

**Ministry of Health**

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e-Approval # 172-2022-231

Mr. Bill Hatanaka  
Board Chair  
Ontario Health  
525 University Avenue 5th floor  
Toronto ON  
M5G 2L3

Dear Mr. Hatanaka:

The Ministry remains as the executive sponsor of the Ontario Health Data Platform (OHDP), a collaborative initiative to accelerate research and analytics within Ontario to help the province better manage and respond to the COVID-19 pandemic. Thank you for your ongoing commitment to deliver this platform and support of this platform for the people of Ontario.

Subsections 18(11) and (12) of O. Reg. 329/04 (General) made under the *Personal Health Information Protection Act, 2004* (the "PHIPA Regulation") has been amended, such that subsections 18(11) and (12) will be revoked on July 31, 2024 as posted at: <https://www.ontario.ca/laws/regulation/040329#BK19>.

The PHIPA Regulation continues to provide that Ontario Health, when requested to do so by the Minister, shall disclose personal health information (PHI) to the Minister where the Minister has determined that such disclosure is necessary for the purposes of:

- (a) researching, analyzing, investigating, preventing, responding to or alleviating COVID-19 or its effects; or
- (b) evaluating or monitoring the impact of COVID-19 on the management of, the allocation of resources to or planning for all or part of the health system.

Pursuant to subsection 18(11) of the PHIPA Regulation, I have made a determination that the PHI set out in Appendix A to this letter remains necessary for the purposes set out above, and I hereby request that Ontario Health continue to provide to the Ministry of Health, the PHI set out in Appendix A from Ontario Health's records for those same purposes.

Whereas the initial request remained in place to July 30, 2022, this request shall remain in place until further notice or July 31, 2024, the date s. 18(11) of the PHIPA Regulation is set to expire, whichever comes first. Timelines and further details regarding the disclosure of this information will be addressed in a Memorandum of Understanding between the Ministry and Ontario Health, forthcoming from Greg Hein, Assistant Deputy Minister, Digital Health Division.

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Mr. Bill Hatanaka

Thank you for your ongoing dedication and commitment to ensuring the availability of data and information needed for evidence-based health system decisions, and especially for your support in Ontario's ongoing response to the COVID-19 pandemic and longer-term consequences.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Sylvia Jones', with a stylized, cursive script.

Sylvia Jones  
Deputy Premier and Minister of Health

- c: Matthew Anderson, President and Chief Executive Officer, Ontario Health  
Dr. Catherine Zahn, Deputy Minister, Ministry of Health  
Melanie Fraser, Associate Deputy Minister, Health Services, Ministry of Health  
Greg Hein, Assistant Deputy Minister, Digital Health Division, Ministry of Health  
Christine Sham, Director, Information Management Strategy and Policy Branch, Digital Health Division, Ministry of Health

## Appendix A

### RELEVANT PHI REQUESTED

The Relevant Personal Health Information consists of the following datasets to be disclosed by Ontario Health. After launch, the Ministry may amend the dataset list from time to time in writing, for ongoing OHDP operations.

\* Note “Data Source” indicates transmission of data files not necessarily PHIPA custodianship.

Data Source	Data Set	Full Name	Description	Rationale
1. MOH via OH-CCO	RPDB (Phase 0)	Registered Persons Database	RPDB contains information on persons registered under the OHIP and those who are eligible for the Ontario Drug Program. This database is critical to a number of key programs that deliver health services to the public, for example, access to hospital services, physician services and drug benefits.	Contains core demographics data on Ontarians such as their sex, age, residence, etc., variables that can be used to identify potential predictors of COVID-19 and build machine learning (ML) models that can recognize different groups in the population with potentially different COVID-19 experiences/outcomes.
2. CIHI via OH-CCO	NACRS (Phase 0)	National Ambulatory Care Reporting System	NACRS at the Canadian Institute for Health Information (CIHI) is a national database which contains data for all hospital and community-based ambulatory care: day surgery, outpatient and community-based clinics, and emergency departments (EDs). Client visit data is collected at time of service in participating facilities. NACRS collects demographic, administrative, clinical, and service-specific data for ED, day surgery, and other ambulatory care visits.	Contains Ontario data pertaining to EDs including ICD10 codes describing presenting condition and diagnosis, essential to COVID-19 projects aimed at developing models for individual risk prediction.  Full Data Set can be used to help train more accurate ML models of features of the healthcare system.
3. MOH via ICES via OH-CCO	Ontario Health Insurance Plan (OHIP) Claims History	Ontario Insurance Program Claims	This Data Set contains information on all claims items processed. Includes patient, service and amount paid information. The assessment and processing of claims is a financial record of money	Completeness of the OHIP claims database can serve a critical role in training accurate ML models; specific data elements are important complements to other key administrative Data Sets (NACRS, DADS,

