



Order F25-82

MINISTRY OF HEALTH

Allison J. Shamas
Adjudicator

October 22, 2025

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Summary: An individual complained that the Ministry of Health violated s. 28 (accuracy of personal information) and s. 29 (correction or annotation of personal information) of the *Freedom of Information and Protection of Privacy Act*. The adjudicator found that on the relevant date the Ministry had contravened s. 28 by using inaccurate personal information about the individual to make a decision that directly affected them without making every reasonable effort to ensure the personal information was accurate and complete, but that the Ministry had since taken steps to rectify the situation and was now complying with s. 28. The adjudicator also found that the Ministry had contravened s. 29 by failing to correct inaccurate personal information. The adjudicator ordered the Ministry to add a clear correction to the record and to ensure that in the future, if it disclosed the information to a third party, that the third party would be informed of the correction.

Statutes Considered: *Freedom of Information and Protection of Privacy Act*, RSBC 1996 c. 165 ss. 28, 29(1), (2), (3), and 58(3).

OVERVIEW

[1] An individual (complainant) requested that the Ministry of Health (Ministry) correct an error in their personal information that was in the custody of the Ministry. The Ministry refused. Dissatisfied with the Ministry's response, the complainant made a complaint to the Office of the Information and Privacy Commissioner (OIPC) under the *Freedom of Information and Protection of Privacy Act* (FIPPA).

[2] In the complaint, the complainant alleged that the Ministry violated s. 28 (accuracy of personal information) by using inaccurate personal information about them to make decisions that directly affected them, and s. 29 (correction or annotation of personal information) by failing to correct or adequately annotate that same personal information.

[3] The OIPC's mediation process did not resolve the complaint, and the matter proceeded to this inquiry.

ISSUES IN DISPUTE

[4] The issues I must decide at the inquiry are:

- 1) Whether on the relevant date (which I find to be November 15, 2018) the Ministry made every reasonable effort to ensure that the complainant's personal information was accurate and complete in compliance with section 28 of FIPPA;
- 2) Whether the Ministry must correct or annotate the complainant's personal information in compliance of section 29(2) of FIPPA and if yes;
- 3) Whether the Ministry must notify any other public body or any third party to whom that information has been disclosed during the one year period before the correction was requested in compliance of section 29(3) of FIPPA.

[5] FIPPA is silent with respect to the burden of proof under ss. 28 and 29.

[6] Most past orders considering s. 29 hold that the burden is on the public body to establish that it met its obligations under s. 29.¹ I agree with this approach and adopt it here.

[7] Past orders considering s. 28 do not conclusively decide the onus issue.² Where FIPPA does not identify which party bears the burden of proof on a particular issue, past orders have considered who raised the issue, who is in the best position to meet the burden of proof, and what is fair in the circumstances when deciding which party ought to bear the burden of proof.

[8] I find that the ultimate burden to prove that it made every reasonable effort as required by s. 28 is on the Ministry. It is the Ministry who asserts that it has fulfilled its obligations under s. 28, and the Ministry who is in the best position to establish that it has complied with its duties in this respect.

¹ See for example Order No. 317-1999, Order No. 124-1996, Order 00-51, 2000 BCIPC 14416 (CanLII), and Order 02-41, 2002 BCIPC 42475 (CanLII). While I note that Orders F21-55, 2021 BCIPC 64 (CanLII) and F10-31, 2010 BCIPC 44 (CanLII) take a different approach, I do not find the statement that it is in the interests of both parties to provide the adjudicator with whatever evidence and argument they have to be inconsistent with the orders listed in the previous sentence.

² In Order 00-51 *ibid*, a Commissioner suggested that the burden to prove that the public body has complied with its s. 28 duty to make "every reasonable effort" should lie with the public body but ultimately he did not go on to actually consider the provision. Other orders (Order F10-31, *ibid* and Order F21-55 *ibid*), say only that it is in the interests of both parties to provide the adjudicator with whatever evidence and argument they have regarding s. 28.

[9] There are three preconditions which must be met before the duty to make every reasonable effort in s. 28 is triggered. They are, that the information at issue: is the complainant's personal information; is in the custody or under the control of the Ministry; and was used by the Ministry to make a decision that directly affected the complainant. It is the complainant who asserts that the Ministry violated s. 28. In my view, it is only fair and reasonable in the circumstances to require the complainant to prove that the preconditions are met before shifting the burden to the Ministry to prove that it has fulfilled its obligation under s. 28.³

DISCUSSION

Background

[10] To understand the parties' dispute, it is necessary to have a basic understanding of the province's PharmaCare program, PharmaNet system, and rules regarding entering veterinary prescriptions into the PharmaNet system. The following background comes from an affidavit of the Ministry's Operations Manager who is responsible for the PharmaNet system.⁴

PharmaCare

[11] The Ministry of Health is responsible for PharmaCare, the province's prescription drug program established under the *Pharmaceutical Services Act (PSA)*.⁵ PharmaCare provides coverage to BC residents for eligible prescription drugs, services, and devices through a variety of plans.

[12] One such plan is Fair PharmaCare. Fair PharmaCare sets an annual deductible. When an individual buys an item that Fair PharmaCare covers, eligible costs count towards their annual deductible. After an individual reaches their deductible, PharmaCare pays a percentage of eligible costs for the rest of the year. PharmaCare coverage is reset on an annual basis.

