Saskatchewan

INFORMATION and PRIVACY COMMISSIONER

2009-2010 ANNUAL REPORT

Mission

The people of Saskatchewan shall enjoy the full measure of information rights that have been affirmed by the Legislative Assembly of Saskatchewan

www.oipc.sk.ca

Information is the current that charges accountability in government.

Former Auditor-General, Denis Desautels

Remember your personal information belongs to you, no one else. Governments, banks, and other organizations who need your information often forget that they act only as the custodians of the information you entrust to them, and which they are responsible for safekeeping. They do not own it.

Ann Cavoukian and Don Tapscott,
Who Knows: Safeguarding Your Privacy in a Networked World
(Toronto: Random House of Canada, 1995), p. 25

Saskatchewan Information and Privacy Commissioner

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June 30, 2010

Hon. D. Toth
Speaker of the Legislative Assembly
129 Legislative Building
Regina, Saskatchewan
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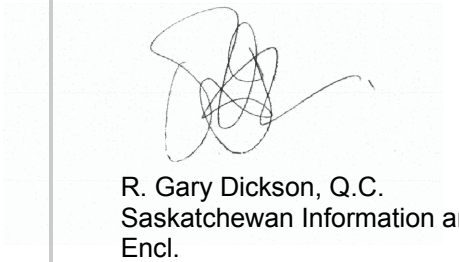
Dear Mr. Speaker:

I have the honour to present to the Legislative Assembly my 2009-2010 Annual Report in accordance with the provisions of section 62(1) of *The Freedom of Information and Protection of Privacy Act,* section 52(1) of *The Local Authority Freedom of Information and Protection of Privacy Act* and section 60(1) of *The Health Information Protection Act.*

Respectfully submitted,



R. Gary Dickson, Q.C.
Saskatchewan Information and Privacy Commissioner
Encl.

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Introduction

The role of the Information and Privacy Commissioner has sometimes been described as that of the umpire in the information age.

That role has also been described as follows:

> ***Our recent comparative analysis of privacy protection policy has concluded that, regardless of legislative powers, every data-protection commissioner in Canada and elsewhere is expected at some point to perform seven interrelated roles: ombudsman, auditor, consultant, educator, policy adviser, negotiator, and enforcer*** (Colin J. Bennet, *The Privacy Commissioner of Canada: Multiple Roles, Diverse Expectations and Structural Dilemmas*, Canadian Public Administration Vol 46, No. 2).

In 1992, *The Freedom of Information and Protection of Privacy Act* (FOIP) was proclaimed. This enshrined two principles:

1. public records must be accessible to the public; and
2. "personal information" must be protected by public bodies.

FOIP applies to all "government institutions". This captures all Ministries of the Saskatchewan Government plus Crown corporations, Boards, Commissions and Agencies.

In 1993, *The Local Authority Freedom of Information and Protection of Privacy Act* (LA FOIP) was proclaimed. This law is very similar to FOIP, but applies to "local authorities" such as schools, universities, regional health authorities, municipalities, and library boards.

In 2003, *The Health Information Protection Act* (HIPA) was proclaimed. This applies to organizations and individuals designated as a health information "trustee", defines what is "personal health information" and sets the rules for how that personal health information can be collected, used and disclosed. It also provides a right of access to personal health information and a right to seek correction of errors.

The Supreme Court of Canada has declared that laws like FOIP, LA FOIP and HIPA are special kinds of laws that define fundamental democratic rights of citizens (Gérard V. La Forest*, The Offices of The Information and Privacy Commissioners: The Merger and Related Issues*, page 8). They are "quasi-constitutional" laws that generally are paramount to other laws.

Mandate of the Commissioner

There are four major elements in the Saskatchewan Information and Privacy Commissioner's (the Commissioner) mandate defined by FOIP, LA FOIP and HIPA:

1. The Commissioner responds to requests for review of decisions made by government institutions, local authorities or health information trustees in response to access requests, and makes recommendations to those bodies.

2. The Commissioner responds to complaints from individuals who believe their privacy has not been respected by government institutions, local authorities or health information trustees, and makes recommendations to those bodies.

3. The Commissioner provides advice to government institutions, local authorities or health information trustees on legislation, policies or practices that may impact citizens' access or privacy rights.

4. The Commissioner provides education with respect to information rights including both access to information and protection of privacy.

Mission Statement

The people of Saskatchewan shall enjoy the full measure of information rights that have been affirmed by the Legislative Assembly of Saskatchewan

Vision

Saskatchewan government institutions and local authorities operating in a fashion that is as transparent as possible and with the greatest sensitivity to the privacy of the people of Saskatchewan, all in accordance with the provisions of the applicable legislation.

Saskatchewan health information trustees operating in a fashion that fully respects the privacy rights of the people of Saskatchewan guaranteed by *The Health Information Protection Act* and the *Canadian Charter of Rights and Freedom*.

Commissioner's Message

Access to government records and information is an essential requirement for modern government. Access facilitates public knowledge and discussion. It provides an important guard against abuses, mismanagement and corruption. It can also be beneficial to governments themselves – openness and transparency in the decision making process can assist in developing citizen trust in government actions and maintaining a civil and democratic society.

David Banisar, Freedom of Information and Access to Government Records Around the World (http://www.freedominfo.org/documents/global_survey2004.pdf)

THE ACCESS AND PRIVACY DEFICIT IN SASKATCHEWAN

Background

The access and privacy regime in any province is a cornerstone of our democratic system of government. A 1977 federal Green Paper entitled *Legislation on Public Access to Government Documents* declared that: *Open government is the basis of democracy*. Canada has twenty-seven years of experience with public sector access and privacy legislation. That experience confirms that such a regime is easily one of the most effective ways of promoting government that is more accountable to the public between elections and that does a better job protecting the privacy of its citizens.

I use the phrase 'access and privacy regime' deliberately since it captures much more than just the law itself. This would include the machinery that governments and public bodies create to meet their obligations. This includes *The Freedom of Information and Protection of Privacy Act* (FOIP) Coordinators in each government institution and local authority tasked with meeting statutory requirements and the extent to which they are supported and resourced as well as the kinds of tools and training developed to assist those FOIP Coordinators in their key role. This also includes the decisions, practices and procedures of our oversight office.

Finally, the access and privacy regime includes the executive and management levels of leadership within government and the extent to which value is assigned to complying with our 'sunshine' law which also protects the privacy of Saskatchewan residents. While the law is always a key component of any access and privacy regime, the strongest law imaginable will not guarantee a strong regime if that law is not adequately supported by leadership, well-trained FOIP Coordinators, adequate resources and appropriate independent oversight.

Commissioner's Message

Saskatchewan in 2010 must confront a troubling **access and privacy deficit**. This deficit is the gap between significantly increasing public demand for access and privacy services and the frozen or shrinking resources available to meet that public demand. Even more concerning is that the deficit in our province appears to be growing.

First consider the evidence of the growing public demand.

- The fact that our website, www.oipc.sk.ca received 550,762 'hits' in 2009-2010. This is an increase of 71% over 2008-2009. Available on our website are copies of the legislation and access forms, all Reports of the Commissioner since 2003, archived copies of our monthly E-newsletter and a number of tools and resources for the public, for public bodies and for trustees.

- The increase of summary advice requests to our office from Saskatchewan residents and employees of the approximate 3,000 bodies that our office oversees from 3136 in 2008-2009 to 3655 in 2009-2010. This is an increase of 17%.

- The 62% increase of new case files opened in 2009-2010 over the previous year. This is 235 in 2009-2010 up from 145 in 2008-2009.

- The 19% increase in requests for detailed advice and commentary from public bodies and trustees. This is 82 in 2009-2010 up from 69 in 2008-2009.

- We are advised by local authorities, government institutions and trustees that they are experiencing unprecedented levels of activity on the access and privacy file.

As I have noted in my 2004-2005 and 2005-2006 Annual Reports, very little was done to address implementation of our access and privacy laws for the eleven years that followed proclamation of FOIP in 1992. We are still developing the infrastructure to support our access and privacy laws.

This means that as the Saskatchewan government undertakes a downsizing which treats access and privacy services no differently than any other aspect of government service, there is a differential impact on the access and privacy rights of Saskatchewan residents.

Unlike other government agencies and Ministries that already have a critical mass and established patterns of service delivery, our access and privacy regime has not yet achieved critical mass. This has resulted in public demand that has overwhelmed the capacity of Saskatchewan's access and privacy regime to satisfy or in some cases, even to address that demand.

Commissioner's Message

New Efficiencies in the Office of the Information and Privacy Commissioner (OIPC)

Nonetheless, I recognize that our independent office must also be mindful of the imperative to ensure that all public bodies operate as efficiently as possible and to that end consider innovation to eliminate inefficiency.

When I learned in February 2010 that the Board of Internal Economy refused my request for a fourth Portfolio Officer for the third consecutive year, we implemented a number of administrative or procedural changes:

- We have reassigned case files to group similar types of files or at least common public bodies.
- We have moved the intake responsibility from the over-burdened Portfolio Officers who already have a caseload that is approximately three times larger than the caseload for their counterparts in other Canadian jurisdictions to our Director of Operations and our Administrative Coordinators.
- We have extended the time target for responding to summary advice requests.
- We have created a new screening process to streamline requests for presentations and educational sessions.
- We have created a new screening process to streamline requests for detailed advice and commentary from the public bodies and trustees we oversee.
- We have eliminated most remote service outside of Regina.
- We are advising citizens who wish to appeal an access denial or a breach of privacy investigation that it may be 12 to 18 months until a Portfolio Officer may be able to commence work on their file.

We succeeded in closing 132 case files in 2009-2010, an increase of 74% over the 76 files closed in 2008-2009. However, our backlog of reviews and investigations continues to grow faster than our capacity to close case files. There were 375 actives files in this fiscal year which is an increase of 44% over the last fiscal year.

Commissioner's Message

Profile of our Access and Privacy Deficit

Our current access and privacy deficit in Saskatchewan includes the following features:

- Failure by elected and non-elected leaders in public bodies to emphasize to their employees the importance of compliance with access and privacy laws;
- Failure to require that the performance criteria for Deputy Ministers for Executive Government and Chief Executive Officers for local authorities include meeting access and privacy best practices in their respective organizations;
- Outdated laws that have not been significantly amended for 18 years to address new technologies and the acquired experience in Saskatchewan and many other jurisdictions;
- Failure to consolidate FOIP and LA FOIP into a single comprehensive law;
- Failure to enact a private sector privacy law that would also provide protection to private sector employees;
- Failure to compel the appointment by all government institutions, local authorities and trustees of senior FOIP Coordinators with responsibility for both access and privacy compliance and to ensure that those FOIP Coordinators can easily be identified by both employees and the public;
- An unreasonable backlog of reviews and investigations by my office, some of which are more than five years old;
- Limited and inadequate powers for the Commissioner to deal with breach of privacy complaints under FOIP or LA FOIP;
- No right of appeal from the decision of a public body that refuses to follow recommendations from the OIPC related to a breach of privacy under FOIP or LA FOIP;
- Lack of rigour in formal and informal data sharing between public bodies;
- No requirement for public bodies and trustees to report annually on privacy breaches and privacy breach complaints;
- Lack of a publicly available comprehensive manual that details the operation and interpretation of our three access and privacy laws in Saskatchewan, particularly the exemptions that permit certain information to be denied to applicants; and

Commissioner's Message

- Lack of adequate resources at all levels for access and privacy implementation and compliance including:
  - ◊ OIPC;
  - ◊ Access and Privacy Branch (the Branch), Ministry of Justice and Attorney General;
  - ◊ FOIP Coordinators in each government institution, with notable exceptions;
  - ◊ FOIP Coordinators in each local authority, with notable exceptions;
  - ◊ HIPA Coordinators in each trustee organization, with notable exceptions.

What this means is that Saskatchewan residents may be denied the benefit of the access and privacy rights defined by our laws. It means that some public bodies and trustees will not be held accountable when they fail to provide the remedies guaranteed by our laws. It may mean that the legislation and legislative remedies are ignored and residents will not bother pursuing the remedies available to them.

The inherent risk in generalizing conclusions is that it often fails to take into account areas where there has been remarkable progress. Part of the difficulty is that there is currently no requirement for any kind of public report that tracks the number of privacy complaints that are made against Saskatchewan public bodies. There is no such annual reporting requirement for access requests made to local authorities or trustees and how those requests have been handled. Although we have a mandate to oversee compliance by approximately 3,000 bodies in this province, we do not have the resources to audit any significant sampling of these bodies to assess the need for remedial action. I can only say that our office's experience to date suggests that many public sector organizations and trustees would not be compliant with the applicable legislation.

It is not at all difficult to identify areas in our province where there has been progress. In fact what is particularly impressive is how much progress has been made in recent years notwithstanding the access and privacy deficit. This includes:

- The Branch within the Ministry of Justice and the Attorney General, although understaffed since the time it was created, has continued to develop tools and resources for FOIP compliance. It has undertaken regular meetings with FOIP Coordinators of government institutions and has conducted outreach and education sessions with a number of local authorities. This includes the distribution of some 60,000 copies of the excellent *Information Management Handbook* developed by the Branch. This Branch is also providing summary advice to government institutions and local authorities.

