

## Procedure: Privacy Impact Assessment

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Parent Policy:	6500 Protection of Privacy
Procedure Sponsor:	Vice President, College Services
Procedure Contact:	Privacy Officer: <a href="mailto:privacy@selkirk.ca">privacy@selkirk.ca</a>
Stakeholders:	All members of the Selkirk College community: Employees, Students, and the Board of Governors
Approved by:	Vice President, College Services
Effective Date:	December 4, 2025
Last reviewed:	December 2, 2025      Scheduled review date:      December 2, 2028

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### A. Purpose

Selkirk College is responsible for ensuring that it protects the personal information within its custody and control, including by complying with the provisions of the Freedom of Information and Protection of Privacy Act (“FIPPA”). FIPPA requires that Selkirk College conduct Privacy Impact Assessments (“PIAs”) to ensure that all collection, use, disclosure, protection and processing of personal information is compliant with FIPPA.

A Privacy Impact Assessment (PIA) is a process for identifying, assessing and mitigating privacy risks.

The purpose of this Procedure is to outline the scope, roles, responsibilities, and process overview for conducting PIAs at the college in accordance with the provisions of FIPPA, using a risk-based, proportionate approach.

### B. Scope of Privacy Impact Assessment

A PIA reviews the privacy implications of a new or significantly revised initiative to ensure compliance with FIPPA and identify and mitigate any associated privacy risks. An “initiative” includes an enactment, system, project, program or activity of the college. The level of analysis and documentation required for a PIA will be proportionate to the level of privacy risk posed by the initiative.

A PIA may examine:

1. The types of personal information (PI) collected, used, disclosed or stored
2. The purposes for which PI is collected, used, disclosed or stored
3. The involvement of service providers and the nature of their access to PI
4. The jurisdictions in which PI will be stored, processed or accessed
5. The reasonable security arrangements required to protect PI
6. The likelihood and potential impact of unauthorized access, use or disclosure
7. The mitigation measures, contractual provisions or safeguards needed to manage identified risks

This Procedure applies to all new and significantly revised initiatives of the college.

## C. Roles and Responsibilities

### 1. Responsibility of The Head.

The administration of this Procedure is the responsibility of the President, who is the “head” of the college for all purposes under FIPPA (the “Head”). The Head may delegate any of their powers under this Procedure or FIPPA to other college personnel by written delegation.

### 2. Responsibilities of the Privacy Officer.

The Privacy Officer is responsible for:

- (a) reviewing all submitted PIAs;
- (b) identifying privacy risks and recommending mitigation strategies;
- (a) determining the appropriate level of review and documentation, including the need for any supplementary assessments; and
- (b) supporting Initiative Leads through direct consultation and the development of guidance resources.

### 3. Responsibilities of the Initiative Lead / Accountable Authority.

The Initiative Lead is the accountable authority, at the Dean or Director level or above, who is responsible for:

- (c) ensuring initiatives are referred to the Privacy Officer for review;
- (d) collaborating with ITS and Procurement to identify system or legal requirements;
- (e) supporting all work necessary for PIA completion and approval;
- (f) being familiar with and ensuring the initiative is carried out in compliance with the PIA; and
- (g) requesting amendments to the PIA when needed, particularly when changes affect technology, vendors, data elements or storage locations.

### 4. Responsibilities of All Employees

- (a) Any employee responsible for developing or introducing a new or significantly revised initiative that involves or may involve the collection, use, disclosure or processing of Personal Information by the college must report that initiative to the Privacy Officer at an early stage in its development.
- (b) All employees involved in a new or significantly revised initiative will cooperate with the Privacy Officer and provide all requested information needed to complete the PIA.
- (c) All employees will cooperate with any other PIA that the Privacy Officer decides to perform or directs the Initiative Lead to perform.
- (d) All employees of Selkirk College are expected to be aware of and follow this Procedure if they are involved in a new or significantly revised initiative where personal information may be involved.
- (e) Employees are responsible to plan and implement new or significantly revised Initiatives in accordance with the requirements of this Procedure, and to consult early with the Privacy Office when an initiative may involve personal information or new technologies.

## **D. PIA Process Overview**

Initiative Leads and employees must assess the privacy impacts of any new or significantly modified initiative, even if they believe that no PI is involved, and must submit that assessment to the Privacy Officer for review.

The Privacy Officer will determine the level of analysis required. The depth of review and amount of documentation will be proportionate to the level of privacy risk associated with the initiative. The Privacy Officer will assess risks using the factors outlined in Section B.

When an initiative presents elevated privacy or security risks, the Privacy Officer may conduct a more detailed review and recommend additional mitigation measures. Where appropriate, the Head may be required to approve the PIA. Approval must be documented in writing.

## **E. Supporting Policies and Documentation**

[Policy: 6550 Protection of Privacy](#)

[Form: New Technology Request](#)