PharmaNet

[13] PharmaNet is the prescribed information management system for

³ Order 00-51, discussed above comments only on the burden to prove that the public body made every reasonable effort. It does not comment on the preconditions in s. 28 or the burden under s. 28 as a whole. I am not aware of any past orders that have done so.

⁴ The complainant does not dispute this background information and in my view, the Operations Manager's evidence about their role and responsibilities for the PharmaNet system, establishes that they have both an expertise with and direct knowledge of the PharmaNet system. I find their evidence to be reliable.

⁵ SBC 2012 c 22.

PharmaCare.⁶ The Ministry created PharmaNet in 1995. PharmaNet is a computer network that links all BC pharmacies to a central set of databases owned, operated, and maintained by the Ministry. PharmaNet stores a record of each time a product was dispensed from a BC pharmacy since 1995.

[14] When a patient presents a prescription at a pharmacy, the pharmacist enters the prescription into PharmaNet under the patient's profile. PharmaNet automatically calculates the amount the individual's PharmaCare plan pays and subtracts this amount from the cost of the prescription to determine the amount the patient pays at the counter. The Operations Manager refers to this function as "adjudicating" a claim.

[15] Records in PharmaNet are divided into active and archived profile information. PharmaNet uses active profile information to adjudicate claims and to compare new dispenses with past ones. In addition, pharmacists and other health care practitioners with access to PharmaNet can see the information in an individual's active profile. Records of dispenses are included in an individual's active profile for 14 months.

[16] Records of dispenses that are older than 14 months are moved to an individual's archived profile. Information in an individual's archived profile is no longer used by PharmaNet to adjudicate claims or compare new dispenses with past ones, and the information is also no longer visible to pharmacists and healthcare practitioners with access to PharmaNet.

Veterinary Prescriptions

[17] Veterinary prescriptions for animals can be filled at BC pharmacies. When a veterinary prescription is filled at a pharmacy, it should be entered into the pet owner's PharmaNet profile under a separate category called "veterinary history."

[18] The Operations Manager states that the Ministry requires pharmacists to follow specific rules when dispensing veterinary prescriptions and that it educates and regularly reminds pharmacists of the rules they must follow with respect to veterinary prescriptions. According to the Operations Manager, these rules prohibit pharmacists from adapting (changing) veterinary prescriptions because doing so removes the veterinary reference code and thereby causes the record to be categorized under the owner's medical history, rather than the separate veterinary history category. In support of these statements, the Operations Manager points to:

- the College's *Professional Practice Policy 58 re Adapting Prescriptions* (the Adaptation Practice Policy);

⁶ *Information Management Regulation BC Reg 328/2021 of the Pharmaceutical Services Act.*

- the Ministry's *PharmaCare Policy Manual* (the Manual); and
- materials the Ministry publishes for BC pharmacists.

[19] The information that is at issue in this inquiry is a veterinary prescription that was entered into the complainant's PharmaNet profile, but miscategorized under the complainant's personal medical history. The information was entered into PharmaNet on November 15, 2018.

[20] The Adaptation Practice Policy in place on November 15, 2018 did not address veterinary prescriptions.⁷ The Manual that was in effect at that time addressed veterinary prescriptions but did not address adapting veterinary prescriptions. The relevant section of the Manual provided as follows:

Veterinary prescriptions

- PHNs must not be assigned to animals.
- When dispensing a prescription for an animal, use the PHN of the animal owner and the veterinarian's Veterinary Association ID number. This will not affect the pet owner's patient record or Drug Utilization Evaluation (DUE) results.⁸

[21] A Ministry newsletter for Pharmacists dated August 21, 2018, similarly, did not address the rule against adapting veterinary prescriptions. The relevant parts provided as follows:

When dispensing veterinary medication, never assign a PHN to an animal. Instead, use the PHN of the pet's owner. To prevent the drug from adjudicating on Pharma Net and to ensure the patient's medical record is correct:

- Use the veterinarian's license number as the Practitioner ID.
- Use V9 as the Reference Code.

This will ensure the drug does not appear on the pet owner's patient record, and will not affect their Drug Utilization Evaluation results. Failure to properly process veterinary medications on PharmaNet may result in inappropriate PharmaCare coverage and may have serious implications for patient safety.⁹

[22] After the information in dispute in this inquiry was created, the Adaptation Practice Policy was amended to expressly prohibit a pharmacist from adapting a

⁷ Version of the Adaptation Practice Policy in effect in 2018 attached to the Ministry's October 7, 2025 email.

⁸ Version of the Manual in effect in 2018 attached to the Ministry's October 7, 2025 email.

⁹ *BC PharmaCare Newsletter* dated August 21, 2018 at pp 2, Exhibit C to the affidavit of the Operations Manager.

veterinary prescription. It provided “A pharmacist must not adapt: a. a prescription from a veterinarian.”¹⁰ The Manual was updated to add a statement that “pharmacists cannot dispense prescriptions for animals as ... an adaptation”.¹¹ Furthermore, an article the Operations Manager says the Ministry published on March 12, 2025 reiterates that “A pharmacist must not adapt a. a prescription from a veterinarian.”¹²

*Circumstances leading to this inquiry*¹³

[23] On November 15, 2018, the complainant filled a veterinary prescription for psychiatric medication for their dog at a BC pharmacy. The dispense was recorded in the complainant’s PharmaNet profile. The pharmacist adapted (changed) the prescription from a pill to a liquid. As a result, the Veterinary reference code was deleted from the entry and the dispense was recorded under the complainant’s history rather than under the separate Veterinary History category in PharmaNet.