- The Ministry of Health (Health) created a very active privacy and access team under the direction of the Director of Health Information Policy, Analysis and Legislation, and has done an excellent job raising awareness and providing training within that large Ministry for statutory compliance. This included a very successful one month Privacy and Security Awareness campaign in that Ministry in April, 2009. I understand that this program is or will be replicated in other ministries.

Commissioner's Message

- The Ministry of Social Services has created an access and privacy team that is actively engaged in consultations on new access or privacy impacting programs within the Ministry.

- The major Crown corporations continue to make a meaningful commitment to full compliance with access and privacy requirements.

- Subsequent to our 2008-2009 Annual Report, the Minister of Justice and Attorney General has communicated with all provincial government institutions to emphasize the importance of compliance with statutory privacy requirements and to promote privacy best practices in those organizations.

- Regional Health Authorities (RHAs) continue their efforts to raise awareness and improve compliance with their employees.

- In the course of our investigations and reviews, we are finding an increase over the previous year in the number of public bodies and trustees that have familiarized themselves with their statutory obligations and are taking appropriate action in response to access requests and privacy complaints.

- A number of the larger ministries and Crown corporations, municipalities and RHAs now have a dedicated access and privacy officer with support staff and significant resources.

This progress speaks volumes about the dedication and the resourcefulness of those access and privacy professionals working in the Saskatchewan public sector and in trustee organizations.

The problem is that all of those excellent efforts, while commendable, have not been able to move our access and privacy regime much beyond a nascent stage and closer to a level of maturity. An excellent example would be the discovery by my office in late 2009 that no more than two of our 12 RHAs were utilizing appropriate access forms for patients who wished access to their own personal health information. Access is one of the most basic and straightforward elements of any privacy regime and the fact that more than six and one-half years after HIPA came into force our RHAs are still struggling to get this straightened out is remarkable.

Another excellent example would be the fact that far too many public bodies do not recognize that the names, functions of public sector employees and the records they create in the course of their work are not personal information that can be withheld from access applicants.

Yet another example would be that we still find too many bodies that believe they can charge fees for 'thinking time' when they decide which exemptions should be applied and how to sever documents that will be released. I concluded more than four years ago that such thinking time is an integral part of any public body's operations and is not compensable on an access request. Finally and perhaps most significantly, too many FOIP or HIPA Coordinators are not in a sufficiently high level position to be able to influence policy development in their

Commissioner's Message

government institutions, local authorities or trustee organizations and are not supported as access and privacy professionals.

What is more troubling is the failure of the Saskatchewan Government to take even the first steps to formally and publicly review our eighteen year old legislation that is based on a thirty year old model. We are still driving an Edsel that doesn't meet our needs as a thriving, growing province that wishes to embrace the information age and to create information and technology based jobs. As a consequence of new amendments in the Yukon and new legislation in New Brunswick, Saskatchewan appears to be the only jurisdiction in Canada that still resists a comprehensive review of its dated legislation to ensure that it can do the job in the 21st century.

The failure to ensure that our legislation is up-to-date can handicap Saskatchewan in other ways. Now that Saskatchewan is taking steps to facilitate business with the two western provinces of British Columbia and Alberta, the fact that we have nothing equivalent to the *Personal Information Protection Act* (PIPA) in those provinces will likely prove to be a significant obstacle to those new west initiatives or at least an impediment to expansion of those initiatives.

Businesses in the two western provinces have become accustomed to meeting the requirements of PIPA that were specifically designed to address the needs and capacity of small and medium sized businesses in those two provinces. This includes a common approach to mergers and acquisitions, legacy information and the personal information of employees as well as customers.

On the other hand, businesses in Saskatchewan are still subject to the federal *Personal Information Protection and Electronic Documents Act* (PIPEDA) that does not have many of the features that small and medium sized businesses in British Columbia and Alberta have valued.

PIPEDA is overseen by the Privacy Commissioner of Canada who has no office west of Ontario. On the other hand, PIPA is overseen by the Information and Privacy Commissioners of British Columbia and Alberta and has, in Alberta's case, been carefully tailored to seamlessly complement the *Health Information Act*. In both provinces, PIPA is also tailored to seamlessly complement the *Freedom of Information and Protection of Privacy Act* in each province.

Finally, one additional benefit of enacting a PIPA type law in Saskatchewan to displace PIPEDA would be that a major gap in our privacy protection will be filled. PIPA could ensure that employees in the private sector would enjoy the same kinds of privacy protection that is available to all public sector workers in Saskatchewan. I have highlighted this gap in each of my Annual Reports since 2004.

Commissioner's Message

Conclusion

In our office's successive Business Plans I have described the mission of our office as:

> ***The people of Saskatchewan shall enjoy the full measure of the information rights (privacy and access) that have been affirmed by the Legislative Assembly of Saskatchewan.***

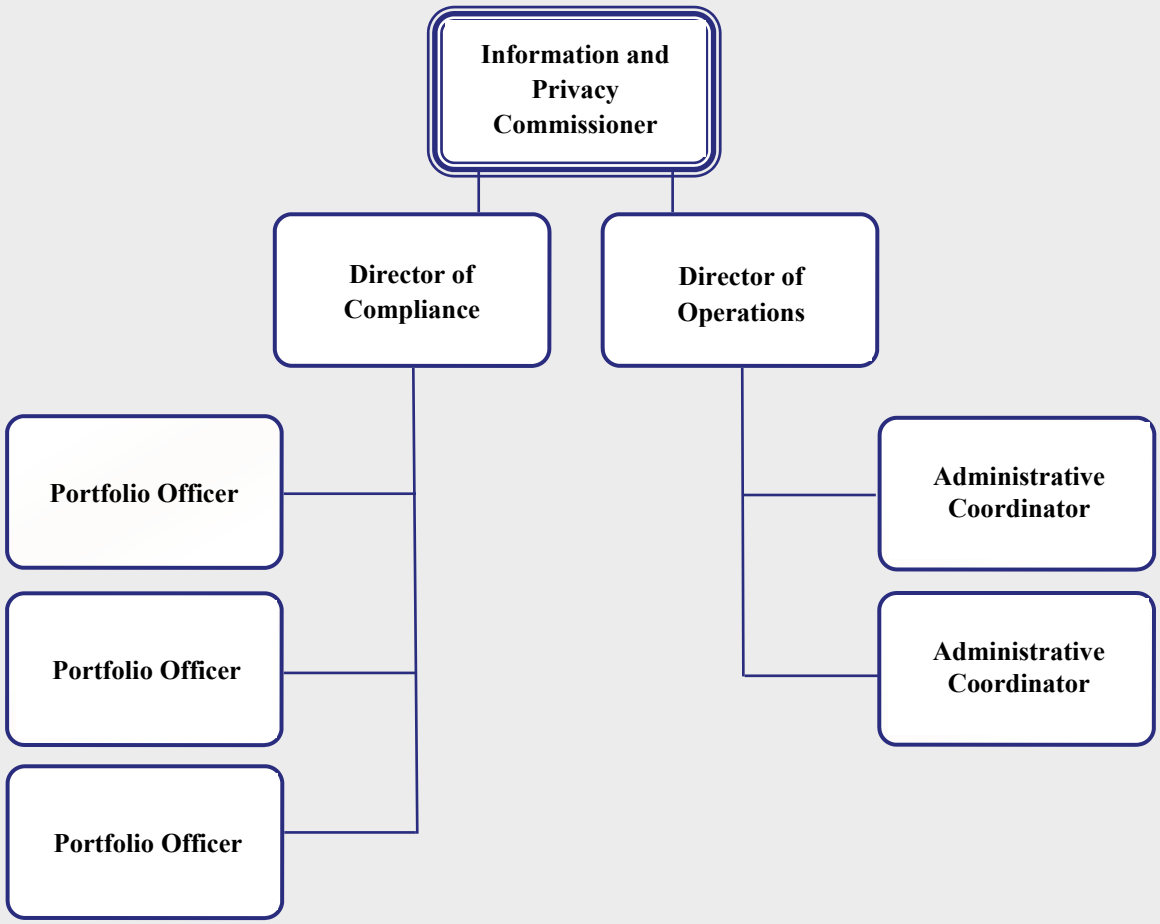
For the reasons described above, that mission has not been achieved and will not be achieved without legislative reform, focused leadership and adoption of a comprehensive reform package for our access and privacy regime.

I am grateful for the support I have received from and for the excellent work done by the dedicated staff in our office.

As in past years, I wish to acknowledge the assistance provided to me and to our office by the Legislative Assembly Service including its Human Resource and Payroll Services, Financial and Administrative Services and Communication and Technology Services branches.

R. Gary Dickson, Q.C.
Saskatchewan Information and Privacy Commissioner

Organization Chart



The Freedom of Information and Protection of Privacy Act (FOIP)

TOOLS AND RESOURCES

In 2009-2010 our office created a number of new tools for the public and for government institutions, local authorities and trustees. These included the following:

Best Practices - Mobile Security Devices

Given the ubiquitous nature of portable computer and computing devices and the frequency that they are involved in privacy breaches, we decided there would be value in gathering best practices information and consolidate this information in a single resource. This document addresses different kinds of safeguards:

- Data limitation
- Password protection
- Authentication
- Encryption
- Physical security
- System integrity
- Wireless security considerations
- Data wiping
- Mobile device loss

Privacy Considerations: Faxing Personal Information and Personal Health Information

One of the largest data breaches involving personal health information involved a clinic of medical specialists that was shut down. For several reasons, many physicians and medical clinics in all parts of the province continued to send personal health information on patients to the old fax number which had been reassigned to a non-health related business.

In the result, the personal health information of hundreds of patients was exposed to individuals who had no reason to know that information. That event caused our office to develop the *Privacy Considerations: Faxing Personal Information and Personal Health Information* to review best practices when trustees considered faxing personal health information to any third party. The investigation is ongoing.

The Freedom of Information and Protection of Privacy Act (FOIP)

ADVICE AND COMMENTARY

Our office continues to be widely consulted by government institutions and local authorities in connection with the planning of new legislative or program initiatives. These consultations have been a priority for this office. It means that the specialized resources in this office can be made available to many public bodies that do not currently have that kind of capacity. We had 69 detailed advice and commentary files in the 2008-2009 fiscal year. We had 82 detailed advice and commentary files in the 2009-2010 fiscal year. This is an increase of 19% as stated previously.

To ensure our independence, we may only offer general, non-binding advice with the caveat that at some point we may receive a request to review an access decision or a breach of privacy complaint. At that time, we must proceed to deal with that business solely on the basis of full submissions from both the public body or trustee and the individual guided only by the evidence and submissions and the applicable law.

Examples of other advice and commentary provided to Saskatchewan organizations include the following:

- Providing advice to regulatory bodies with respect to errant faxes containing the personal health information of a large number of Saskatchewan patients;
- Providing privacy specification material for the evaluation of vendors of electronic medical records;
- Providing input to the Patient First Review on access and privacy issues;
- Providing advice on policies and procedures for HIPA compliance to the Chiropractors' Association;
- Providing advice on collection of health services number for purposes of FINTRAC;
- Providing advice to Saskatchewan Gaming Authority on its privacy policy;
- Providing advice on Saskatchewan Workers' Compensation Board (WCB) & Canada Revenue Agency data sharing agreement; and
- Providing advice to the Canadian Medical Association (CMA) with respect to revision of the CMA *Principles for the Protection of Personal Health Information*.

The Freedom of Information and Protection of Privacy Act (FOIP)

ADMINISTRATIVE TRIBUNALS AND THE INTERNET

Further to the discussion of administrative tribunals and the Internet in my 2008-2009 Annual Report, I am pleased to report that Canada's privacy commissioners have approved a new instrument to assist administrative tribunals in our respective jurisdictions to comply with their FOIP obligations when they consider Internet publication of their decisions. The tool is a set of Frequently Asked Questions (FAQs) entitled *Electronic Disclosure of Personal Information in the Decisions of Administrative Tribunals – What should administrative tribunals consider when contemplating Internet publication of their decisions?* Our office chaired an ad-hoc committee that developed the FAQs and then refined the instrument to reflect feedback from other oversight offices across Canada. Our office also authored the paper: *Administrative Tribunals, Privacy and the Net* in the Canadian Privacy Law Review, Vol 6, No. 8, 65.

Of note is that the former Information and Privacy Commissioner of British Columbia collaborated with the Attorney General's Administrative Justice Office to produce tribunal guidelines on access and privacy issues that addressed the issue of posting decisions containing personal information on agency websites. I am advised that the Ministry of Justice and Attorney General (Justice) is considering a similar tool for administrative tribunals in this jurisdiction.

