



Diagnostic Accreditation Program

Policy

Client Information Protection Policy

PURPOSE

A critical part of the assessment of facilities to accreditation standards involves the review of evidence including documents and records submitted by the facility. Ongoing monitoring of accreditation compliance is conducted between on-site assessments through the use of proficiency testing and quality assurance records and associated investigations and reports. Where this information is reviewed at the facility, it will remain in the facility's possession. Where this evidence is submitted to the DAP for review, it will be held in confidence according to the College records retention schedule.

POLICY

The DAP will disclose only the facility name, service scope and current accreditation status by publishing this information on the DAP section of the College's website: <https://www.cpsbc.ca/programs/dap>.

The diagnostic facility and its leadership may publish or otherwise release the final accreditation report at their discretion, but if they choose to do so, the report must be disclosed in its entirety.

The DAP staff and peer assessors will treat with confidence any information acquired during the course of conducting an accreditation assessment or during the ongoing monitoring process. Information submitted to the DAP may be disclosed in the following ways:

Information	Disclosure	Retention
Name of facility	Public (DAP section of the College's website)	Duration of period of accreditation DAP database for accreditation maintenance – permanent retention
Information on the Accreditation Certificate (dates, program, modalities/disciplines, scope of accreditation)	Public (DAP section of the College's website)	DAP database for accreditation maintenance – permanent retention
Facility self-assessment DAP on-site assessment Documents and records submitted as evidence (pre- or post-assessment) Proficiency testing and quality assurance records (monitoring process)	Any records in the custody or under the control of the College are subject to disclosure [with limited exceptions] and protection provisions of the FIPPA.	Retained securely in accordance with College Records Retention and Disposition Schedule (RRDS).

Information	Disclosure	Retention
Final Accreditation Report	Records will be disclosed when required by law. Where such disclosure is required, the diagnostic service will be informed.	

RESPONSIBILITY

Role	Responsibility
DAP managers	Ensure the maintenance of the publicly posted information, and the adherence to the College records retention schedule for any records in the custody of the College

RELATED DOCUMENTS

1. Board and Committee Confidentiality Policy March 2014, Governance Policy Manual, College of Physicians and Surgeons of BC
2. College of Physicians and Surgeons of British Columbia Service Provider Agreement -Appendix C: Guidelines for securing personal and/or confidential College information

REFERENCES

1. ISQua International Standards for External Evaluation Organizations, 4th Edition, Standard 1.7 ©2019