[24] The complainant has or had claims open with the Insurance Corporation of British Columbia (ICBC) and WorkSafeBC. In dealing with these claims, the complainant learned that the entry for their dog’s prescription (Entry) was recorded as part of their own medical history in PharmaNet.

[25] On December 5, 2023 the complainant wrote to the Ministry and requested that Entry be removed from their PharmaNet records. By that time, the Entry was part of the complainant’s archived profile. The Ministry responded to the complainant’s request explaining due to the passage of time and technical limitations it was unable to change or delete the information. It is as a result of this response that the complainant made the complaint to the OIPC.

[27] On September 16, 2024, the Ministry issued a letter to the complainant confirming that the prescription was in fact dispensed for a dog and not the complainant (Letter).

[28] On June 16, 2025, the Ministry added the following note the complainant’s PharmaNet profile:

¹⁰ Version of the Adaptation Practice Policy revised August 1, 2024, Exhibit B to the affidavit of the Operations Manager.

¹¹ Version of the Manual updated August 30, 2024, Exhibit A to the affidavit of the Operations Manager.

¹² PRP Insights article dated March 12, 2025, Exhibit D to the affidavit of the Operations Manager.

¹³ The remaining background facts are derived from the Fact Report for this inquiry and uncontested parts of the parties’ submissions. A fact report is a statement of facts prepared by an OIPC investigator that is agreed to by the parties.

REMOVAL OF ADAPTED RX [prescription number] 15NOV18 FOR DOG DENIED (the Note)

The Note does not appear with the Entry, but in chronological order in the complainant's PharmaNet profile.

ACCURACY OF PERSONAL INFORMATION – S. 28

[29] The first issue to be determined is whether the Ministry contravened s. 28 of FIPPA. Section 28 provides that:

Accuracy of personal information

28 If

(a) an individual's personal information is in the custody or under the control of a public body, and

(b) the personal information will be used by or on behalf of the public body to make a decision that directly affects the individual,

the public body must make every reasonable effort to ensure that the personal information is accurate and complete.

[30] To determine whether the Ministry contravened s. 28, I must answer the following questions:

1. Is the information at issue the personal information of the complainant?
2. Is the personal information in the custody or under the control of the Ministry?
3. Did the Ministry use the complainant's personal information to make a decision that directly affected the complainant?
4. If the three preconditions are met, did the Ministry make every reasonable effort to ensure that the personal information was accurate and complete prior to making the decision?¹⁴
5. If the Ministry did not make every reasonable effort to ensure that the personal information was accurate and complete prior to making the decision, what is the appropriate remedy?

Complainant's personal information in the custody of the Ministry

[31] The Ministry acknowledges that the Entry is included in the complainant's archived profile in PharmaNet and that it has custody of the information in PharmaNet. I find that the answer to the first two questions is yes.

¹⁴ Order F21-55, 2021 BCIPC 64 (CanLII) at para 12.

Used by the Ministry to make a decision that directly affected the complainant

[32] I also find that the answer to the third question is yes, though not for the reasons identified by the complainant.

[33] The Ministry argues that the third requirement is not satisfied because the Entry had no impact on the complainant. It says that the only decisions it makes using records of dispenses are the claims adjudications made by PharmaNet, and that because the complainant did not reach their deductible in 2018, the Entry did not affect the amount the complainant paid for prescriptions in 2018. Further, it says that because PharmaCare coverage is reset annually, the Entry has not and will not be used to adjudicate claims in any years after 2018.

[34] The complainant argues that the Ministry's interpretation of the third requirement is overly narrow because it does not reflect the realities of how PharmaNet records are accessed and used. In this regard, the complainant writes:

My PharmaNet records (including such entries described by the Ministry as "archived" or "historical") are broadly accessible to a plethora of parties including, but not limited to, public and private insurance providers (in my particular case: ICBC as well as WorkSafeBC, with their broad powers to compel under the *Workers Compensation Act*), and countless analysts and researchers whose work directly influence the Ministry's own drug coverage decisions and broader healthcare decisions by policymakers (e.g. full PharmaNet data set through Population Data BC¹, the Canadian Institute for Health Information's National Prescription Drug Utilization Information System², Health Data Platform BC³, etc.).

WorkSafeBC, in particular, under Compensation Claim # ... has analyzed data from PharmaNet to adjudicate my coverage entitlements for healthcare treatments and prescription medications under workers' compensation, a process in decision-making which plays a direct role on behalf of the Ministry as coverage under WorkSafeBC reallocates costs away from the public Medical Services Plan.

Several public and private entities, including the Ministry of Health, rely upon this PharmaNet data to make decisions and assessments that directly affect my personal rights, medical entitlements, and some decisions may even materially impact my personal reputation.¹⁵

[35] The third question asks whether the information was used by or on behalf of the public body to make a decision that directly affects the individual.

¹⁵ Complainant's response submission, pp 1-2.

[36] While I understand the complainant's concerns about the potential for broader uses of PharmaNet data, I am not persuaded that any of the scenarios identified by the complainant satisfy the requirements of s. 28. ICBC and WorkSafeBC are public bodies in their own right. Decisions made by these bodies are not decisions made by or on behalf of the Ministry. With respect to the complainant's concerns about research and its impact on policy decisions, the complainant does not identify any specific decision made as a result of that research that directly affects them, and none is apparent from the circumstances identified in their submissions.