RIGHT TO KNOW (RTK)

Our office has been a proud partner with a number of other Saskatchewan organizations in planning activities during the last week of September to commemorate Right to Know Week for four consecutive years. This is tied to September 28, the Right to Know Day recognized in many of the 60 nations around the world that have an access to information law. The designation of RTK emphasizes the value of the right of individual access to information held by public bodies and marks the benefits of transparent, accountable government. Each year, RTK has been recognized by a number of events held in Saskatoon and Regina.

The Freedom of Information and Protection of Privacy Act (FOIP)

The benefits of access to information highlighted during this week include:

- providing individuals with knowledge to address public issues, scrutinizing government and become active participants in the democratic process.
- revealing and clarifying the basis for government decisions, disclosing environmental and health dangers and shedding light on error, mismanagement and illegal activities.
- requiring improved records management, prompted routine disclosure of information, promoted the duty to assist the public and resulted in better government service and efficiencies.

Formal proclamations were issued by the cities of Regina and Saskatoon as well as the Saskatchewan Government.

On Monday September 28th RTK was officially launched at the Riddell Centre at the University of Regina. Approximately 130 individuals attended and participated in the launch program.

At the major event on Wednesday, September 30, 2009, Janet Keeping delivered the keynote address, '*The Struggle Against Corruption: The Right to Know and The Rule of Law – an International Perspective*'.

Ms Keeping is the President of the Sheldon Chumir Foundation for Ethics in Leadership. A reception followed. Janet Keeping spoke again at the College of Law at the University of Saskatchewan on Thursday, October 1, 2009.

The RTK Committee announced on September 29 that the Saskatchewan Institute of Applied Science and Technology (SIAST) would receive the 2009 *Chief Justice E.M. Culliton Right to Know* award.

SIAST consolidated management of the 'access and privacy file' in a single office in 2006. That consolidation has led SIAST in substantially improving the institution's compliance with LA FOIP. This has included an impressive number of internal processes and training initiatives to assist its 2,360 employees in understanding and complying with its access and privacy responsibilities.

SIAST developed practical and accessible FAQs and a dedicated Access and Privacy page on their website. SIAST has redesigned admission forms and created new instructor orientation material for its

The Freedom of Information and Protection of Privacy Act (FOIP)

1,455 faculty members. In addition, SIAST created and widely distributed two communiqués throughout the SIAST community that emphasize the importance of employee compliance with LA FOIP.

Overall, SIAST has demonstrated strong leadership in promoting the public's right to access government records.

Also included with the RTK events for the week was the Regina Public Library's (RPL) Annual RTK Film Festival. From September 30 to October 4, the RPL Film Theatre showed the following films: *War Made Easy, Food, Inc., The Cove.* These movies related to the theme of accountability through greater transparency.

We gratefully acknowledge the hard working members of the Saskatchewan RTK Committee and the RTK funders and partners namely; Law Foundation of Saskatchewan, Canadian Bar Association (Saskatchewan Branch), Sheldon Chumir Foundation for Ethics in Leadership, Johnson-Shoyama Graduate School of Public Policy, Regina Public Library, College of Law at the University of Saskatchewan, McKercher LLP Barristers & Solicitors, Regina Leader-Post, Saskatoon StarPhoenix and Big Dog 92.7.

The Local Authority Freedom of Information and Protection of Privacy Act (LA FOIP)

My previous comments, with respect to government institutions, would apply to local authorities as well. This is an area where there is a great need for resources and assistance to achieve LA FOIP compliance.

Recent efforts by the Branch to offer workshops, and to modify its online learning program for local authorities have been encouraging. What is missing is a statutory requirement equivalent to section 63 of FOIP:

> *63(1) The minister shall prepare and submit an annual report to the Speaker of the Assembly on the administration of this Act and the regulations within each government institution during the year, and the Speaker shall cause the report to be laid before the Assembly in accordance with The Tabling of Documents Act.*
>
> *(2)The annual report of the minister is to provide details of:*
>
> *(a) the number of applications received by each government institution during the year;*
>
> *(b) the number of times during the year that the head of each government institution refused an application for access to a record, and the specific provisions of this Act or the regulations on which the refusals were based; and*
>
> *(c) the fees charged and collected by each government institution for access to records during the year.*
>
> *(3) The minister may require government institutions to produce the information or records that, in the opinion of the minister, are necessary to enable the minister to fulfil the requirements of this section.* [emphasis added]

As a result, there is no requirement for any kind of annual report that conveys useful information on the activities and practices of local authorities that would be equivalent to the annual report required from Justice in respect of government institutions.

Also, there is no rational need in 2010 for a separate statute for local authorities and I renew my earlier recommendation that it be fully integrated into a single FOIP Act as is the case in all jurisdictions other than Ontario.

The Health Information Protection Act (HIPA)

TOOLS AND RESOURCES

A number of the tools our office has created are applicable to government institutions and local authorities as well as trustees. This includes the *Privacy Considerations – Faxing Personal Information and Personal Health Information*, and *Best Practices – Mobile Device Security*. We have referenced those common tools in the FOIP section of this Annual Report. In 2009-2010 our office also created some tools specifically to assist trustees.

Glossary of Common Terms for HIPA

To assist trustees with interpreting and applying HIPA, our office has developed a *Glossary of Common Terms for HIPA*. The purpose is to help trustees avoid confusion over the terms fundamental to HIPA compliance and to promote consistency of language. We have found that confusion over key terms such as 'access', 'disclosure' and 'circle of care' has led or contributed to non-compliance with HIPA. Access is sometimes mistakenly conflated with disclosure. In a privacy context, access refers to the patient or their personal representative obtaining a copy of or viewing their own personal health information. This is a fundamental right in any privacy law and for this purpose, is usually unconditional and is not subject to the limiting rule of 'least amount of information necessary for the purpose' or the 'need to know' limitation. We saw evidence of confusion over terminology in the matters documented in our *Report on the Management of Access Requests from Patients to Regional Health Authorities* (Report).

Report on Management of Access Requests from Patients to Saskatchewan Regional Health Authorities

In late October 2009, I learned that one of the 12 RHAs was using an access request form that was clearly non-compliant with HIPA. This was a surprise since our office as early as 2004 had identified access by patients to their own personal health information as a priority area that warranted special attention by those authorities. In addition, we had provided a good deal of information to the regions on how to best manage access responsibilities.

Following this discovery, we undertook a survey of all RHAs, their access forms and their literature for patients that describe the access process. This resulted in our December 14, 2009 Report.

The Health Information Protection Act (HIPA)

In that Report, I noted that in terms of the need for an appropriate, clear and simple access form, only two regions could be said to have met the requirements: Sun Country Health Region and Saskatoon Health Region (for City Hospital only).

In other regions, there were forms that required the applicant to provide a reason for their request, required a form of waiver of liability by the applicant, and others required that the applicant identify where their records would be located.

In my Report, I detailed the problems with each of these features and other shortcomings in the access forms and brochures then utilized by our health regions.

My Report included eleven specific recommendations for improvement. It also details a number of tools and resources we encourage all RHAs to become familiar with to ensure they are HIPA compliant in this important respect.

ABANDONED PATIENT FILES

The experience of this office is that many Saskatchewan trustees are not familiar with the requirements of section 22 of HIPA. That provision makes trustees responsible for the personal health information in their custody or control, regardless of whether they retire or move from Saskatchewan, until such time as they transfer that personal health information to another trustee or to an approved archive.

In the December 2006 issue of the FOIP FOLIO we referred readers to Ontario Information and Privacy Commissioner Order HO-003 that dealt with abandoned patient files when a physician retires. In the March 2008 and April 2008 issues of the FOIP FOLIO, we reported on abandoned patient files in Saskatchewan and the responsibility of physicians who abandon their records when they retire or leave the province.

I continue to urge Health, the Saskatchewan Medical Association and the Saskatchewan College of Physicians and Surgeons to create a satisfactory long-term solution to this problem. I suggested this might include a facility suitably equipped to protect archived patient files from any Saskatchewan trustees, or estates of trustees that have not otherwise made appropriate arrangements for the storage of these records. As of the date of this Annual Report, such a long-term solution has not been implemented.

The Health Information Protection Act (HIPA)

In the meantime, my office was alerted to an Ontario based company, DOCUdavit Solutions Inc. (DSI) that was soliciting business from Saskatchewan physicians who wished to archive their patient files. After investigating the forms and practices of DSI, I produced the *Advisory for Saskatchewan Physicians and Patients Regarding Out-Sourcing Storage of Patient Records* (Advisory). In this Advisory, I identified a number of problems with the contract being utilized by DSI and the promotional literature they were distributing in this province. I detailed the ways in which those documents were inconsistent with HIPA and the risks that any Saskatchewan trustee entering into an arrangement with DSI based on those problematic documents would likely be in breach of section 18 of HIPA that provide for information management services and information management service providers.

Since we published our Advisory on March 10, 2010, DSI has substantially revised its contract and privacy policy. We have provided advice and feedback on the amended documents directly to DSI. We are awaiting word from DSI as to whether it will make the further changes recommended. In the meantime, we would caution Saskatchewan physicians and the executors of the estates of deceased physicians to consider our Advisory as still in effect.

THE ELECTRONIC HEALTH RECORD

In past Annual Reports I have commented on a number of privacy and access issues related to the electronic health record (EHR) under development in Saskatchewan. We now have three of the fundamental building blocks for the EHR already in place. I am referring to the domain repositories for pharmaceutical information, laboratory results and diagnostic imaging and radiology reports. Work is also underway on the public health and the person or client identification repositories. Although Saskatchewan may not yet have a comprehensive electronic health record, in this Report I am referring to the three domain repositories listed above collectively as “the electronic health record”.

Our office continues to be represented at meetings of the Canada Health Infoway Privacy Forum discussed in past Annual Reports.

This is a group comprised of a representative from each provincial/territorial health ministry and a representative from the privacy oversight office in each of those jurisdictions.

The Health Information Protection Act (HIPA)

In the *Case Summaries* portion of this Report I have detailed our Investigation Report H-2010-001 (L & M Pharmacy Inc., Sunrise Regional Health Authority & Ministry of Health) issued in March 2010. To the case report I appended a Postscript. That Postscript is reproduced below:

POSTSCRIPT

Since this is the first Report issued by my office dealing with a component of the developing electronic health record (EHR), I wanted to offer some general observations about this experience. This investigation highlights a significant weakness with the EHR that is being constructed in this province. While there has been a lot of attention to the risk that some outsider may attempt to compromise the relatively elaborate technical safeguards and security features attached to the EHR domain repositories, there has been much less attention paid to the more likely risks illuminated in this investigation – the risks posed by the carelessness of trustee organizations and the curiosity of their employees and contractors.

There is evidence that reinforces the proposition that the biggest threat to data security is likely to be the employees of a trustee. This investigation demonstrates how relatively easy it can be for a health professional to slip past or ignore the 'safeguards' currently in place. How do we protect against a health professional that ignores the general duties and the transaction-specific duties in The Health Information Protection Act (HIPA) and also ignores the warnings that appear on his computer screen when he enters PIP? In this case, neither the offence provision and severe penalties in HIPA nor the College of Pharmacists' disciplinary power proved to be a meaningful deterrent. It is clear to me that a good deal more attention needs to be paid to the carelessness of trustee organizations and the curiosity of health workers who know how to obtain the personal health information of patients without the patients' consent.

I'd suggest that this means a review of how Saskatchewan trains, approves and monitors health care workers and their use of the personal health information. This will be an ongoing challenge for not only Saskatchewan Health, regional health authorities and the regulatory colleges but also for each separate trustee organization. There is also a compelling need for not just audit capability but for a rigorous, ongoing audit program by the Health Information Solutions Centre (HISC). This must include the need to suspend and, when warranted, to terminate the viewing privileges of a User who abuses their accreditation. How can we expect HIPA rules to be consistently followed if there are no significant consequences to the curious health care worker for a breach?

This investigation also underscores the dangerous misconception that a breach of someone's privacy is somehow less serious if the wrongdoer is not motivated

The Health Information Protection Act (HIPA)

by malice or financial gain. In my experience, it is cold and empty comfort to the violated patient whose information has been collected, used or disclosed unlawfully to be advised that the perpetrator was not an identity thief. It is critically important that all persons involved in our health care system recognize that motive is largely irrelevant when some patient's privacy is violated. This attitudinal change requires a clear understanding that privacy is about each of us having a significant measure of control about the information that relates to us. Given the prejudicial nature of personal health information, there may be no arena where privacy is more important than that involving diagnosis, treatment and care of patients. There are already a percentage of patients who refuse to disclose certain health history to their primary care providers. As Saskatchewan constructs an ambitious and expensive EHR system, it will be important for trustees to demonstrate that patients can be confident that their privacy will not be at risk with the move to electronic records which may be accessible by many more individuals than was ever the case with paper records.