Data Source	Data Set	Full Name	Description	Rationale
	Database (Phase 0)		paid to a provider for services billed on behalf of Ontario residents.	RPDB) essential to COVID-19 risk prediction projects. Multiple instances across Data Sets of information such as date of encounter improve accuracy.
4. CIHI via OH-CCO	DAD (Phase 0)	Discharge Abstract Database	DAD at CIHI is a national database designed to capture administrative, clinical, and demographic information on hospital discharges (including deaths, sign-outs, and transfers).	Data elements cover clinical, demographic, and administrative information at a provincial level essential to COVID-19 research project data analysis which are known to indicate strong dependencies on demographics and clinical risk factors.  Multiple Data Sets improve accuracy by capturing events missing from other Data Sets or identifying variance in events captured in multiple Data Sets.
5. CIHI via MOH via ICES via OH-CCO	OMHRS (Phase 0)	Ontario Mental Health Reporting System	OMHRS analyzes and reports information submitted to CIHI about all individuals receiving adult mental health services in Ontario, as well as some individuals receiving services in youth inpatient beds and selected facilities in other provinces. OMHRS includes information about mental and physical health, social supports, and service use, as well as care planning, outcome measurement, quality improvement and case-mix funding applications.	This dataset covers a patient population where some features, such as previous addictions, might be useful proxies for other risk factors for COVID-19. These data can also be used to track mental health effects of COVID-19 and social distancing and other policies. Such data also help to increase the size of Data Sets used to train ML models in features of the health care system, improving accuracy of COVID-19 related models.
6. MOH via ICES via OH-CCO	ODB (phase 0)	Ontario Drug Benefits Program	ODB contains Ontario Drug Benefit Program information, including recipients, payment, claims, and pharmacy and practitioner information. The ODB Program provides drug benefits for Ontarians aged 65 and older, residents of long-	Drug type and utilization data is an important clinical factor necessary to understanding existing conditions or risk factors related to COVID-19, essential to developing risk prediction models.

Data Source	Data Set	Full Name	Description	Rationale
			term care homes, homes for special care, recipients of professional home services and social assistance and recipients of the Trillium Drug Program	
7. CIHI via MOH via ICES via OH-CCO	CCRS (Phase 0)	Continuing Care Reporting System	CCRS at CIHI is a national database that contains demographic, clinical, functional, and resource utilization information on individuals who receive continuing care services in hospitals or long-term care homes in Canada.	This data is specific to long-term care populations who are particularly vulnerable to COVID-19, where proposed projects on risk prediction could benefit from more targeted data.
8. OH-CCO	eCTAS (Phase 0)	Electronic Canadian Triage & Acuity Scale	eCTAS solution is a triage decision support system. It is designed by clinical and technical experts and based on proven research from the University of Alberta. It seeks to: <ul style="list-style-type: none"> <li>• Improve patient safety and quality of care by establishing an electronic triage decision support tool that will standardize the application of CTAS across Ontario, and</li> <li>• Enhance accountability through the timely collection and analysis of clinical triage data.</li> </ul>	Province-wide, standardized, and real time triage data is needed to develop prediction models for COVID-19-ED volumes/admissions.
9. MOH via ICES via OH-CCO	OLIS - C19 (Phase 0)	Ontario Laboratories Information System – COVID 19 subset	This Data Set includes data on laboratory tests covered by OHIP. OLIS data is used to analyze Ontarians' use of health services and satisfaction with the delivery of laboratory services paid for by Ontario taxpayers. OLIS is a database that is under the Ministry's custodianship. OLIS-C19 is a subset of the OLIS information repository that contains lab test orders and results from hospitals, community labs and public health labs specific to	Lab data providing province-wide testing results is critical to all projects aimed at developing models related to COVID-19 prediction.

