



Order F26-39

PROVINCIAL HEALTH SERVICES AUTHORITY

Rene Kimmett
Adjudicator

May 13, 2026

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Summary: Under the *Freedom of Information and Protection of Privacy Act* (FIPPA), an individual (applicant) asked the Provincial Health Services Authority (PHSA) for access to information related to the healthcare he received while in pretrial detention. The PHSA withheld some information under s. 19(1)(a) (harm to individual or public safety). The adjudicator found the PHSA was authorized to refuse access to most of the information in dispute but ordered the PHSA to give the applicant access to the information it was not authorized to withhold under s. 19(1)(a).

Statutes Considered: *Freedom of Information and Protection of Privacy Act*, RSBC 1996, c. 165, s. 19(1)(a).

INTRODUCTION

[1] Under the *Freedom of Information and Protection of Privacy Act* (FIPPA), an individual (applicant) asked the Provincial Health Services Authority (PHSA) for access to information related to the healthcare he received while in pretrial detention.

[2] The PHSA gave the applicant access to responsive records but withheld some information from them under ss. 15(2)(c) (harm to custody or supervision), 19(1)(a) (harm to individual or public safety), and 22(1) (unreasonable invasion of third-party personal privacy).

[3] The applicant asked the Office of the Information and Privacy Commissioner (OIPC) to review the PHSA's decision to withhold information from the responsive records.

[4] The PHSA then reconsidered the severing it applied to the records and withdrew its reliance on ss. 15(2)(c) and 22(1).

[5] OIPC-led mediation did not resolve the entire dispute, and it proceeded to this inquiry.

ISSUE AND BURDEN OF PROOF

[6] The issue I must decide in this inquiry is whether the PHSA is authorized to withhold the information in dispute under s. 19(1)(a).

[7] The PHSA has the burden to prove that the applicant has no right of access to the information withheld under s. 19(1)(a).¹

DISCUSSION

Background

[8] The PHSA operates a program called Correctional Health Services through which it provides health services to people held in provincial correctional centres operated by BC Corrections, including North Fraser Pre-trial Centre (North Fraser). The applicant was previously detained at North Fraser and received medical care from Correctional Health Services.

Records at issue

[9] The records in dispute total 71 pages and are the applicant's health records from when he was in custody at North Fraser. The only information remaining in dispute is the last names of many of the individuals identified in the records, including Correctional Health Services employees and one Correctional Officer.

Section 19(1)(a) – threat to individual safety or mental or physical health

[10] Section 19(1)(a) says that the head of a public body may refuse to disclose information, including personal information about the applicant, if the disclosure could reasonably be expected to threaten anyone else's safety or mental or physical health.

Standard of proof

[11] Section 19(1)(a) is about preventing the harm that could reasonably be expected to result if the information in dispute were disclosed. The Supreme Court of Canada has held that where the phrase "could reasonably be expected

¹ FIPPA, s. 57(1).

to” is used in access to information statutes, the standard of proof is a middle ground between that which is merely possible and that which is probable.

[12] The party with the burden of proof must provide evidence which goes well beyond or considerably above establishing a mere possibility of harm in order to reach that middle ground.² They must establish a clear and direct connection between the disclosure of the withheld information and the anticipated harm.³ The amount and quality of the evidence required will vary depending on the nature of the issue and the “inherent probabilities or improbabilities or the seriousness of the allegations or consequences”.⁴

Ministry’s position

[13] The Ministry has withheld the last name of a Correctional Officer employed by BC Corrections,⁵ and Correctional Health Services employees with the following titles:

- Access to Information Analyst
- Clerk
- Medical Office Assistant
- Registered Nurse
- Client Care Coordinator
- Licenced Practical Nurse
- Mental Health and Addictions Supervisor
- Concurrent Disorders Counsellor
- Mental Health Screener

[14] The PHSA submits it disclosed the first and last names of the physicians in the records because:

physicians generally introduce and refer to themselves to patients by last name. PHSA’s assessment was that the Applicant is very likely already aware of the last name and identity of the physicians who treated him, for example through prescriptions or doctors’ orders, or that such information can be easily discovered. Further, the BC College of Physicians and Surgeons imposes certain requirements that physicians identify themselves as licensed physicians.⁶

² *Merck Frosst Canada Ltd. v. Canada (Health)*, 2012 SCC 3 (CanLII) at para 201 [*Merck Frosst*]

³ Order 02-50, 2002 CanLII 42486 (BC IPC) at para 137; Order F13-06, 2013 BCIPC 6 (CanLII) at para 24.

⁴ *Ontario (Community Safety and Correctional Services) v. Ontario (Information and Privacy Commissioner)*, 2014 SCC 31 at para 54, citing *Merck Frosst*, *supra* note 2 at paras 94 and 195-206. See also Order F08-02, 2008 CanLII 70316 (BC IPC) at para 48.

⁵ PHSA’s reply submission at para 4.

⁶ PHSA’s reply submission at para 5.