The development of an EHR requires a complex balancing of a number of competing goals or values. Obviously the success of any iEHR initiative will require the cooperation and full participation by Saskatchewan health care professionals. There are many examples of features of the iEHR plan in Saskatchewan designed to address the convenience of those professionals. It is also true that while privacy of Saskatchewan residents is important it is not an absolute right and from time to time may be limited to accommodate certain legal requirements, safety requirements and public policy imperatives. The challenge is to find a way of balancing those values which may from time to time be in conflict. In my view, the evident preoccupation with making the iEHR simpler for health care professionals – the providers - has to a large degree eclipsed the need to make our iEHR sufficiently respectful of the expectations and rights of the patient. This preoccupation with accommodating the preferences as well as the needs of providers perhaps accounts for some of the vulnerabilities exposed in this investigation. Fortunately, our iEHR is still a work in progress. There is still the opportunity to recalibrate – to implement stronger controls and safeguards to better protect the interests of the patient. I think such action is consistent with the thrust and recommendations of Commissioner Dagnone in his Patient First Review Report and specifically the following observation:

> *Fundamental to achieving patient- and family-centred care is patient-centred governance and policy-setting, beginning with the Ministry of Health and supported by unified, prudently managed, high-performing health care administration that enables, empowers and expects everyone to put the patient*

The Health Information Protection Act (HIPA)

Finally, this investigation highlights the practical challenges in dealing with HIPA breaches that involve EHRs. In this case, there was some form of investigation undertaken by not just our office but also by Saskatchewan Health's HISC office, the College of Pharmacists and the regional health authority. Each of these investigations proceeded under different statutory authority and took different approaches. Even with excellent cooperation from all parties, our investigation becomes more complicated and longer. It will be essential for protocols to be developed jointly with all of these organizations to streamline the response to any future alleged EHR breach.

OUR HEALTH REGIONS MAY BE HANDICAPPED BY ARBITRATION DECISIONS

A particular concern is the failure of arbitration panels in Saskatchewan to recognize the importance of privacy in the context of the EHR. Certain arbitration proceedings and awards under *The Trade Union Act* have been brought to our attention in which employees of RHAs have successfully grieved their dismissal notice.

One notable decision involved health records personnel in one region who viewed the electronic health record of a co-worker who was receiving treatment in their region. These individuals did not have the permission of the ill co-worker, had no legitimate reason to view this personal health information and yet had received training with respect to their obligations under HIPA. In fact, these individuals were expected to be leaders in health information and to be a resource to other health care workers in terms of HIPA compliance.

The individual who had utilized her computer to view this personal health information was terminated. She grieved the termination. A three person arbitration

The Health Information Protection Act (HIPA)

panel found this penalty too severe since the viewing was not for monetary gain or for a criminal purpose.

The panel apparently was unaware that neither of these circumstances is a necessary element of a breach of privacy under HIPA. The reasoning might have been expected a couple of decades ago when personal health information was usually maintained in hard copy form in a file in a records area and was at risk by viewing by only a small number of persons who might have physical access to that records area. That naïve characterization of the risk is quaint but largely irrelevant in assessing HIPA breaches in 2010.

Another case involved a different RHA employee who had entered a computer system to view the personal health information of a third party. The employee worked in the Health Information Services department, had received training with respect to HIPA and was herself responsible for training other staff in use of patient information computer systems. This person had signed the Statement of Understanding on Confidentiality which confirmed that she understood that all health information to which she may have access is confidential and is not to be communicated to anyone in any manner, except as outlined by the region's policy and HIPA.

This employee went to a computer with access to the Pharmaceutical Information Program (PIP) when the regular operator had left her computer briefly and then printed out a list of all medications that had been prescribed to a third party. The employee also shared the prescription information with another region employee who had no need-to-know the personal health information in question.

The employee was dismissed and grieved her dismissal. The arbitration decision was issued on May 27, 2010 although the actual hearing occurred earlier. Although that decision is outside of the 2009-2010 reporting period for this Annual Report, it is the conclusion of a process that has been ongoing throughout the 2009-2010 fiscal year. Furthermore, I find there is urgency in dealing with this issue and in my view there would be serious prejudice in deferring discussion of the arbitration decision until my Annual Report for 2010-2011.

The arbitrator relied on previous arbitration decisions that antedated HIPA and the electronic health record. It also appears that the arbitrator considered it important that the employee had no intent to use the personal health information of the third party maliciously. As well the arbitrator found it relevant to note that there was no harm to the third party as a result of the clear misconduct and that the third party had not complained about the improper viewing of his personal health information.

This trend appears to reflect a remarkable lack of awareness of the primacy of

The Health Information Protection Act (HIPA)

legislative requirements that govern the collection, use and disclosure of patients' personal health information. This trend also undermines in a significant way the substantial efforts of Health, the Colleges and other health profession regulatory bodies and RHAs to bolster patient confidence as Saskatchewan moves to a system of EHRs for every individual in this province.

The arbitration decisions in question have made no reference to the EHR or the impact that HIPA breaches may have on patient confidence in the EHR. HIPA cannot be considered independently of the EHR. In fact, the reference to HIPA in the1998 Throne Speech appeared in the same paragraph as the announcement of the creation of the Saskatchewan Health Information Network (SHIN).

SHIN would be the vehicle to build and operate the EHR in our province. This paralleled developments of stand-alone health information laws at about the same time in Manitoba and Alberta. The purpose of HIPA was to create the rules for the collection, use and disclosure, access to and correction of the personal health information of patients in our province.

These rules were designed to enable and facilitate the creation of an EHR.

This trend signals only the most casual consideration of the prejudice that flows from breaches of patients' privacy that may leave patients feeling vulnerable. This trend provides those patients with justification to distrust the developing HER and to refuse to be enrolled in that system

I have observed that some Saskatchewan RHAs have made genuine attempts to treat egregious breaches of patients' privacy as cause for termination. This aligns with the importance assigned to privacy by our Legislative Assembly, by Canada Health Infoway and by privacy oversight offices throughout Canada.

Arbitration panels appear, however, to have missed the connection between HIPA and the EHR and appear to have not addressed the new risks that attach to thousands of health care workers acquiring the ability to view the personal health information of all Saskatchewan residents by means of a computer. These panels appear to have considered the risks only in terms of closely held paper records with no acknowledgement of the brave new world health trustees are about to enter.

The Health Information Protection Act (HIPA)

Arbitrators appear to have concluded that the employee who breaches the privacy of a patient is somehow less culpable if they were not motivated to do so by criminal purposes or malice or by an effort to benefit financially by their action. I addressed this troubling attitude in the Postscript to my Investigation Report H-2010-001 quoted earlier in this portion of the Annual Report.

I also refer to and incorporate by reference the *Privacy Breach Guidelines* available on our office's website which describes the possible harm to patients from privacy breaches. A key message in that instrument is that a privacy breach occurs whenever a trustee fails to take reasonable measures to safeguard the personal health information in their custody or control. A privacy breach does not require that there be evidence that a third party has collected or used the personal health information in issue.

It appears that in some cases, the arbitration panels have relied on old decisions that did not involve HIPA and which would have had no reason to contemplate the privacy risks endemic to EHR

I urge the Government of Saskatchewan to consider the following remedial action on an expedited basis:

- Provide intensive training for all persons, eligible to sit on arbitration panels in Saskatchewan, on the electronic health record featuring privacy considerations, risks and challenges and the nexus between this EHR and HIPA.

- Consider legislative amendment of *The Trade Union Act* or some suitable alternative legislation to require arbitration panels to assess the impact that the breach of privacy committed by any unionized health care worker may have on public confidence in the electronic health record.

- Ensure that the principle of graduated or progressive discipline is displaced in arbitration cases where there has been an egregious breach of HIPA by workers who have had HIPA training and taken an explicit privacy pledge or undertaking.

Growing Public Awareness

This continues to be an area of surging demand from the public as well as public bodies and trustees. We received approximately 3,600 telephone calls, letters or email inquiries about access and privacy laws in Saskatchewan and for assistance in dealing with them. This represents an increase of 17% over the previous year.

Our E-newsletter, the Saskatchewan FOIP FOLIO, continues to be a popular communication piece for the expanding access and privacy community in our province. There are now 66 past issues archived on our website. This has been effective in alerting readers to new privacy and access developments in our province as well as in other jurisdictions.

We have delivered a number of educational presentations in a number of Saskatchewan communities to diverse audiences. For a sampling see Appendix II.

Hits at our website, www.oipc.sk.ca continue to surge. During the 2009-2010 fiscal year we attracted more than 550,000 hits. This represents an increase of 71% over 2008-2009. We think this is evidence that the tools, reports and resources posted the website have been of interest and useful to many.

Proactive Disclosure

Our office is not a "government institution" within the meaning of FOIP along with other independent officers of the Legislative Assembly. Nonetheless, I recognize that given our 'transparency enforcement' mandate, it is important that our office model best practices in terms of proactive disclosure. To that end, commencing last year our office created a new section for our website entitled: *Proactive Disclosure*. This provides detail about the travel and accommodation costs paid from our taxpayer funded budget. Given our limited resources we will update this section on an annual basis but could consider doing this more frequently if we had sufficient resources to do so.

Capacity in the OIPC

The Office of the Information and Privacy Commissioner is in crisis. In 2009-2010, we opened 62% more files than the 2008-2009 fiscal year. That is an increase from 145 files one year ago to 235 this year.

Our active case load has increased by 44%. This is 375 privacy investigations and access reviews. That is an increase from 261 active files one year ago.

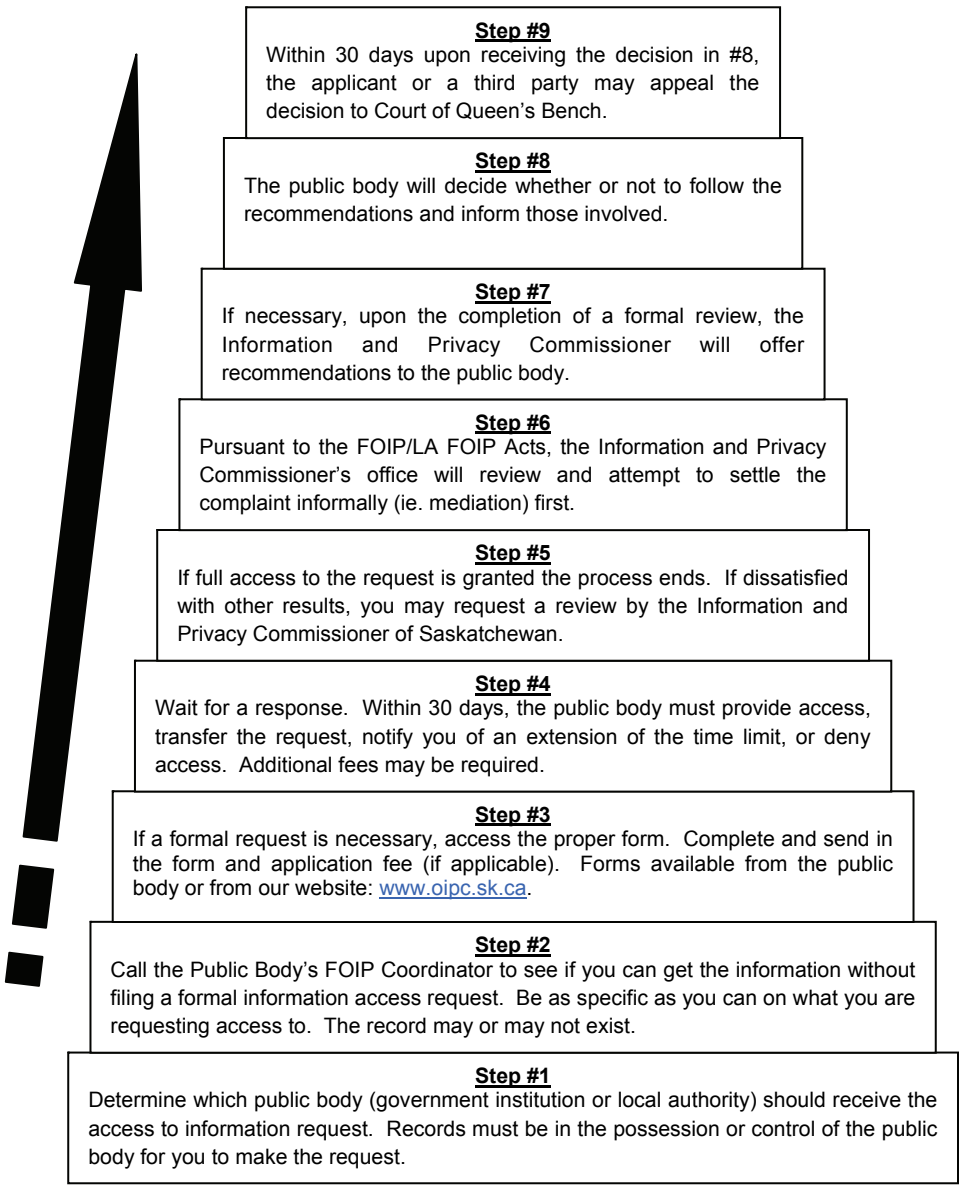
This translates into a caseload for our Portfolio Officers that is approximately three times larger than the caseload for their counterparts in other Canadian jurisdictions.