Data Source	Data Set	Full Name	Description	Rationale
			COVID-19. The data feed does not include records with a consent block in place.	
10. MOH via ICES via OH	COVaxON	Provincial COVID-19 Vaccine Solution – COVax Ontario	COVax data includes patient demographic information; sociodemographic information and vaccine administration information (e.g. product, dose, adverse event following injection.)	<p>The purpose of this Data Set is to collect information to understand characteristics of individuals who receive a vaccine for COVID-19 to support and inform the effective rollout of the COVID-19 vaccine program in the province.</p> <p>The PHI is required to conduct analysis with respect to the evaluation, planning, and monitoring of the impact of COVID-19 on the health system, and to support related research for preventing, responding to, or alleviating COVID-19 or its effects in Ontario.</p>
11. HHS via ICES via OH	CCIS	Critical Care Information System	CCIS data includes patient demographic information, hospital information, critical care admission/discharge information including COVID-19 status, clinical data about various clinical supports and interventions required, bed information including ventilators and information about outcomes of critical care including infection rates and other incidents.	<p>The purpose of this Data Set is to collect comprehensive critical care information on every patient (adult, pediatric, and neonatal) admitted to a Level 2 or Level 3 critical care unit in Ontario's acute care hospitals. In addition to providing information on critical care service access and utilization, and patient outcomes, CCIS also provides information to inform capacity monitoring, system planning, and effective management of critical care resources in Ontario. CCIS was implemented in adult and pediatric critical care units in 2009, followed by neonatal intensive care units in 2018. From March 2020, CCIS provides COVID-19 status for patients admitted to</p>

Data Source	Data Set	Full Name	Description	Rationale
				<p>adult, pediatric and neonatal intensive care unit.</p> <p>The PHI is required to conduct analysis with respect to the evaluation, planning, and monitoring of the impact of COVID-19 on the health system, and to support related research for preventing, responding to, or alleviating COVID-19 or its effects in Ontario.</p>
12. MOH via ICES via OH	iPHIS- CCM	Integrated Public health Information System – Case Contact and Management System (COVID-19)	The iPHIS-CCM includes patient demographic information, public health units and travel information and case and outbreak data.	<p>The purpose of this Data Set is for reporting case information for all reportable communicable diseases as mandated under PHIPA in Ontario. The database is used in Ontario Public Health Units for communicable disease and contact follow-up as well as outbreak management which includes COVID-19.</p> <p>The PHI is required to conduct analysis with respect to the evaluation, planning, and monitoring of the impact of COVID-19 on the health system, and to support related research for preventing, responding to, or alleviating COVID-19 or its effects in Ontario.</p>
13. MOH via ICES via OH	NMS	Narcotics Monitoring System	The NMS includes information on dispensed prescriptions for narcotics, controlled substances, and other monitored drugs.	The purpose of the NMS is to collect dispensing data from dispensaries in respect of all dispensed narcotics, controlled substances, and other monitored drugs, irrespective of whether the prescription is paid for under a publicly funded drug program, through private insurance, or by cash for educational and public health and reporting possible criminal conduct to law enforcement agencies.

Data Source	Data Set	Full Name	Description	Rationale
				<p>The PHI is required to conduct analysis with respect to the evaluation, planning and monitoring of the impact of COVID-19 on the health system, and to support related research for preventing, responding to, or alleviating COVID-19 or its effects, specifically in the areas of prescribing practices and use of narcotic analgesics (i.e. opioids), non-narcotic controlled drugs (i.e. stimulants, benzodiazepines, barbiturates), and other monitored drugs (e.g. testosterone) in the province.</p>
14. MOH via ICES via OH	OLIS	Ontario Laboratories Information System	The OLIS includes patient demographic information; (e.g., birth date, sex, patient address; healthcare provider data (e.g., practitioner licensing numbers); clinical data (e.g., laboratory test results, additional information on test requisitions and test types)	<p>The purpose of this Dataset is to provide authorized health care providers with access to laboratory test orders, results from hospitals, community laboratories and public health laboratories. As patients move between hospitals, family physicians, home care and long-term care settings, OLIS makes viewing current and past test results easier and enables treatment decisions to be made at the point of care. The information collected serves the following purposes: providing a comprehensive and complete laboratory test history, monitoring progress of treatments, supporting chronic disease management and creates system cost savings by reducing administrative time spent sending lab results and duplicating tests.</p>



Data Source	Data Set	Full Name	Description	Rationale
				The PHI is required to conduct analysis with respect to the evaluation, planning, and monitoring of the impact of COVID-19 on the health system, and to support related research for preventing, responding to, or alleviating COVID-19 or its effects, specifically in the areas of clinical lab testing, and disease detection and monitoring.