[37] I am also not persuaded by the Ministry's argument because I find that it improperly adds a requirement that is not found in the language of s. 28. Section 28 requires only that the information was used to make a decision that directly affects the individual, not that the information directly affected the outcome of that decision. In any event, I find that the Ministry's submissions about what impact the information had on the complainant is more appropriately addressed under remedy.

[38] The Ministry acknowledges that when the complainant presented the veterinary prescription to the pharmacist, the pharmacist entered that information into PharmaNet in its adapted form, and PharmaNet used that information to calculate what the complainant owed at the pharmacy – that is to adjudicate the complainant's claim. I have no difficulty concluding that using information to calculate how much money an individual owes is using that information to make a decision that directly affects that individual.

[39] Accordingly, in this case, I find that the Ministry used the Entry to make a decision that directly affected the complainant. The decision at issue is PharmaNet's adjudication of the complainant's Fair PharmaNet Claim. The answer to the third question is yes.

Every reasonable effort to ensure that the personal information was accurate and complete prior to making the decision

[40] As the preconditions in questions 1-3 above are met, the next question is whether the Ministry made every reasonable effort to ensure the complainant's personal information in the Entry was accurate and complete prior to PharmaNet's adjudication of the complainant's claim for the veterinary prescription.

Parties' submissions

[41] The Ministry submits that it made every reasonable effort in compliance with s. 28. The Ministry estimates that PharmaNet makes approximately 100 million instantaneous claim adjudication decisions per year. The Ministry emphasizes that only pharmacists can enter information into PharmaNet, and

that it relies on them to enter accurate and complete information in accordance with the rules.

[42] In support of its position, the Ministry says that BC pharmacists are regulated professionals who are governed by a complex regime established by the *Health Professions Act*,¹⁶ the *PSA*, the *Information Management Regulation*¹⁷ under the *PSA* and the *Pharmacy Operations and Drug Scheduling Act*¹⁸. It also emphasizes that pharmacists must follow strict rules when dispensing veterinary prescriptions and that it put these rules in place, in part, to ensure PharmaNet dispense records are accurate and complete. In this last regard, the Ministry points to the Adaptation Practice Policy, the Manual, and the materials it publishes for pharmacists.

[43] The complainant does not address this aspect of s. 28.

Findings and analysis

[44] In *British Columbia (Ministry of Children and Family Development) v Harrison*, Justice Bennett of the BC Court of Appeal emphasized that “[i]nquiries under s. 28 are fact-based and made in the context of the case.”¹⁹ In addition, it is worth emphasizing that the requirement is only to make “every reasonable effort,” not to ensure the information is accurate and complete.

[45] There is no dispute that the cause of the inaccuracy was that the pharmacist who dispensed the veterinary prescription on November 15, 2018 adapted the prescription from a pill to a liquid which resulted in the dispense being miscategorized under the complainant’s personal medical history. Furthermore, the Ministry acknowledges that it does not check or verify the accuracy of information inputted into PharmaNet but instead relies on pharmacists to ensure the information they enter into PharmaNet is accurate and complete.

[46] In my view, the relevant question is what effort the Ministry made to avoid the error on or before November 15, 2018 when a pharmacist miscategorized the Entry as the complainant’s personal medical history.

[47] The Ministry relies on the legislative, regulatory, and policy regimes governing pharmacists and its own reminders to those pharmacists to establish that it made every reasonable effort to ensure the information in the Entry was accurate and complete. I have reviewed the legislation and regulations identified

¹⁶ RSBC 1996, c 183.

¹⁷ BC Reg 328/2021.

¹⁸ SBC 2003, c 77.

¹⁹ *British Columbia (Ministry of Children and Family Development) v Harrison*, 2012 BCCA 277 at para 91.

by the Ministry that were in effect on November 15, 2018. While it is clear that some of them address veterinary prescriptions, I was not able to identify, and the Ministry did not direct me to any provisions which direct pharmacists not to “adapt” veterinary prescriptions or explain the consequences of doing so. Nor do any of the policies, manuals, or publications that were in effect in 2018 direct pharmacists not to adapt veterinary prescriptions or explain the consequences of doing so.

[48] Based on the evidence presented to me, it is not clear how the pharmacist who created the Entry could have known that they were not permitted to adapt a veterinary prescription or what the consequences of doing so would be, on November 15, 2018. It is also not clear to me what, if anything, the Ministry did to communicate the rule against adapting veterinary prescriptions to pharmacists on or before November 15, 2018. Accordingly, I am not satisfied the Ministry made “every reasonable effort” ensure that the complainant’s personal information in the Entry was accurate and complete before November 15, 2018 when PharmaNet adjudicated the complainant’s claim. Therefore, I find the Ministry violated s. 28.

What is the appropriate remedy?

[49] Having found that the Ministry contravened s. 28, the final question I must decide is what is the appropriate remedy?

[50] Broadly speaking, any remedy under FIPPA should match the purpose of the provision at issue and must fall within s. 58 of FIPPA which sets out the Commissioner’s order making powers. In *British Columbia (Ministry of Children and Family Development) v. Harrison*, the majority of the BC Court of Appeal said the purpose of s. 28 was “to ensure that public bodies ... do not make decisions based on inaccurate personal information, which will have direct effects on individuals.”²⁰ The provision is part of a recognition that public bodies wield considerable power over individuals.²¹

[51] Since the November 15, 2018, the Ministry has added a clear rule prohibiting pharmacists from adapting veterinary prescriptions to its Manual, and a recent article that the Operations Manager says the Ministry published reminds

²⁰ 2012 BCCA 277 (CanLII) at para 87.