Other areas of work also show significant increases over last year. An increase of 19% for detailed advice and commentary to public bodies and health trustees. An increase of 17% for summary advice (3,655 phone calls, letters and emails from individuals, trustees and public bodies).

The laws we oversee guarantee Saskatchewan residents the right to seek redress through our office. That guarantee is largely an empty promise if citizens have to wait four or five years to have their file concluded.

Our experience shows that delays in our office are adversely affecting not only individual residents but also medical clinics, RHAs and a number of public bodies which require timely decisions and advice from our office concerning the collection, use and disclosure of personal health information.

How to Make an Access Request



How to Make a Privacy Complaint

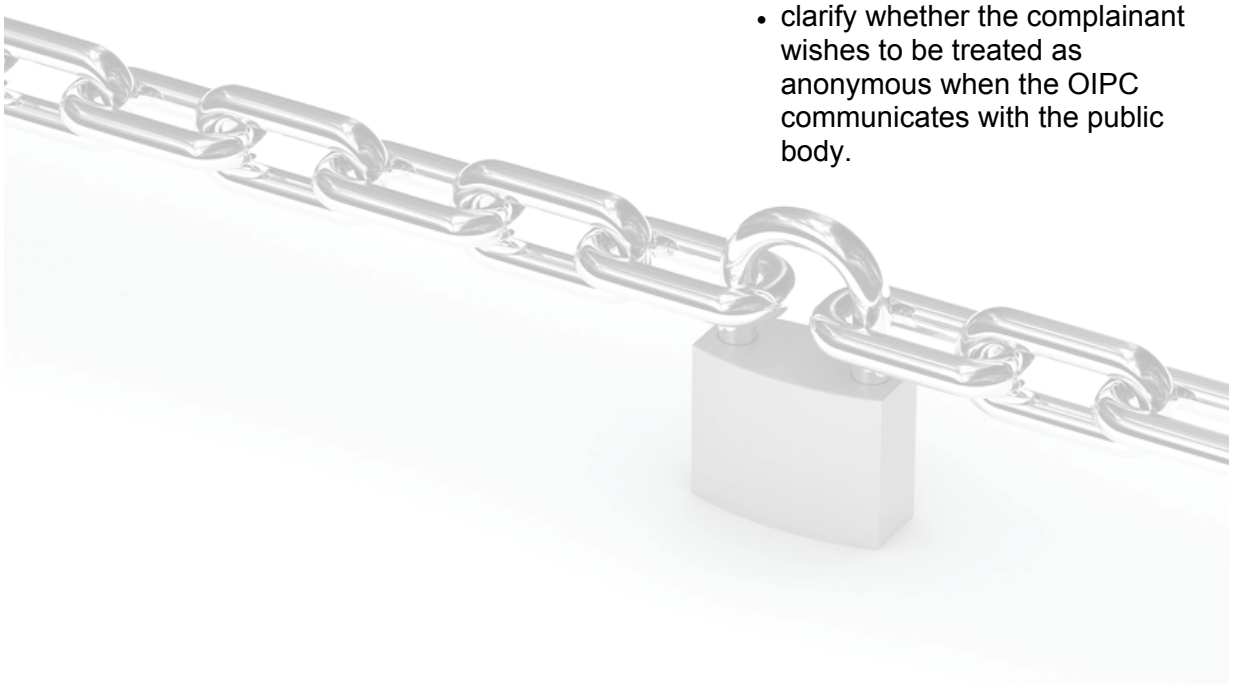
1 The complainant should first contact the Privacy Officer or FOIP Coordinator for the government institution, local authority or trustee to attempt to resolve the complaint.

If no satisfactory resolution of the concern is reached by dealing directly with the public body, the complainant may choose to file a written complaint with the Information and Privacy Commissioner.

Generally, the OIPC will not deal with a complaint that is two years old or older.

2 The complaint should be in writing and should provide the following:

- complainant's name, address and phone number;
- date;
- specific government institution, local authority or trustee against whom the complaint is made;
- copies of any correspondence with the public body relevant to the complaint;
- description of the events giving rise to the complaint; and
- clarify whether the complainant wishes to be treated as anonymous when the OIPC communicates with the public body.



How to Make a Privacy Complaint

3

Once we review the complaint the following will occur:

- Once it is determined that the OIPC has jurisdiction to investigate, a Portfolio Officer will be assigned to the file.
- The Portfolio Officer will advise the public body of the complaint and that the OIPC will be investigating under the authority of FOIP, LA FOIP or HIPA. At the same time, we will advise the complainant that an investigation is underway.
- The Portfolio Officer will gather information from the public body to determine the relevant facts.
- The Portfolio Officer will define the issues for purposes of the investigation and invite submissions from the public body and the complainant.
- The Portfolio Officer will attempt to mediate, or otherwise informally resolve the complaint, with complainant and public body.
- If no mediated settlement is possible, the Commissioner will proceed to issue a formal Investigation Report. The identity of the complainant will not be disclosed.
- There may be a limited right of appeal to the Court of Queen's Bench by an aggrieved complainant if the complaint was handled under HIPA pursuant to section 46. No right of appeal from a report dealing with a breach of privacy under FOIP or LA FOIP.

Case Summaries

In 2009-2010, 92% of the review and complaint files we closed resulted from an informal resolution of the access request or privacy complaint and did not therefore result in the issuance of a formal report. This represented 121 files closed in 2009-2010.

Below are those files that were closed through issuance of a formal report.

INVESTIGATION REPORT H-2010-001 (L & M Pharmacy Inc., Sunrise Regional Health Authority & Ministry of Health)

In 2009, my office was alerted to an apparent privacy breach by a pharmacist in the Sunrise Health Region (Region). This involved the unauthorized viewing of personal health information of three individuals by a pharmacist employed by L & M Pharmacy Inc. (L & M). This viewing involved nine different viewing transactions at a time when none of the individuals were patients of that pharmacy. All of the viewing by the pharmacist was done by means of his accredited role as a User of the Pharmaceutical Information Program (PIP) and as an employee of L & M. The pharmacist was accredited as a User for purposes of the pharmacy in which he worked and also as User at the hospital within the Region for which he was a contractor.

My office undertook a breach of privacy investigation under the authority of HIPA. I found that L & M was responsible for the actions of its employee. I also found that L & M breached HIPA in a number of respects, chiefly by failing to adopt policies and procedures to protect the personal health information in its custody or control as required by section 16 of HIPA. The viewing of the drug profiles was a "collection" of personal health information under HIPA that was improper.

I recommended that the User privileges of the pharmacist be suspended until L & M implement appropriate policy and procedures. That pharmacist's use of PIP, once his User status is restored, should be the subject of regular monthly audits by the Health Information Solutions Centre (HISC) for a one year period to ensure HIPA compliance. I also recommended changes to the PIP accreditation process and to log-on procedures by any pharmacist who seeks to view the PIP database.

In addition, I recommended that Health develop a policy to revoke or suspend User access temporarily or permanently for a registered User that views personal health information contrary to HIPA. Finally, I also recommended improvements to HIPA training for pharmacists that focuses on the twin problems of carelessness and curiosity.

Once in receipt of my Report, L & M advised us that it would comply with all the recommendations made pertaining to it. This included agreeing to prepare and provide within 60 days a comprehensive set of written policies and procedures to ensure HIPA compliance and suspend the pharmacist in questions use of the PIP program until implementation of said policies and procedures.

Case Summaries

By way of letter dated April 29, 2010, the Region advised us that it "has reviewed, and will implement all recommendations as suggested by the OIPC." Among other things, the Region advised us that it is currently reviewing all contracts to determine if amendments are required and effective April 9th, 2010, requiring all new PIP Users to sign a written privacy pledge and attend HIPA training prior to having their PIP account activated. The Region also explained that it will provide patients with information on how to request a PIP Audit Log and how to requesting Masking of their PIP profiles if the patient so desires.

As of May 12, 2010, Health had not yet indicated if it would comply with the recommendations that apply to it in the Report.

INVESTIGATION REPORT F-2009-001
(Saskatchewan Workers' Compensation Board)

Investigation Report F-2009-001 issued on October 28, 2009, involves a an injured worker (the Complainant) who sought compensation from the WCB under *The Workers' Compensation Act, 1979.* The Complainant identified four concerns with actions of WCB in regard to his personal information and the way it was collected, used and disclosed. Under the authority of FOIP, I found that one of the complaints dealing with the disclosure of personal information of the Complainant to a third party without the Complainant's consent and without legal authority to do so was well-founded. I offered a number of recommendations to WCB in respect to that complaint. The other three complaints were not well-founded. I expanded the investigation however to address whether WCB had met its duty under FOIP to ensure the personal information it collected was accurate and complete. I found that WCB had not met this duty. I offered a number of recommendations in respect of this failure to discharge its obligations related to accuracy of the personal information it collected about the Complainant and whether that personal information was complete.

In WCB's letter of response date of November 3, 2009, WCB advised our office that it does not agree that it breached the Complainant's privacy and does not accept the recommendations made by the Commissioner save for the one: "[t]hat WCB bolster training for its employees on what would be adequate documentation of its dealing with injured workers, particularly when a risk assessment is undertaken under its safety and security policy." In this regard, WCB informed us that it had previously pointed out improvements made to its policies, procedures, and practices regarding both privacy and security over the course of the last three years since the incident in question. WCB informed us that it will not screen information received from external sources and would not publish its Safety and Security Policy on its website even though I recommended it do so.

Case Summaries

REPORT F-2010-001
(Ministry of Health)

Report F-2010-001 dated March 9, 2010 involves three different matters involving one applicant. The Applicant made two access to information requests to the former Department of Health, now the Ministry of Health (Health). With respect to the first application, after negotiating with Health to reduce a substantial fee estimate, the Applicant split his request into two. Health provided two revised fee estimates, one to find and reproduce paper records and the other for electronic records on the same topic. The Applicant disagreed with both estimates but paid the fees for paper records sought so Health would complete processing. The Applicant did not pay the deposit for the electronic records. With the second application, the Applicant disagreed with Health's decision to extend the response deadline and to withhold records or portions thereof from him. In that regard, Health relied on sections 13(2), 17(1)(a), 19 (1)(b), 20(a), 22, 24(1) and 29 of FOIP. Our office undertook reviews of each of the issues raised by the Applicant. In his review of the fee estimates, I found both to be excessive and recommended that Health reimburse fees paid by the Applicant for the first request and, to recalculate the second fee estimate. In terms of the second application, I found the time extension was not warranted and that the exemptions cited for the most part did not apply to the withheld material. I did uphold Health's application of: (a) section 22 of FOIP to the records identified in the Index of Records and (b) section 29(1) of FOIP to the personal information of private citizens (contact information only) who shared his/ her personal views with Health as part of a consultation process. I recommended release of all other withheld information.

Section 56 of FOIP requires that within 30 days after receiving a Report of the Commissioner pursuant to section 55(1), a head shall given written notice of its decision with respect to the recommendations made in that Report by the Commissioner. Though the Report in this case is dated March 9, 2010, I note that Health did not provide its formal response until on or about May 6, 2010 thereby not complying with section 56. I have included some of its comments with respect to my recommendations as follows.

In terms of my recommendations regarding fees estimated to search and prepare paper and electronic records separately, Health indicated that it will not lower its fees and would not reimburse the Applicant fees already paid.

Health indicated that it would not release the PIA to the Applicant.

Health respectfully noted and accepted my finding that section 22 of FOIP applies to the records to which Health applied the exemption.

Case Summaries

Health agreed with my findings relating to the application of section 29(1) of FOIP; specifically, that it applies to contact information of private citizens but not to the business card contact information of public servants. Health indicated that it will release the paperwork with the names and business card information for all government and business employees should the Applicant still be interested in that data.

Though not explicitly stated, it appears that Health does not intend to release any other records or portions thereof to the Applicant to which it relied on other exemptions [i.e. 13(2), 17(1)(a), 19(1)(b)].

REPORT LA-2009-001
(Saskatchewan Health Research Foundation)

I released Report LA-2009-001 on December 8, 2009 dealing with an applicant that made four different applications to the Saskatchewan Health Research Foundation (SHRF) for grant applications made by researchers. SHRF denied access relying on sections 18(1)(b), 18(1)(c) and 28(1) of LA FOIP. I found that SHRF had authority to withhold the material pursuant to these sections, but recommended release of information withheld that was otherwise publicly available pursuant to sections 3 and 4 of LA FOIP. Though raised by the parties to the review, I did not find that sections 17 or 13(2) of LA FOIP had any application in the circumstances.

The SHRF advised our office that it would comply in full with my recommendations by continuing to deny the Applicant previously withheld portions of the responsive record and by sending the publicly available information to the Applicant.