[15] The PHSA further submits that disclosure under FIPPA is disclosure to the world because FIPPA does not include any restrictions on how an applicant may use or disseminate information that is received in response to an access request.⁷

[16] The PHSA also submits that its evidence demonstrates that Correctional Health Services employees:

- face high incidence of risk to their physical safety in the form of violent attacks, threats, bullying, harassment and verbal abuse, and
- contend with physical and emotional harms arising from their interactions with patients in custody, including anxieties and fears that they or their family members will be targeted within the community.

[17] It further submits that disclosure of the employees' names increases the risk of physical harm to the employees and can reasonably be expected to cause or exacerbate their existing fears and anxieties or cause additional harm to their mental health.⁸ On this point, the PHSA submits:

Clearly releasing the full names of [Correctional Health Services] employees in the context of inmate health care records provides [inmates] (or their friends or contacts) with information that they would require and can use later to locate and threaten or harm those employees. While disclosure of an individual employee's surname is not information that, on its own, necessarily creates a risk of harm, a person's full name can be used to conduct online or social media searches in order to ascertain their whereabouts, activities and to identify their friends and family. It can also be used to engage in online bullying and other threatening behaviours.

[18] To support its position, the PHSA has provided extensive evidence from its Workplace Safety & Prevention Director, its Occupational Health and Safety Manager, and Risk Management Director. This evidence provides statistics and examples of inmates at correctional centres physically harming or threatening to harm Correctional Health Services employees at work and in the community. The PHSA provided the following examples of prior threats against health care workers:

- an inmate making intimidating remarks to a health care worker while using the worker's first name, threatening this individual and her children, and sexually harassing her over many months.

⁷ PHSA's initial submission at para 21.

⁸ *Ibid* at para 20.

- an inmate successfully locating a health care provider in the community and threatening to kill them after being released from custody.
- an inmate making an access request for copies of his health records and becoming angry about what he read in his chart, which resulted in significant concerns for the psychiatrist that treated this inmate.
- an inmate threatening to have a physician followed and killed.⁹
- inmates telling staff they can see when they arrive and leave from work and know which vehicles are theirs, which raised concerns about these inmates locating staff once released to vandalise these staff members' property or harm them or their families.
- an inmate engaging in a pattern of violence against the health care workers that dispensed his medication, including one incident in which he was found with a weapon.¹⁰
- since 2018, 151 reports of violent incidents involving Correctional Health Services workers across all provincial correctional centres.
- reports of health care workers, who have been involved in violent incidents within provincial correctional centres, experiencing lasting mental distress, which, in some cases, has resulted in these employees taking leave or seeking medical and psychological supports.¹¹

Applicant's position

[19] The applicant submits that, while the PHSA's asserted harms describe real concerns associated with working in a custodial environment, these harms are not disclosure-specific harms for the purposes of s. 19(1)(a). The applicant submits that instead these harms either reflect existing occupational risks or are speculative.¹²

[20] The applicant submits that the PHSA's affidavit evidence establishes an important contextual reality: custodial healthcare environments are challenging

⁹ Risk Management Director's affidavit at paras 23-28.

¹⁰ Occupational Health and Safety Manager's affidavit at paras 7-8.

¹¹ Workplace Safety & Prevention Director's affidavit at paras 8-9.

¹² Applicant's submission at paras 23-25.

and may result in employees facing elevated risks of stress, threats, and violence. He submits, however, that the evidence does not describe direct harm that could arise from disclosure of staff names in the applicant's health records.¹³ He also says the PHSA is arguing that disclosure of names could enable identification, which could lead to threats or violence against Correctional Health Services staff members or their families, but has not provided evidence that this outcome could reasonably be expected to occur as a result of the disclosure he is seeking.¹⁴

[21] The applicant notes that the PHSA has disclosed the names of the physicians that appear in the records but has not provided evidence that this disclosure has resulted in threats, violence, or any other harm to these individuals.¹⁵

[22] The applicant submits that accepting the PHSA's position would effectively permit the routine withholding of healthcare provider identities in custodial medical records based on generalized institutional risk, thereby denying applicants in custody access to information in their own health records.¹⁶

Analysis

Would disclosure reveal any new information?

[23] I must first consider whether disclosing the withheld names would reveal any information not already known or readily accessible to the inmate population from whom the potential harms alleged by the PHSA flow.

[24] To start, correctional officers are required by law to wear a name tag that identifies them.¹⁷ The PHSA submits it understands correctional officers wear name badges that identify them by last name.¹⁸ The records only include the Correctional Officer's last name.

[25] Based on the above, I conclude, on a balance of probabilities, that the last name of the Correctional Officer that appears in the records is already known to the inmates with whom this person works and any other person whom they encounter while at work. Since correctional officers' last names are already widely available, I find that disclosing the Correctional Officer's last name, where it appears in the records, would not reveal any new information and, therefore, could not reasonably be expected to threaten anyone's safety or mental or physical health under s. 19(1)(a).

¹³ *Ibid* at paras 28-29.

¹⁴ *Ibid* at para 39.

¹⁵ *Ibid* at paras 45-46.

¹⁶ *Ibid* at para 51.