²¹ See Order 00-15, 2000 CanLII 14416 (BC IPC) in which a Commissioner wrote “Although s. 29, strictly speaking, imposes no legal duty to correct an error or omission in personal information when a correction is requested, the correction “should”, ... be made when the error or omission is brought to the public body’s attention through a s. 29(1) request. ... The public interest in good government and in sound decision-making suggests that, wherever possible, a public body should – even though it is not legally required to do so – correct actual errors or omissions in personal information when requested. This is consistent with the s. 28 obligation to make every reasonable effort to ensure that personal information that will be used in decisions is accurate and complete.”

pharmacists that they cannot adapt veterinary prescriptions. In addition, the Operations Manager deposes that the Ministry regularly reminds pharmacists of their obligations in respect of the PharmaNet system. In the unique circumstances of this inquiry, I find that the Ministry has now made every reasonable effort to ensure that the personal information is accurate and complete.

[52] Those circumstances are as follows. First, that the College of Pharmacists added a rule prohibiting adapting veterinary prescriptions to the Adaptation Practice Policy. Having considered the Manual and the article in connection with the rule in the policy, I find that the rule against adapting prescriptions is now clear to BC pharmacists.

[53] Furthermore, pharmacists are trained and regulated professionals who are responsible for complying with the policies governing their work, and the PharmaNet system uses immense amounts of information to make what I accept is an exceedingly large number of instantaneous claim adjudication decisions per year. In this context, I find that it is reasonable for the Ministry to rely on the frontend assessments by pharmacists, rather than attempting to verify the accuracy of information each time PharmaNet adjudicates a claim.

[54] In the circumstances, I find that the Ministry's decision to amend its Manual to make clear to pharmacists that they cannot adapt veterinary prescriptions and to remind pharmacists of the rule by way of the article are sufficient to satisfy its obligation to make every reasonable effort to ensure that similar errors will not occur in the future. I make this finding because, given the realities of the PharmaNet system, it is not clear to me what more the Ministry could do but inform and continue to remind the professionals who enter information into PharmaNet to ensure that information is accurate and complete when they enter it.

[55] I also note that evidence before me is that the Entry did not affect the adjudication of the complainant's claim because it did not affect how much the complainant paid for the veterinary prescription. Therefore, I find that the Ministry's failure to comply with s. 28 before November 15, 2018 did not impact the adjudication decision that is at issue under s. 28.

[56] While I find that the Ministry contravened s. 28, I do not find that any remedy is necessary or appropriate because the Ministry has now taken steps to remedy the circumstances that led to the contravention, and there is no evidence the contravention impacted the Ministry's adjudication decision about the complainant. Accordingly, under s. 58(3)(a), I confirm that the Ministry has now performed its duty under s. 28.

CORRECTION OR ANNOTATION OF PERSONAL INFORMATION – SECTION 29(2)

[57] The second issue to be determined is whether the Ministry is required to correct or annotate the complainant's personal information in compliance with s. 29(2) of FIPPA. The parts of s. 29 of FIPPA that are relevant to this question state as follows:

Right to request correction of personal information

29 (1) An individual who believes there is an error or omission in personal information about the individual that is in the custody or under the control of a public body may request the head of the public body to correct the information.

(2) If no correction is made in response to a request under subsection (1), the head of the public body must annotate the information with the correction that was requested but not made.

In addition, s. 58(3)(d) of FIPPA which sets out the Commissioner's powers when there is a request to correct personal information provides as follows:

(3) If the inquiry is into any other matter, the commissioner may, by order, do one or more of the following:

(d) confirm a decision not to correct personal information or specify how personal information is to be corrected;

[58] The parties' submissions raise three questions:

1. Can I require the Ministry to correct the Entry?
2. If so, is the appropriate approach for the Ministry to correct or annotate the Entry?
3. What, if anything, should I order the Ministry to do?

Can I require the Ministry to correct the Entry?

[59] The Ministry submits that it is not legally required to correct the Entry. It relies on the words of s. 29 and cites past orders which say that an individual's right to request a correction does not mean a public body has a duty to make the correction. The complainant does not respond to this argument.

[60] I am not persuaded by the Ministry's argument. The Ministry is right that s. 29 does not require a public body to make every correction requested by an applicant. For instance, the right to request correction applies only to factual errors or omissions in personal information or omissions, not to opinions or expressions of judgement and past orders make clear that there is no obligation

on public bodies to “correct” an opinion or expression of judgement with which an applicant disagrees.²²

[61] However, past orders also explain that wherever possible, public bodies should correct actual, factual errors or omissions in personal information when requested,²³ and that if a public body declines to do so s. 58(3)(d) empowers the commissioner to require the public body to correct that error or omission.²⁴ One past order explains the interplay between s. 29 and 58(3)(d) this way:

It is true that s. 29 does not – as I noted in Order 00-51 – say that a public body “must” make a requested correction. That would be absurd. It is equally true, however, that s. 58(3)(d) of the Act provides that the commissioner may “confirm a decision not to correct personal information or specify how personal information is to be corrected”. If a public body declines to correct an actual error or omission in someone’s personal information, the commissioner may order that error or omission to be corrected.²⁵

[62] In this case, the complainant has identified a specific, factual error in their personal information that is in the custody of the Ministry, and the Ministry has refused to correct that error. While s. 29 does not impose a duty on the Ministry to make every correction requested of it, s. 58(3)(d) authorizes me as the Commissioner’s delegate to require the Ministry to correct the complainant’s information if I decide that this is the appropriate course. Therefore, I find that I have the legal authority to require the Ministry to correct the error.