Case Summaries

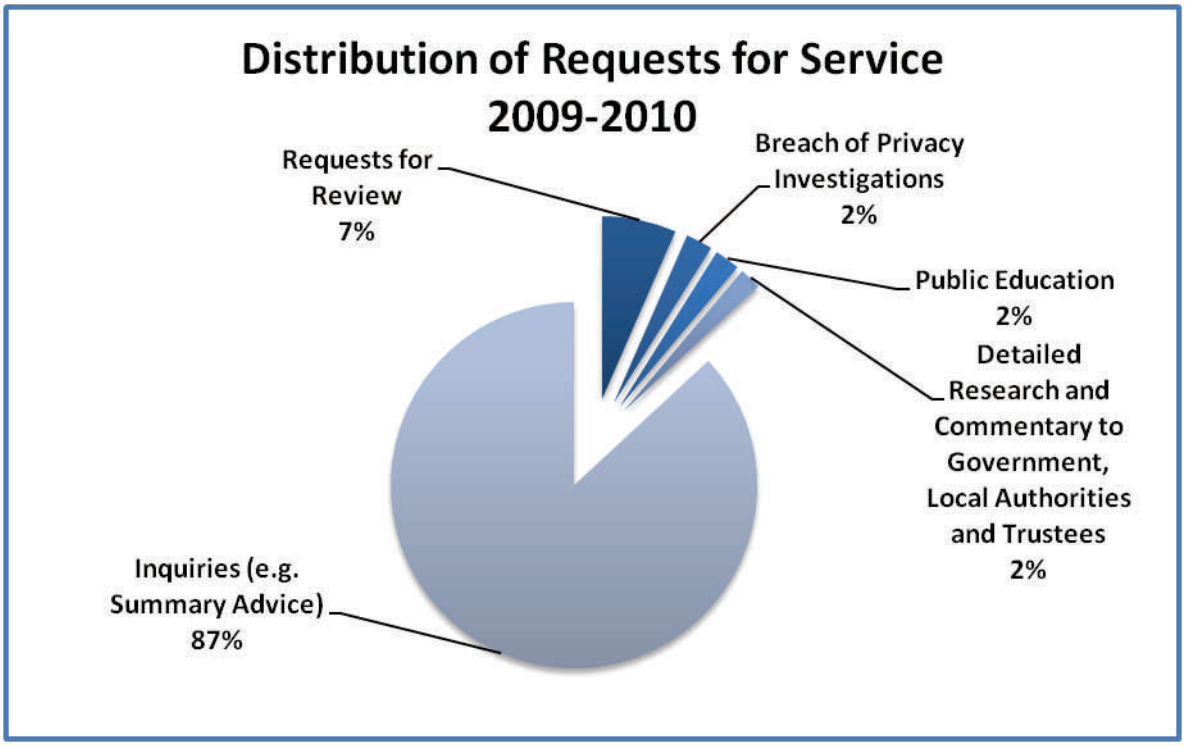
REPORT LA-2009-002 / H-2009-001
(Regina Qu'Appelle Regional Health Authority)

In this particular case, the Applicant applied simultaneously under LA FOIP for access to the personal information of his deceased mother (the deceased) and general information related to her care in the possession or control of the Regina Qu'Appelle Health Region (RQHR or Region), and for access to the personal health information of the deceased under HIPA. The Region refused access to records responsive to the request based on its contention that the Applicant's request was not related to the administration of an estate in accordance with section 56 of HIPA or section 49 of LA FOIP. Access was also denied based on section 38 of HIPA and sections 16 and 21 of LA FOIP.

In the Report I issued on December 17, 2009, I found that the Applicant was acting as a personal representative and that the access request did relate to the administration of the deceased's estate in accordance with both LA FOIP and HIPA. I found that exemptions claimed under section 38 of HIPA did not apply to the withheld information. I found that section 16 exemptions applied to some information, but recommended the release of other records. I found that section 21 of LA FOIP did not apply to records in Package A and that RQHR failed to meet the burden of proof in claiming this exemption in respect to Package B. I found that some of the information in the responsive record was personal information of identifiable individuals and recommended it be withheld in accordance with section 28(1) of LA FOIP. In failing to respond openly, accurately and completely to the Applicant's request, I found that the Region failed to meet the duty to assist.

By way of letter January 13, 2010, the Region advised us that it would "endeavour to meet the recommendations to the extent reasonably possible." This includes releasing certain documents to the Applicant (i.e. Package A, etc) and conducting a further search for responsive records if the Applicant requests that it do so.

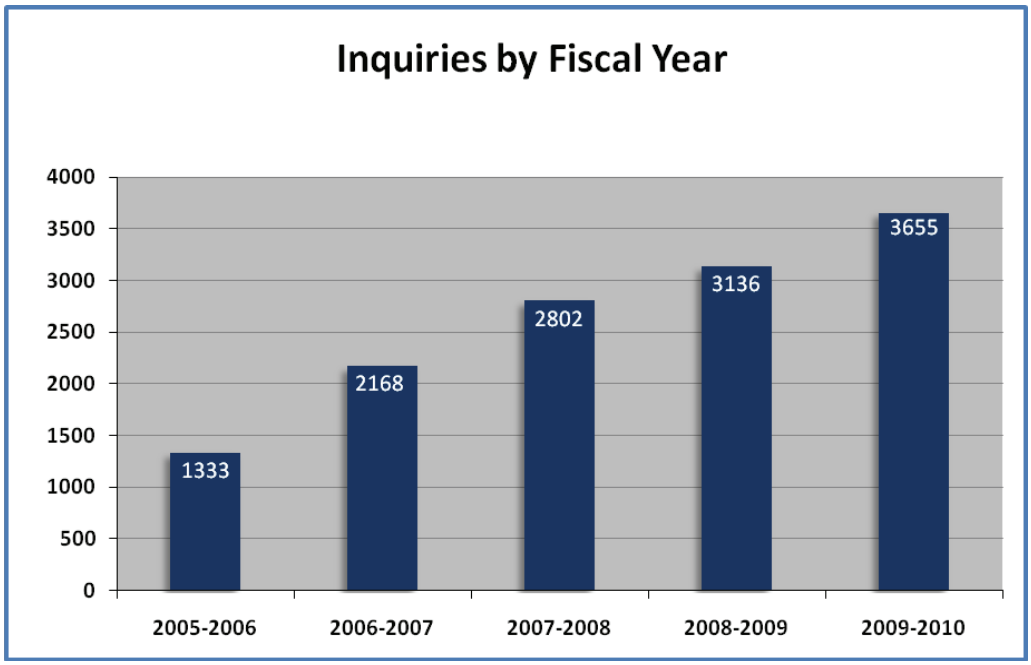
Statistics

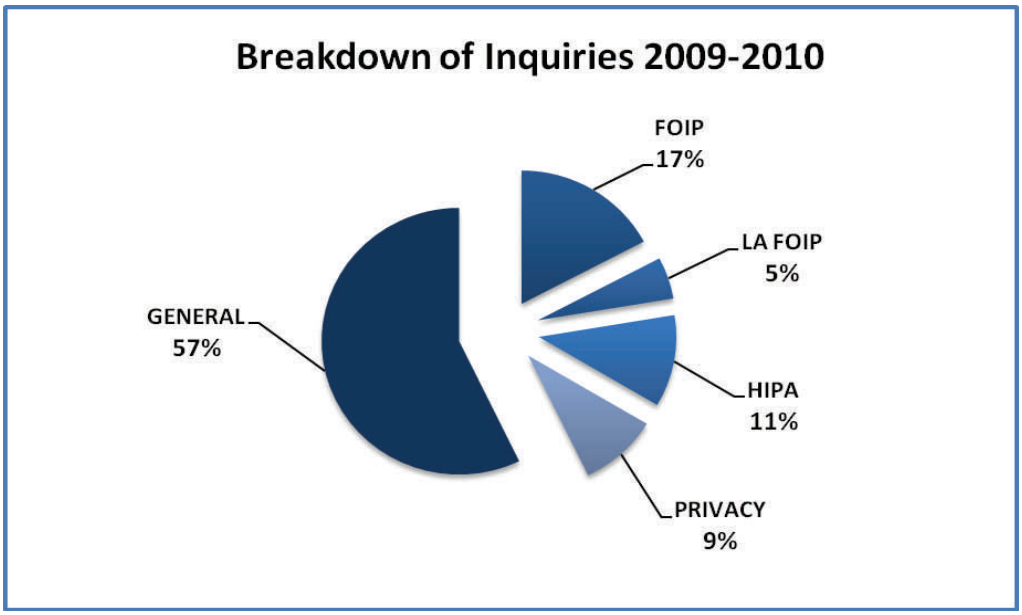


Description	2008-2009	2009-2010
Active Requests for Review Files	170*	276*
Active Breach of Privacy Investigation Files	91*	99*
Public Education	126	94
Detailed Advice and Commentary to Government, Local Authorities and Trustees	69	82
Inquiries (e.g. Summary Advice)	3136	3655
Total	3592	4206

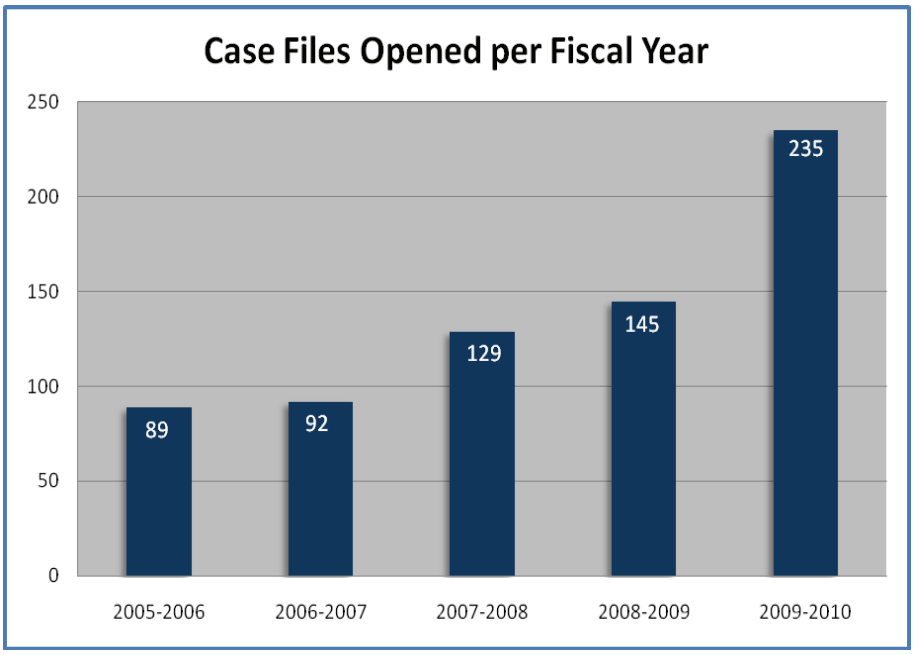
*** Number is representative of open files carried over from previous years, as well as those opened during the fiscal year indicated.**

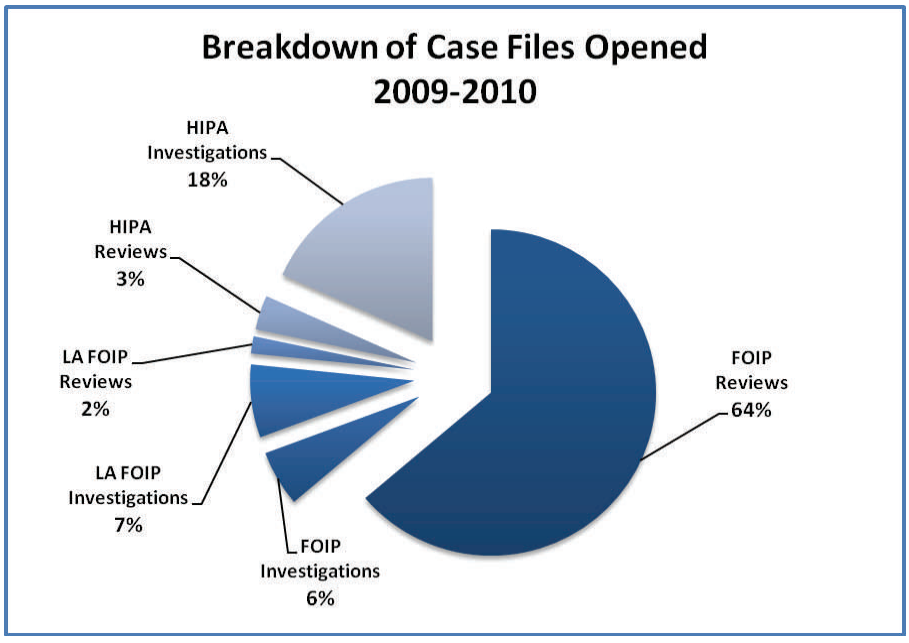
Statistics


Inquiries by Fiscal Year
4000
3500
3000
2500
2000
1500
1000
500
0
1333
2168
2802
3136
3655
2005-2006
2006-2007
2007-2008
2008-2009
2009-2010