¹⁷ Corrections Act Regulation, B.C. Reg. 58/2005, s. 6.

¹⁸ PHSA emails to OIPC and applicant dated May 6, 2026 and May 12, 2026.

[26] I asked the PHSA whether any of the Correctional Health Services employees named in the records are expected to wear name tags while at work. PHSA provided evidence from its Information Access Manager, who consulted with its Health Services Manager and its Risk Management Specialist. The Information Access Manager states that they have been informed, and they believe, that there is no expectation that Correctional Health Services employees at North Fraser wear name tags and it is not the practice at the facility that they do so.¹⁹

[27] I also note there is no evidence before me that the full names of the non-physician Correctional Health Services employees can be searched in a publicly accessible registry using only their first names.

[28] For the above reasons, I conclude that releasing the last names of the Correctional Health Services employees that appear in the records would reveal personal identifying information about these individuals that is not already known or readily accessible to the inmate population at North Fraser or the public more broadly.

Could disclosure reasonably be expected to threaten third-party safety or physical or mental health?

[29] Next, I must consider whether disclosing the withheld Correctional Health Services employees' names could reasonably be expected to threaten a third party's safety or physical or mental health. For the reasons below, I find the PHSA has established that disclosure could reasonably be expected to threaten third parties' mental health. Given this, I do not need to consider whether disclosure could also impact anyone's safety or physical health, and I decline to do so.

[30] Previous orders have found that, for s. 19(1)(a) to apply, a public body must establish disclosure could reasonably be expected to result in a third party experiencing serious mental distress or anguish.²⁰ It is not sufficient for a public body to establish that disclosure could reasonably be expected to result in a third party feeling upset, inconvenienced, or unpleasant.

[31] I accept the PHSA's evidence that violence and threats against Correctional Health Services employees are real and ongoing issues and have had lasting and significant consequences for certain employees in the past. I also accept that these kinds of incidents are common enough that even Correctional Health Services employees who have not been previously subjected to them are likely to be aware of and concerned about such incidents.

¹⁹ Information Access Manager's affidavit #2 at para 4.

²⁰ Order F20-03, 2020 BCIPC 3 (CanLII) at para 21.

[32] Based on these findings, I conclude it is reasonable to expect that the Correctional Health Services employees named in the records and their loved ones would perceive an increased risk to their own health and safety as a direct result of the disclosure sought in this case. I also find that it is reasonable to expect that, in at least some cases, this increased perception of risk would do serious harm to the mental health of those individuals. On this basis, I find the PHSA is authorized to withhold the Correctional Health Services employees' last names under s. 19(1)(a).

[33] I note that the PHSA has not provided evidence about risk factors related to any specific individual and instead has asked me to find, based on its general evidence regarding high rates of violence and threats of violence associated with correctional centres, that disclosure of the withheld names could reasonably be expected to seriously threaten the mental health of the named individuals or their loved ones.

[34] While I would have preferred direct evidence from the potentially impacted individuals, I find that the absence of this kind of evidence is not, in this case, detrimental to the PHSA's position under s. 19(1)(a). The PHSA's evidence here is consistent with the approach taken by other public bodies in previous OIPC orders.

[35] Specifically, in Order F24-37,²¹ Order F20-03,²² and Order F20-54,²³ OIPC adjudicators found that public bodies were authorized to withhold the names of BC Hydro employees associated with the Site C dam on the basis that disclosure of their names could reasonably be expected to threaten these employees' mental health. In these files, BC Hydro did not provide evidence specifically about the individuals named in the records. Instead, the adjudicators relied on evidence that serious incidents of violence and threats connected to Site C had taken place over many years and that BC Hydro employees overall felt vulnerable, apprehensive, and threatened as a result of that violence.²⁴ The adjudicators concluded, as I have here, that s. 19(1)(a) applied to the withheld information.

Conclusion

[36] For the reasons above, I find the PHSA is authorized, under s. 19(1)(a), to withhold the last names of the Correctional Health Services employees but is not authorized to withhold the Correctional Officer's last name.

²¹ Order F24-37, 2024 BCIPC 45 (CanLII).

²² Order F20-03, 2020 BCIPC 3 (CanLII).

²³ Order F20-54, 2020 BCIPC 63 (CanLII).

²⁴ Order F24-37, 2024 BCIPC 45 (CanLII) at paras 181, 182, and 193.

CONCLUSION

[37] For the reasons given above, I make the following order under s. 58 of FIPPA:

1. Subject to item #2 below, I confirm the PHSA's decision to refuse access to the information in dispute under s. 19(1)(a).
2. The PHSA must give the applicant access to the information I have found it is not authorized to withhold under s. 19(1)(a). This information appears on pages 7 and 10 of the records package.
3. The PHSA must provide the OIPC registrar of inquiries with a copy of the cover letter and records it sends to the applicant in compliance with this order.

[38] Pursuant to s. 59(1) of FIPPA, the PHSA is required to comply with this order by **June 25, 2026**.

May 13, 2026

ORIGINAL SIGNED BY

Rene Kimmett, Adjudicator

OIPC File No.: F24-95611