Is the appropriate approach for the Ministry to correct or annotate the Entry?

[63] Having found that s. 58(3)(d) authorizes me to require the Ministry to correct the complainant’s information, the next question is whether the appropriate approach is for the Ministry to correct or annotate the information.

²² Order 03-18, 2003 CanLII 49191 (BC IPC) at para 70 following a review of earlier orders.

²³ In Order 00-51, 2000 CanLII 14416 (BC IPC) a Commissioner wrote “Although s. 29, strictly speaking, imposes no legal duty to correct an error or omission in personal information when a correction is requested, the correction “should”, ... be made when the error or omission is brought to the public body’s attention through a s. 29(1) request. ... The public interest in good government and in sound decision-making suggests that, wherever possible, a public body should – even though it is not legally required to do so – correct actual errors or omissions in personal information when requested. This is consistent with the s. 28 obligation to make every reasonable effort to ensure that personal information that will be used in decisions is accurate and complete.” This statement was cited favourably in Order 03-18, 2003 CanLII 49191 (BC IPC) at para 15.

²⁴ See Order 03-18, 2003 CanLII 49191 (BC IPC) at paras 15 and 16 and the cases cited therein.

²⁵ Order 01-23, 2001 21577 CanLII (BC IPC) at para 14.

[64] To answer this question, it is necessary to consider the meaning of the terms “correct” and “annotate” in s. 29.

[65] FIPPA does not define either term. Dictionary definitions of the verb correct define it as “to make or set right: amend,”²⁶ and “to show or fix what is wrong; make right.”²⁷ Dictionary definitions of the word annotate define it as “to make or furnish critical or explanatory notes or comment,”²⁸ and “to add a short explanation or opinion to a text or image.”²⁹

[66] Orders dealing with corrections focus on clearly fixing the issue. In two past orders dealing with a correction, an adjudicator ordered the public body to “correct the applicant’s personal information by deleting the errors in that information that the [public body] has conceded exist.”³⁰ In another, a Commissioner explained that correction does not require physical alteration of a record, and could include a variety of measures so long as the incorrect personal information is actually corrected:

Correction does not by definition require the physical alteration of an existing record. It is easy to conjure a number of ways in which the Ministry could correct an error or omission as contemplated by ... s. 29 of the Act. Handwritten corrections could, for example, be made on a copy of the original record, with a note being attached to the original to alert readers to the existence of the corrections on the copy. An attached note to the original could, alternatively, contain (or merely repeat) the actual corrections. Such approaches preserve the integrity of original records while ensuring that the incorrect personal information is actually corrected.³¹

[67] Orders dealing with annotations, on the other hand, focus on connecting the correction request to the information at issue in circumstances where the public body does not correct the information, typically because the applicant has not established that the information is incorrect. In one such order, an adjudicator held that the public body acted properly in annotating records by attaching and linking the applicants’ correction correspondence to the original record but refusing to destroy [the original].³² Other orders emphasize that annotations must

²⁶ Merriam Webster Online Dictionary, online, accessed October 2, 2025, <https://www.merriam-webster.com/dictionary/correct>.

²⁷ Cambridge Dictionary, online, accessed October 2, 2025, <https://dictionary.cambridge.org/dictionary/english/correct>.

²⁸ Merriam Webster Online Dictionary, online, accessed October 2, 2025, <https://www.merriam-webster.com/dictionary/annotate>.

²⁹ Cambridge Dictionary, online, accessed October 2, 2025, <https://dictionary.cambridge.org/dictionary/english/annotate>.

³⁰ Order 03-18, 2003 CanLII 49191 (BC IPC) at para 19; and see Order 03-38, 2003 CanLII 49217 (BC IPC) at para 19.

³¹ Order 01-23, 2001 CanLII 21577 (BC IPC) at para 26.

³² Order 02-05, 2002 CanLII 42430 (BCIPC) at para 17.

attach to the information itself, not just the applicant's file as a whole.³³ In one order a Commissioner, offered the following example of an appropriate annotation after refusing to require the public body to "correct" a student's failing grade: "*Student requested change to "a passing grade". Request denied."³⁴

[68] With these definitions and approaches in mind, I turn to the language of s. 29. While the provision does not directly address what is meant by "correct," it does provide some assistance with the term "annotate". Under s. 29, the obligation to annotate is to "annotate the information with the correction that was requested but not made." In my view, it is clear from this language (and the orders discussed above) that the focus of the obligation to annotate is on connecting the information at issue to the applicant's correction request, not on making clear that the information was incorrect or incomplete.