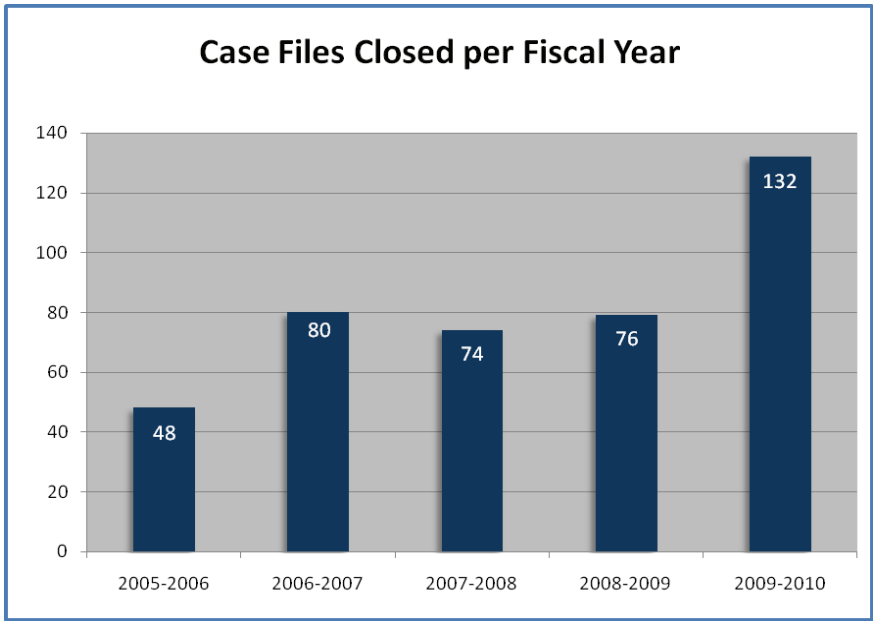

Breakdown of Inquiries 2009-2010
FOIP
17%
LA FOIP
5%
HIPA
11%
PRIVACY
9%
GENERAL
57%

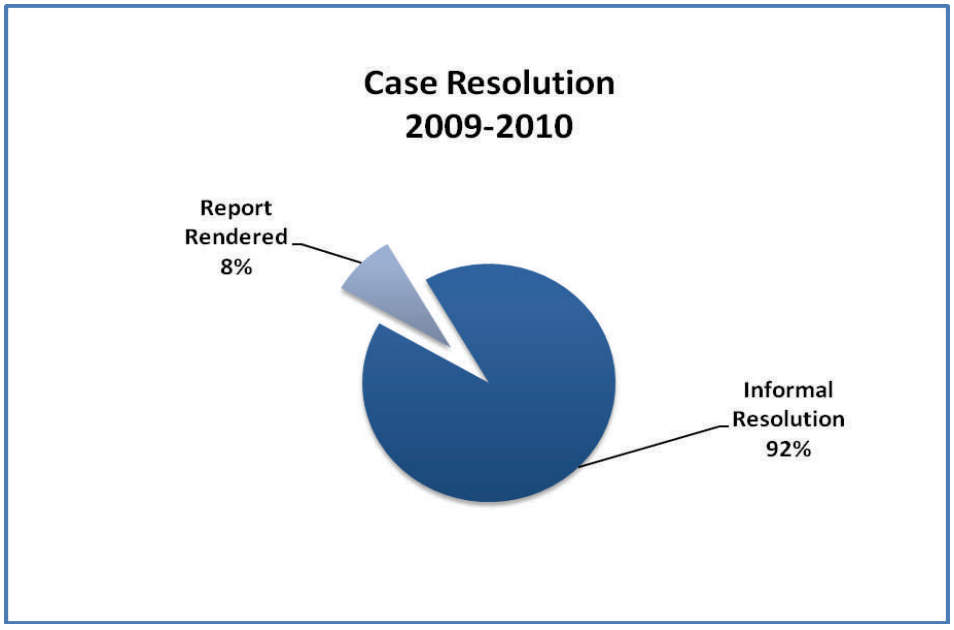
Statistics


Case Files Opened per Fiscal Year
250
200
150
100
50
0
89
92
129
145
235
2005-2006
2006-2007
2007-2008
2008-2009
2009-2010

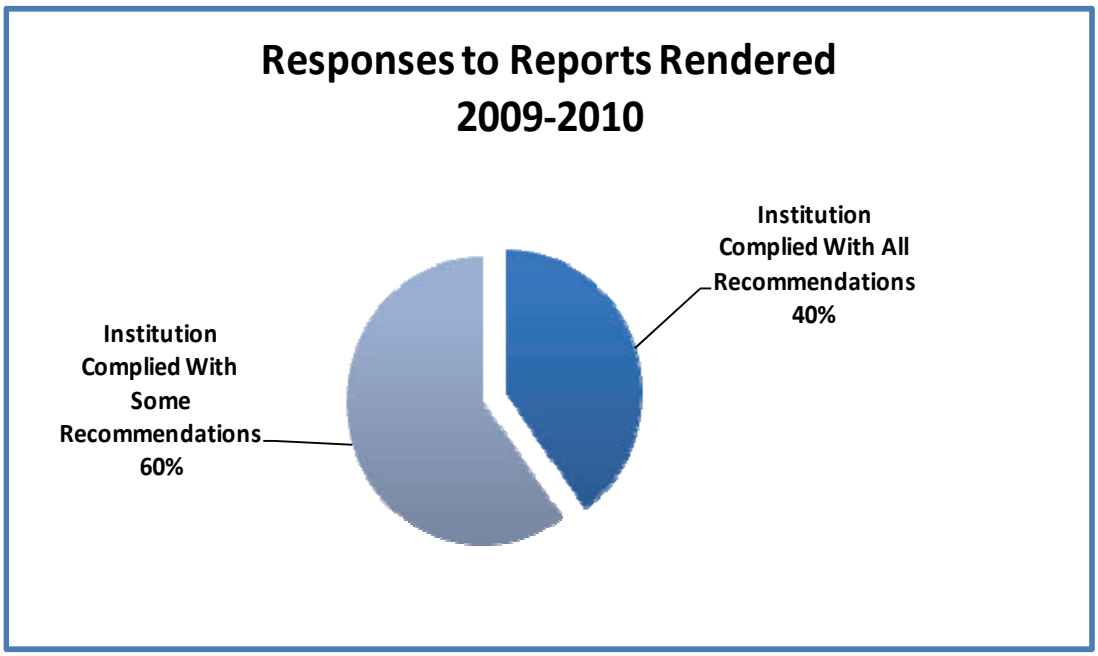

Breakdown of Case Files Opened
2009-2010
HIPA Investigations 18%
HIPA Reviews 3%
LA FOIP Reviews 2%
LA FOIP Investigations 7%
FOIP Investigations 6%
FOIP Reviews 64%

Statistics


Case Files Closed per Fiscal Year
140
120
100
80
60
40
20
0
48
80
74
76
132
2005-2006
2006-2007
2007-2008
2008-2009
2009-2010


Case Resolution
2009-2010
Report
Rendered
8%
Informal
Resolution
92%

Statistics


Responses to Reports Rendered
2009-2010
Institution Complied With All Recommendations 40%
Institution Complied With Some Recommendations 60%

FINANCIAL STATEMENTS

For the Year Ended March 31, 2010

Saskatchewan
Information and Privacy
Commissioner

503 - 1801 Hamilton Street
Regina, Saskatchewan
S4P 4B4

Tel: (306) 787-8350
Fax: (306) 798-1603
Website: www.oipc.sk.ca

June 9, 2010

2009 - 2010 MANAGEMENT REPORT

The accompanying financial statements are the responsibility of management and have been approved in principle by the Office of the Information and Privacy Commissioner. The financial statements have been prepared in accordance with Canadian generally accepted accounting principles.

Management maintains appropriate systems of internal control, including policies and procedures which provide reasonable assurance that the Office's assets are safeguarded and that financial records are relevant and reliable.

The Provincial Auditor of Saskatchewan conducts an independent audit of the financial statements. His examination is conducted in accordance with Canadian generally accepted auditing standards and includes tests and other procedures which allow him to report on the fairness of the financial statements.

R. Gary Dickson, Q.C.
Saskatchewan Information and
Privacy Commissioner

Pam Scott
Director of Operations

Provincial Auditor Saskatchewan

1500 Chateau Tower
1920 Broad Street
Regina, Saskatchewan
S4P 3V2

Phone: (306) 787-6398
Fax: (306) 787-6383
Web site: www.auditor.sk.ca
Internet E-mail: info@auditor.sk.ca

SASKATCHEWAN

AUDITOR'S REPORT

To the Members of the Legislative Assembly of Saskatchewan

I have audited the statement of financial position of the Office of the Information and Privacy Commissioner as at March 31, 2010 and the statements of operations and accumulated surplus, change in net assets, and cash flows for the year then ended. The Office is responsible for preparing these financial statements. My responsibility is to express an opinion on these financial statements based on my audit.

I conducted my audit in accordance with Canadian generally accepted auditing standards. Those standards require that I plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In my opinion, these financial statements present fairly, in all material respects, the financial position of the Office of the Information and Privacy Commissioner at March 31, 2010 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Regina, Saskatchewan
May 28, 2010

Brian Atkinson, FCA
Acting Provincial Auditor

Statement 1

OFFICE OF THE INFORMATION AND PRIVACY COMMISSIONER
STATEMENT OF FINANCIAL POSITION
As at March 31

	2010	2009
Financial assets		
Due from the General Revenue Fund	$ 17,157	$ 79,815
Liabilities		
Accounts payable	16,720	71,055
Accrued employee costs	437	8,760
	17,157	79,815
Net assets	---	---
Non-financial assets		
Tangible capital assets (Note 3)	41,757	72,139
Prepaid expenses	8,689	8,329
	50,446	80,468
Accumulated surplus	$ 50,446	$ 80,468

(See accompanying notes to the financial statements)

Statement 2

OFFICE OF THE INFORMATION AND PRIVACY COMMISSIONER
STATEMENT OF OPERATIONS AND ACCUMULATED SURPLUS
For the Year Ended March 31

	2010		2009
	Budget (Note 4)	Actual	Actual
Revenues			
General Revenue Fund - Appropriation	$ 927,000	$ 874,771	$ 807,750
Registration Fee Revenue	---	---	7,700
Total Revenue		874,771	815,450
Expenses			
Salaries and other employment expenses	720,000	668,165	550,015
Administration and operating expenses	65,000	63,008	58,582
Rental of space and equipment	92,700	92,836	88,079
Travel	31,600	23,057	37,120
Advertising and promotion	14,600	12,078	26,691
Amortization	---	37,741	40,794
Contractual and legal services	3,100	7,908	3,293
Total Expenses	927,000	904,793	804,574
Annual (deficit) surplus	$ ---	(30,022)	10,876
Accumulated surplus, beginning of year		80,468	69,592
Accumulated surplus, end of year		$ 50,446	$ 80,468

(See accompanying notes to the financial statements)

Statement 3

OFFICE OF THE INFORMATION AND PRIVACY COMMISSIONER
STATEMENT OF CHANGE IN NET ASSETS
For the year ended March 31

	2010	2009
Annual (deficit) surplus	$ (30,022)	$ 10,876
Acquisition of tangible capital assets	(7,359)	(48,594)
Amortization of tangible capital assets	37,741	40,794
	30,382	(7,800)
(Increase) decrease in prepaid expense	(360)	(3,076)
	30,022	(10,876)
Decrease (increase) in net assets	---	---
Net assets, beginning of year	---	---
Net assets, end of year	$ ---	$ ---

(See accompanying notes to the financial statements)

Statement 4

OFFICE OF THE INFORMATION AND PRIVACY COMMISSIONER
STATEMENT OF CASH FLOWS
For the year ended March 31

	2010	2009
Cash flows from (used in) operating activities:		
General Revenue Fund appropriation received	$ 937,429	$ 770,887
Salaries paid	(676,488)	(548,987)
Supplies and other expenses paid	(253,582)	(173,306)
	(930,070)	(722,293)
Cash provided from operating activities	7,359	48,594
Cash flows from (used in) investing activities:		
Purchase of tangible capital assets	(7,359)	(48,594)
Cash (used in) investing activities	(7,359)	(48,594)
Increase (decrease) in cash and cash equivalents	---	---
Cash and cash equivalents, beginning of year	---	---
Cash and cash equivalents, end of year	$ ---	$ ---

(See accompanying notes to the financial statements)

OFFICE OF THE INFORMATION AND PRIVACY COMMISSIONER
NOTES TO THE FINANCIAL STATEMENTS
MARCH 31, 2010

1. Authority and description of operations

The Freedom of Information and Protection of Privacy Act (Act) states that the Lieutenant Governor in Council, on the recommendation of the Assembly, shall appoint an Information and Privacy Commissioner. The Commissioner is an officer of the Legislative Assembly and is appointed by resolution. The mandate of the Office of the Information and Privacy Commissioner (Office) is to review Government decisions under the Act to ensure the protection of the public's right to access records held or controlled by the Government and to ensure that personal information is only collected, used and disclosed according to the manner and purposes set out in the Act.

