



Order F26-44

## VANCOUVER COASTAL HEALTH AUTHORITY

Alexander Corley  
Adjudicator

June 3, 2026

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Quicklaw Cite: [2026] B.C.I.P.C.D. No. 56

**Summary:** An individual (applicant) requested that the public body provide them with all their own personal information in the public body's custody and control and collected within a specific date range, under the *Freedom of Information and Protection of Privacy Act* (FIPPA). The adjudicator found that all the applicant's personal information in dispute was also the personal information of a third party and that disclosing much of that information to the applicant would unreasonably invade the personal privacy of that third party. Therefore, the adjudicator ordered the public body to withhold most of the information in dispute under s. 22(1) of FIPPA but to release the balance of the information in dispute to the applicant.

**Statutes Considered:** *Freedom of Information and Protection of Privacy Act* [RSBC 1996, c. 165] at ss. 6(1), 22(1), 22(2)(a), 22(2)(c), 22(2)(f), 22(2)(g), 22(2)(i), 22(3)(a), 22(3)(d), 22(3)(f), 22(4)(a), 22(4)(e), 22(5), 23, 25(1)(b), and 29.

### INTRODUCTION

[1] An individual (applicant) requested under the *Freedom of Information and Protection of Privacy Act* (FIPPA)<sup>1</sup> that Providence Health Care (Providence) provide the applicant with all the applicant's own personal information collected by Providence between December 1, 2018, and March 30, 2019.

[2] Providence acknowledged and responded to the applicant's access request but advised the applicant that it would be withholding the entirety of the records containing the requested information under s. 22(1) (unreasonable invasion of privacy) of FIPPA. The applicant contacted the Office of the Information and Privacy Commissioner for British Columbia (OIPC) and

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<sup>1</sup> RSBC 1996, c 165. Through the remainder of this order all references to sections of an enactment are references to FIPPA unless otherwise stated.

requested a review of Providence’s decision to withhold the requested information.

[3] Mediation by the OIPC did not resolve the issues between the parties, and the applicant requested that the matter proceed to this inquiry. Both parties provided submissions, and the applicant provided extensive supporting documentation.

### ***Preliminary Matters***

#### **Who is the appropriate public body?**

[4] Providence is a “society” incorporated under the *Societies Act*<sup>2</sup> and not a “public body” under FIPPA schedule 2. However, the inquiry submissions clarify that Providence acts as a contracted healthcare service provider for the Vancouver Coastal Health Authority (Coastal Health), which is a “public body.”<sup>3</sup>

[5] While there seems to have been some initial confusion regarding the appropriate public body to make a submission in this inquiry (including a Notice of Inquiry being mistakenly sent to a health authority other than Coastal Health),<sup>4</sup> I find there is no longer any live dispute regarding this issue between the parties because the parties agree that the records are in Coastal Health’s custody and under its control. As such, I find that Coastal Health is the public body relevant to this inquiry and will proceed on that basis.

#### **Applicant’s “public interest” and “adequate search” arguments**

[6] In their inquiry submission, the applicant says that there may be a “public interest” in disclosing at least some of the information in dispute. I find this line of reasoning by the applicant raises s. 25(1)(b), which requires public bodies to disclose information when disclosure is clearly in the public interest.

[7] The applicant also alleges that Coastal Health may have additional responsive records in its custody or under its control beyond what it has placed before me for consideration. While the applicant does not frame their concern in these terms, I take the applicant to be raising the issue of whether Coastal Health complied with its duty under s. 6(1) to assist the applicant.

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<sup>2</sup> SBC 2015, c 18.

<sup>3</sup> Coastal Health’s initial submission at paras. 2-3. As FIPPA’s definition of “employee” expressly includes “service providers” I have treated Providence’s employees as employees of Coastal Health throughout this order, where relevant.

<sup>4</sup> The applicant raises concerns about their inquiry submission or communications with the OIPC being shared with this other, non-party, health authority. However, the applicant does not provide sufficient evidence substantiating these concerns and I see nothing in the record before me that leads me to conclude that such sharing occurred.

[8] Neither ss. 6(1) nor 25(1)(b) were listed as an issue in the Investigator's Fact Report or the Notice of Inquiry. Prior OIPC orders are clear that in the absence of extraordinary circumstances, a party may not raise a new issue at the inquiry stage without the express permission of the OIPC.<sup>5</sup>

[9] There is no indication in the materials before me that the applicant sought the OIPC's permission to add ss. 6(1) and 25(1)(b) as issues in this inquiry. I also do not see the kind of extraordinary circumstances in this case that would warrant adding new issues at this late stage. Concerning s. 6(1), I also note that it is preferable that the OIPC have an opportunity to investigate and mediate a s. 6(1) complaint before deciding whether the complaint warrants being sent to inquiry. Taking all of this together, I decline to consider the applicant's s. 6(1) complaint or whether s. 25(1)(b) applies to the information in dispute.<sup>6</sup>

### **Applicant's complaints against non-parties**

[10] Throughout their submission the applicant references, what they say, is prior mistreatment and other misconduct by public bodies, organizations, and third parties other than Coastal Health. The applicant also makes veiled allegations that Coastal Health and these other public bodies, organizations, or third parties may have colluded or conspired against the applicant.