[69] Considering all of the above, I find that to correct means to fix an error or omission in the applicant's personal information through whatever means are available, and that to annotate means to create an explanatory note that a request to correct personal information was made, and to connect that note to the information at issue. Furthermore, I find that it is appropriate to correct information where the information is factual and the applicant has established that it is incorrect or incomplete, and that it is appropriate to annotate where the information at issue is not factual and/or the applicant has not established that it is incorrect or incomplete. In this case, the complainant has identified a specific, factual error in their personal information that is in the custody of the Ministry, and the Ministry has refused to correct that error. Therefore, I find that the appropriate approach is to require the Ministry to correct the Entry.

What, if anything, should I order the Ministry to do?

[70] This leads me to the final question, what, if anything should I order the Ministry to do?

[71] The Ministry submits that it has already complied with s. 29(2) and that technical limitations prevent it from doing more.

[72] The Ministry's position is two-fold. It says that technical limitations prevent it from correcting the Entry. The Ministry's Operations Manager's evidence is that while the PharmaNet system was designed to allow changes to active profile information, it is not possible to change or amend archived records (where the Entry is found):

It is technically and physically impossible to remove or change Archived Dispense Records. I have access to, and use, PharmaNet in my daily work.

³³ See for example Order 01-50, 2001 CanLII 21604 (BC IPC) at para 23.

³⁴ Order 00-51, 2000 CanLII 14416 (BC IPC).

I confirm that neither I, nor anyone else with access to the system, can change Archived Dispense Records. This technical limitation was purposefully put in place because the removal of Archived Dispense Records would result in a data hole that would compromise PharmaNet integrity. Dispense data is linked to claims data, and removal of dispense data compromises claims data. So, the system was designed to prevent removal of data linked to claims.³⁵

[73] With respect to its decision to archive all records older than 14 months, the Operations Manager explains that the Ministry chose a 14-month window to divide active and archived profile information because without this temporal limit, the active profile database would become too large to allow PharmaNet to adjudicate claims and respond to queries in real-time.

[74] Second, the Ministry submits that it has complied with s. 29(2) by adding a new entry (Note) to the complainant's PharmaNet profile on June 16, 2025, which reads:

REMOVAL OF ADAPTED RX [prescription number] 15NOV18 FOR DOG DENIED

[75] The Ministry acknowledges that the Note contains “relatively limited details,” but explains that the reason for this is that PharmaNet contains only one free text field available to the Ministry which has a strict 56-character limit. The Ministry explains that the Note contains sufficient information to: identify the prescription number and date and to make clear that the prescription was for a dog, was changed by the pharmacist, and that the complainant's request to remove the Entry was denied. The Ministry submits that in the circumstances, the Note is reasonable and fulfills the Ministry's obligations under s. 29(2). The Ministry also submits that the Letter it provided to the complainant on September 16, 2024, confirming that the prescription was in fact dispensed for a dog and not the complainant goes above and beyond what is required of it.

[76] The complainant asserts that any limitations on the Ministry's ability to change and therefore correct archived records were decisions the Ministry made, and that as a result, these constraints should not absolve the Ministry of its obligation to ensure the accuracy and completeness of all the information in PharmaNet. The complainant also submits that it is unreasonable to place the burden of systemic or pharmacist errors on patients, particularly when those errors create a risk of harm. The complainant also says that as a digital system, PharmaNet can and should evolve to accommodate basic corrections like the obvious error at issue in this inquiry.

³⁵ Affidavit of Operations Manager at para 22.

[77] The complainant rejects the Ministry's submission that it has already complied with s. 29(2). Explaining that the Note is a separate PharmaNet entry, separated from the Entry by 6.5 years, and that there is no mechanism to connect the two, the complainant submits that the Note does not serve the purpose of or satisfy the requirements of s. 29(2). In this regard, the complainant emphasizes that the Note would only be visible to someone seeing the Entry if the date range that was disclosed to them included the both the date of the Entry and the date the Note was created (and thus spanned at least 6.5 years).

Findings and analysis

[78] The Ministry's Operations Manager deposes that the Entry cannot be removed or altered because it is not possible to alter archived records in PharmaNet. The complainant does not challenge the accuracy of the manager's evidence. In their affidavit, the Operations Manager details their work history and extensive responsibilities in respect of the PharmaNet system. I accept the Operations Manager's evidence that because of how the PharmaNet system is designed, the Ministry cannot remove or alter the Entry. I will not order the Ministry to take an action that it cannot take.

[79] I understand the complainant's frustration that the Ministry designed a system that does not allow it to remove or alter inaccurate personal information once that information has been in the system for 14 months. However, s. 29 is concerned with correcting personal information, not correcting the system that holds that information. I will not order the Ministry to change the PharmaNet system as a whole to enable it to correct the Entry.

[80] I am not, however, persuaded that the steps the Ministry has taken to date are sufficient to correct the Entry. While the Letter clearly explains the nature of the error, it is not connected to the Entry or the complainant's PharmaNet profile. A correction within in the meaning of s. 29 must somehow attach to the information at issue.³⁶

[81] There are two problems with the Note. First, it is not attached to the Entry in the sense that there is no mechanism in place to ensure that someone who sees the Entry will also see or even have access to the Note. Second, it fails to clearly explain the nature of the error to a lay reader. In this second regard, I recognize that the Ministry made an effort to communicate a lot of information within the 56 character limit available for a PharmaNet entry. However, without an accompanying explanation like the one the Ministry provided in its inquiry submission, it is my view that the Note is unlikely to be understood by a lay person. The words "REMOVAL OF ADAPTED RX [prescription number] 15NOV18 FOR DOG DENIED" simply do not clearly communicate that the

³⁶ See para 67 above and the cases discussed therein.

complainant's dog's prescription was miscategorized under the complainant's personal medical history.