2. Summary of accounting policies

The Office uses Canadian generally accepted accounting principles as recommended by the Public Sector Accounting Board of the Canadian Institute of Chartered Accountants to prepare its financial statements. The following accounting policies are considered to be significant.

a) Revenue

The Office receives an appropriation from the Legislative Assembly to carry out its work. General Revenue Fund appropriations are included in revenue when amounts are spent or committed. The Office's expenditures are limited to the amount appropriated to it by the Legislative Assembly.

b) Tangible capital assets

Tangible capital assets are reported at cost less accumulated amortization. Tangible capital assets are amortized on a straight-line basis over a life of three to five years. All tangible capital assets of $50 or more have been capitalized.

3. Tangible capital assets

	2010				2009
	Hardware & Software	Furniture	Leasehold Improvements	Total	Total
Opening costs of tangible capital assets	$ 72,425	$ 127,411	$ 43,852	$ 243,688	$ 195,095
Additions during year	5,004	2,355	---	7,359	48,593
Disposals during year	---	---	---	---	---
Closing costs of tangible capital assets	77,429	129,766	43,852	251,047	243,688
Opening accumulated amortization	54,404	84,999	32,146	171,549	130,755
Annual amortization	8,222	17,813	11,706	37,741	40,794
Closing accumulated amortization	62,626	102,812	43,852	209,290	171,549
Net book value of tangible capital assets	$ 14,803	$ 26,954	$ ---	$ 41,757	$ 72,139

4. Budget

These amounts represent funds appropriated by the Board of Internal Economy to enable the Office to carry out its duties under *The Freedom of Information and Protection of Privacy Act.*

5. Costs borne by other agencies

The Office has not been charged with certain administrative costs. These costs are borne by the Legislative Assembly. No provision for these costs is reflected in these financial statements.

6. Lapsing of appropriation

The Office follows *The Financial Administration Act, 1993* with regards to its spending. If the Office spends less than its appropriation by March 31, the difference is not available to acquire goods and services in the next fiscal year.

7. Financial Instruments

The Office's financial instruments include Due from the General Revenue Fund, Accounts payable and Accrued employee payables. The carrying amount of these instruments approximates fair value due to their immediate or short-term maturity. These instruments have no significant interest rate and credit risk.

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Appendices

Appendix I - Definitions

The following is a list of definitions of terms or abbreviations used in the course of this document or referenced in documents accessible from the website: www.oipc.sk.ca.

Additional definitions are found in the three provincial statutes: *The Freedom of Information and Protection of Privacy Act* (FOIP), *The Local Authority Freedom of Information and Protection of Privacy Act* (LA FOIP) and *The Health Information Protection Act* (HIPA).

Applicant refers to an individual who has made an access request to a government institution, local authority, or health information trustee.

Access is the right of an individual (or his or her lawfully authorized representative) to view or obtain copies of records in the possession or control of a government institution, local authority or trustee including his/or her personal information/personal health information.

Collection is defined by HIPA as to "gather, obtain access to, acquire, receive or obtain personal health information from any source by any means" (section 2(b) of HIPA).

Commissioner refers to the Saskatchewan Information and Privacy Commissioner.

Complainant refers to an aggrieved individual who makes a formal complaint to the Commissioner to investigate an alleged breach of privacy by that public body or trustee pursuant to sections 33 of FOIP, 32 of LA FOIP, or 52 of HIPA.

Complaint is written concern that there has been a breach of privacy by a government institution, local authority or trustee.

Confidentiality is the protection of personal information and personal health information once obtained against improper or unauthorized use or disclosure. This is just one aspect of privacy and is not synonymous with 'privacy'.

Control is a term used to indicate that the records in question are not in the physical possession of the public body or trustee, yet still within the influence of that body via another mechanism (e.g. contracted service).

Custody is the physical possession of a record by a public body or trustee.

Detailed Advice and Commentary refers to requests for evaluative, general, non-binding advice that take in excess of one hour of research, most of these would involve in excess of four hours research.

Appendix I - Definitions

Disclosure is sharing of personal information with a separate entity, not a division or branch of the public body or trustee in possession or control of that record/information.

Duty to Assist means responding openly, accurately and completely to an individual requesting access to records in the possession or control of a government institution or local authority or to personal health information in the custody or control of a health information trustee.

Exclusions are prescribed records and organizations that are not subject to FOIP, LA FOIP or HIPA.

Exemptions are sections of the relevant statutes referenced to justify the denial of access to records by the individual either for mandatory or discretionary reasons.

FOIP refers to *The Freedom of Information and Protection of Privacy Act* that came into force in 1992.

FOIP Coordinator refers to an individual designated pursuant to section 60 of FOIP for managing access and privacy issues in any public body with this title.

FOIP Regime means the statute, regulations, policies, practices and procedures followed in the operation of the statutes.

Government Institution refers to those public bodies prescribed in FOIP and the FOIP Regulations and includes more than 70 provincial government departments, agencies, and Crown corporations.

Head of a public body is the individual accountable by law for making the final decision on access requests, but may delegate these powers to someone else in the organization. This is typically the Minister of a ministry and the CEO of a local authority or Crown corporation.

HIPA refers to *The Health Information Protection Act* that came into force in 2003.

Identity Theft occurs when one person uses another's personal information without his/her knowledge or consent to commit a crime such as fraud or theft.

LA FOIP refers to *The Local Authority Freedom of Information and Protection of Privacy Act* that came into force in 1993.

Appendix I - Definitions

Local Authorities means local government including library boards, municipalities, regional colleges, schools, universities, and Regional Health Authorities as prescribed by LA FOIP and the LA FOIP Regulations.

Mediation is the process of facilitating discussion between the parties involved in a review or investigation by the OIPC with the goal of negotiating a mutually acceptable resolution to the dispute without the issuance of a formal report.

OIPC is an abbreviation for the Office of the Saskatchewan Information and Privacy Commissioner.

Personal Information is "recorded information about an identifiable individual" and includes details such as your name, address, phone number, SIN, race, driver's license number, health card number, credit ratings, and opinions of another person about you.

Personal Health Information includes information about your physical or mental health and/or information gathered in the course of providing health services for you.

PIA is an abbreviation for a Privacy Impact Assessment. A PIA is a diagnostic tool designed to help organizations assess their compliance with the privacy requirements of Saskatchewan legislation.

Privacy, in terms of 'information privacy,' means the right of the individual to determine when, how and to what extent he/she will share information about him/herself with others. Privacy captures both security and confidentiality of personal information/personal health information.

Privacy Breach happens when there is an unauthorized collection, use or disclosure of personal information/personal health information regardless of whether the information ends up in a third party's possession.

Public Bodies are organizations in the public sector including government institutions and local authorities.

Record is information in any form or format and includes such items as documents, maps, books, post-it notes, handwritten notes, phone messages, photographs, and tape recordings.

Appendix I - Definitions

Report is a document prepared by the Saskatchewan Information and Privacy Commissioner that issues recommendations to a public body for changes and/or actions in response to the findings of a formal access review or breach of privacy complaint.

Research is the systematic investigation designed to develop or establish principles, facts or generalizable knowledge.

Review is the process by which the OIPC considers either a decision or failure of a trustee to provide an applicant with access to his or her phi.

Secondary Purpose refers to the use or disclosure of personal information/personal health information for a purpose other than that for which it was originally collected.

Security refers to steps taken to protect personal information or personal health information from unauthorized disclosure.

Severing is the exercise by which portions of a document are blacked out pursuant to section 8 of FOIP, section 8 of LA FOIP or section 38(1) of HIPA before that document is provided to an applicant.

Summary advice refers to requests for information received from public bodies or the public that can be responded to with less than one hour of research

Surrogate refers to someone other than the individual but who is exercising rights or powers under section 59 of FOIP, section 49 of LA FOIP or section 56 of HIPA on behalf of the individual.

Third Party is a person other than the applicant or a public body.

Trustees as defined within section 2(t) of HIPA are individuals and corporations who are part of Saskatchewan's health system in custody or control of personal health information and any government institution as defined by FOIP.

Use indicates the internal utilization of personal information by a public body and includes sharing of the personal information in such a way that it remains under the control of that public body.

Appendix II - Sample List of Presentations

April 1, 2009 to March 31, 2010

- Access and Privacy Conference 2009 (Edmonton)
- Alzheimer Association of Saskatchewan
- Canadian Access and Privacy Association (CAPA) Conference
- Brown Bag Luncheon – “The Public Body, The Applicant & The Third Party"
- Canadian Bar Association – Privacy and Access Law Section Meeting (Saskatchewan South)
- Canadian Bar Association – Privacy and Access Law Section Meeting (Saskatchewan North)
- Canadian Bar Association – Privacy and Access Law Section Meeting (Alberta North)
- Canadian Bar Association – Case Law Review 2008-2009 (Saskatoon)
- Canadian Bar Association Corporate Counsel (Saskatchewan South)
- Chiropractic Association of Saskatchewan
- E-Health Forum (Calgary)
- Government Services - Risk Managers
- Ministry of Justice - Privacy/Access Case Law Review (FOIP Coordinators)
- Ministry of Health - Public Representative Orientation Conference
- Prairie Valley School Division Teacher Convention
- Regina and District Medical Society
- R.M. of Moose Jaw - LA FOIP Presentation
- Saskatchewan Emergency Management Organization
- Saskatchewan Genealogical Society 40th Anniversary Conference
- Saskatchewan Legislative Internship Program
- Saskatchewan Licensed Practical Nurses Association Education Day
- Saskatchewan Legal Education Society Inc. (SKLESI) Seminar
- Saskatchewan Registered Nurses Association Discipline Resource Pool Education Day
- Sunset United Church Men's Group
- University of Regina - Canadian Politics Class
- University of Regina - Journalism Class
- Weyburn Rotary Club
- Western Commissioners' Privacy Day Workshop

Appendix III - List of Bodies Subject to OIPC Oversight

Government Institutions (90+)

Local Authorities

- Libraries (589)
- Municipalities:
  - ◊ 13 cities and 455 other **urban municipalities** including:
    - 147 towns
    - 268 villages
    - 40 resort villages
  - ◊ Southern Saskatchewan has 296 **rural municipalities** including:
    - 172 organized hamlets
  - ◊ In Northern Saskatchewan there are:
    - 2 towns
    - 11 northern villages
    - 12 northern hamlets
    - 10 northern settlements
- Regional Colleges (8)
- Regional Health Authorities (13)
- School Divisions (29)
- SIAST (4 campuses)
- Universities (2)

Health Information Trustees
(Others may be added through regulations)

- Ambulance Operators
- Community Clinics
- Government Institutions
  - ◊ 20 Ministries
  - ◊ 77 Crown Corporations and Agencies

Appendix III - List of Bodies Subject to OIPC Oversight

Health Information Trustees (cont'd)

- Health Profession Regulatory Bodies
  - ◊ Chiropractors Association of Saskatchewan
  - ◊ College of Dental Surgeons of Saskatchewan
  - ◊ College of Physicians and Surgeons of Saskatchewan
  - ◊ Dental Technicians Association of Saskatchewan
  - ◊ Denturist Society of Saskatchewan
  - ◊ Registered Psychiatric Nurses Association of Saskatchewan
  - ◊ Saskatchewan Association of Chiropodists
  - ◊ Saskatchewan Association of Licensed Practical Nurses
  - ◊ Saskatchewan Association of Medical Radiation Technologists
  - ◊ Saskatchewan Association of Naturopathic Practitioners
  - ◊ Saskatchewan Association of Optometrists
  - ◊ Saskatchewan Association of Social Workers
  - ◊ Saskatchewan Association of Speech/Language Pathologists and Audiologists
  - ◊ Saskatchewan College of Midwives
  - ◊ Saskatchewan College of Pharmacists
  - ◊ Saskatchewan College of Physical Therapists
  - ◊ Saskatchewan College of Podiatrists
  - ◊ Saskatchewan College of Psychologists
  - ◊ Saskatchewan Dental Assistants Association
  - ◊ Saskatchewan Dental Hygienists Association
  - ◊ Saskatchewan Dental Therapists Association
  - ◊ Saskatchewan Dieticians Association
  - ◊ Saskatchewan Ophthalmic Dispensers Association
  - ◊ Saskatchewan Registered Nurses' Association
  - ◊ Saskatchewan Society for Medical Laboratory Technologists
  - ◊ Saskatchewan Society of Occupational Therapists

Appendix III - List of Bodies Subject to OIPC Oversight

Health Information Trustees (cont'd)

- Laboratories
- Mental Health Facilities
- Personal Care Homes
- Pharmacies
- Regional Health Authorities and Affiliates
  - 13 regional health authorities
- Regulated Health Professions
  - 1500 physicians and surgeons
  - 9200 registered nurses
- Saskatchewan Cancer Agency
- Special Care Homes