phone number, postal code).	Health Information Act Collection: 20(b)
2a & 2b & 2c	AHS Contracted service provider completes MRP client assessment, assigns goals and tasks and will continue to provide health care service provisions. Client is able to access their MRP portal to provide updates.	MRP assessment, goals and tasks, treatment plan	To provide AHS Contracted Service Provider information for the provision of health services. This will occur multiple times throughout treatment.	Health Information Act Collection: 20(b) Use: 27(1)(a)