[82] While a correction need not be perfect, it should suit its purpose. In this case that purpose is to correct the error in the Entry. Neither the Letter nor the Note do that. For this reason, I find that it is appropriate to make an order specifying how the Entry is to be corrected.

[83] A correction should, as best as possible given the limitations of the PharmaNet system, make clear to anyone who may view the Entry that it relates to a veterinary prescription, not the complainant's own medical history. The Operations Manager's evidence is that because the Entry is now archived, it can no longer be viewed by pharmacists and other practitioners with access to PharmaNet, and that it is only available to third parties to whom it may be disclosed either with the complainant's consent or by operation of law or court order. I accept this evidence. I find that those who may view the Entry are the third parties to whom the complainant's PharmaNet profile has been or may be disclosed in the future.

[84] In all of the circumstances, I find that the following remedies are appropriate.

[85] If the Ministry discloses the Entry to a third party in the future, I require the Ministry to send the Letter together (in the same communication) with the Entry. As noted above, the Letter clearly explains that the Entry is a veterinary prescription and why it remains in the complainant's own medical history. Therefore, ensuring the Letter is sent with the Entry is a way of showing and fixing what is wrong with the information for a future reader, and ensuring as best as possible that the correct information is attached to the Entry.³⁷ Given the limitations of the PharmaNet system, the limited uses of archived PharmaNet profile information, and some of the concerns identified by the complainant, I find that this is an appropriate way to the Entry.

[86] As it is the Ministry who knows its own procedures, capabilities, and limitations, I leave it in the Ministry's hands to decide what procedures it must put in place to ensure it complies with this part of my order.

[87] In addition, so there is a permanent record of the correction in the complainant's PharmaNet profile and to correct any confusion that may arise as a result of the Note, I require the Ministry to add the following two entries to the complainant's PharmaNet Profile:

³⁷ See the definitions of "correct" in paras 66-69 above.

RX [prescription number] 15Nov2018 is a vet prescription for PTs dog
RX [prescription number] cannot be corrected. See ltr of 9/16/2024

[88] I redacted the prescription number from the above to avoid publishing identifying information about the complainant, but the Ministry is required to replace “[prescription number]” in both entries with the seven digit number associated with the Entry. I recognize that, like the Note, these corrections will be separated from the Entry. However, given the limitations PharmaNet system, this approach seems to me to be the only way to ensure that a permanent record of the correction is included in the complainant’s PharmaNet profile.

OBLIGATION TO NOTIFY – S. 29(3)

[89] The third issue is whether the Ministry is required to notify any other public body or any third party to whom that information was disclosed during the one year period before the correction was requested in compliance of s. 29(3) of FIPPA.

[90] The complainant requested that the Ministry correct the Entry on December 5, 2023, so the question is whether the Ministry disclosed the Entry to any third party between December 5, 2022 and December 5, 2023.

[91] The Ministry says that it has not disclosed the Entry to any third party.

[92] While the complainant says that their PharmaNet records “are broadly accessible to a plethora of parties,” and that “WorkSafeBC ... has analyzed data from PharmaNet to adjudicate [their] coverage entitlements,”³⁸ they do not take issue with the Ministry’s statement that it has not disclosed the Entry to any third party, or say that the Ministry disclosed the Entry to WorkSafeBC.

[93] While the complainant’s submission suggests that WorkSafeBC acquired and used some part of their PharmaNet profile to determine their coverage entitlements, the complainant does not assert that it was the Ministry who disclosed their PharmaNet profile to WorkSafeBC or that the information WorkSafeBC used included the Entry. It is not clear to me from the complainant’s submission whether or how WorkSafeBC obtained the Entry. Absent any evidence or direct submission from the complainant to contradict the Ministry’s clear statement that it has not disclosed the Entry to any third party, I accept the Ministry’s statement.

[94] Accordingly, I find that the Ministry did not disclose the Entry to any third party during the one year period before the complainant requested that the Ministry correct the Entry. As a result, I find that the Ministry’s obligation under s. 29(3) is not triggered.

³⁸ Complainant’s response submission at p 1. For full excerpts, see para 34 above.

CONCLUSION

[95] For the reasons given above, under ss. 58(3)(a) and (d) and 58(4) of the FIPPA, I make the following orders:

1. I find that on November 15, 2018 the Ministry had not complied with s. 28.
2. I confirm that the Ministry has now performed its duty to comply with s. 28.
3. I find that the Ministry has not complied with s. 29.
4. If the Ministry discloses the Entry to a third party in the future, I require the Ministry to send the Letter together with the records containing the Entry to that third party.
5. I require the Ministry to put in place procedures to ensure it complies with item 4, and to keep these procedures in place for as long as it retains the Entry.
6. I require the Ministry to add the two entries below to the complainant's PharmaNet Profile:

RX [prescription number] 15Nov2018 is a vet prescription for PTs dog

RX [prescription number] cannot be corrected. See ltr of 9/16/2024

7. I require the Ministry to replace “[prescription number]” in the entries described in item 6 with the seven digit prescription number associated with the Entry.

[96] Pursuant to s. 59(1) of FIPPA, I require the Ministry to comply with this order by December 3, 2025.

October 22, 2025

ORIGINAL SIGNED BY

Allison J. Shamas, Adjudicator

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