

PRIVACY BREACH RESPONSE FORM

If you need assistance containing the breach, please contact the Privacy Team.

Once you have contained the breach, please complete this form, review with your department Leadership Team member, and forward an electronic version of the form to the Privacy Team via email.

Employee's name:

Leadership Team member's name:

Department:

Date breach occurred:

Date breach was identified:

Date response form was completed:

How was this breach brought to your attention?

Name of person(s), outside CPSA, who received or discovered the confidential information:

Employee note:

Privacy Team notes:

Name of person(s) whose information was disclosed:

Employee note:

Privacy Team notes:

How did the breach occur?

Describe in detail how the breach occurred: what happened, when, and how.

Employee note:

Privacy Team notes:

What types of personal information were involved in the breach?

List ALL identifiers or particularly sensitive personal information involved (e.g., name, email address, mailing address, telephone number, personal health number, health information, financial information, other confidential information, etc.).

Employee note:

Privacy Team notes:

Continue to next page to complete the form.

How did you contain the breach?

Has network security been recovered?

Has the document(s) been returned?

Do we have written confirmation the document(s) has been deleted?

List any other action(s) you've taken to contain the breach and prevent it spreading further.

Employee note:

Privacy Team notes:

Does the person who received the document(s) in error know any of the individuals named in the document(s)?

Employee note:

Privacy Team notes:

Did the breach spread beyond the person who first received it in error?

Employee note:

Privacy Team notes:

Follow-up to breach containment

Have you issued a corrected copy of the document?

Have you removed the incorrect document from Quest?

List any other action(s) you've taken to correct the situation caused by the breach.

Employee note:

Privacy Team notes:

Describe any communication you had with the person who received the information in error.

Include date(s) of contact, any information provided by them, instructions you gave to them, and their contact information.

Employee note:

Privacy Team notes:

Describe any communication you had with the person whose information was incorrectly disclosed.

Include date(s) of contact, any information provided by them, instructions you gave to them, and their contact information.

Employee note:

Continue to next page to complete the form.

Privacy Team notes:

Name of person(s) the notification/apology letter was sent to:

**Enclose a copy of the notification/apology letter(s) with this form.*

Date the notification/apology letter(s) was sent:

What corrective actions did you or your department take, or plan to take, to prevent future breaches?

Employee note:

Privacy Team notes:

Is there an educational opportunity for other people or departments at CPSA?

Select all that apply.

Yes, department processes could be updated

Yes, a how-to sheet could be updated

Yes, a SHIELD principle applies

Yes, a privacy directive applies

Suggest any staff training topics that might help prevent a similar breach from occurring at CPSA:

For Privacy Team to complete

Refer to Risk of Harm Assessment Form

PII/SCI score:

Likelihood of Risk score:

Severity of Impact score:

Risk of Harm score:

Reported to OIPC:

Summary of Reasons:

End of form.