[11] While I have read everything the applicant says in this regard, I find most of it is not relevant to the FIPPA issues I must decide in this inquiry. I also find the applicant has not clearly explained how the misconduct they allege, even if substantiated, would be independently relevant to this matter.

[12] Therefore, I will not consider or reference the applicant's submissions about other public bodies, organizations, or third parties in my decision below unless those submissions are directly relevant to the issues before me.<sup>7</sup>

### **ISSUE**

[13] The only issue I must decide in this inquiry is whether Coastal Health must withhold the information in dispute under s. 22(1).

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<sup>5</sup> See, for example, Order F12-07, 2012 BCIPC 10 at para. 6 and Order F10-37, 2010 BCIPC 55 at para. 10.

<sup>6</sup> However, I will consider the applicant's arguments regarding potential public interest in disclosing the information in dispute where those arguments may be relevant to my analysis of the sections of FIPPA which are properly in issue in this inquiry.

<sup>7</sup> Specifically, I find that the applicant's allegations of public body misconduct and collusion, if substantiated, could be relevant to my analysis under s. 22(2)(a) (disclosure desirable for public body accountability) and have considered them below where I examine the relevance of that section to the information in dispute.

[14] Section 57(2) says the burden is on the applicant to prove that releasing the information in dispute would not be an unreasonable invasion of third-party personal privacy. However, Coastal Health bears the initial burden of demonstrating that the information it has withheld under s. 22(1) meets the definition of “personal information” under FIPPA.<sup>8</sup>

## DISCUSSION

### *Background*

[15] The parties provide little agreed-upon background information.<sup>9</sup> Suffice it to say that at some point in early 2019 an individual that was receiving care at a facility run by Providence on behalf of Coastal Health passed away (the “deceased”). The deceased was known to the applicant and the applicant had contact with the deceased’s care providers during the time covered in the access request.

### *Information in dispute*<sup>10</sup>

[16] The records identified by Coastal Health as responsive to the access request are:

1. 11 pages of healthcare charting drafted by members of the deceased’s healthcare team during the period specified in the access request (healthcare records); and,
2. A two-page email chain between members of the deceased’s healthcare team and third parties acting on behalf of the deceased sent and received during the period specified in the access request.

[17] From the content of the access request and the applicant’s inquiry submission it is clear to me that the applicant is only seeking to access their own personal information and not any information that is solely the personal information of third parties or is otherwise unrelated to the applicant.

[18] From my review of the disputed records, I find that information responsive to the applicant’s access request is found on pages 7, 9, and 10 of the healthcare

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<sup>8</sup> See Order F23-49, 2023 BCIPC 57 at para. 5 and note 1, citing Order 03-41, 2003 CanLII 49220 (BC IPC) at paras. 9-11.

<sup>9</sup> I find that much of the historical or “background” information provided by the applicant is contested by Coastal Health, so I have not included it here.

<sup>10</sup> The applicant accuses Coastal Health of “increasing” the number of records at issue in the inquiry and further erring by not providing a fulsome table of records alongside its inquiry submission. While I have read what the applicant says about these issues, I find the applicant has not established that Coastal Health was required to provide them with a table of records. I also find that what the applicant says about Coastal Health “increasing” the number of records at issue in this inquiry is based on a misunderstanding and that Coastal Health has adequately explained this matter in its inquiry submission.

records and in the first email in the above-mentioned email chain (email). Therefore, I will only consider below whether Coastal Health is required to withhold the applicant's own personal information on those pages of the healthcare records and in the email.

### **Section 22(1) – unreasonable invasion of privacy**

[19] Section 22(1) requires a public body to refuse to disclose personal information if disclosure would be an unreasonable invasion of a third party's personal privacy. As noted above, Coastal Health has withheld all the information in dispute under s. 22(1).

#### **Personal information**

[20] Since s. 22(1) only applies to personal information, the first step in the analysis is to determine whether the information in dispute is personal information.

[21] Under schedule 1 of FIPPA,

“personal information” means recorded information about an identifiable individual other than contact information; [and]

“contact information” means information to enable an individual at a place of business to be contacted and includes the name, position name or title, business telephone number, business address, business email or business fax number of the individual[.]

[22] Therefore, “contact information” is not “personal information” under FIPPA. Whether information is contact information is context dependent.<sup>11</sup>

[23] Neither party addresses whether any of the information in dispute is “contact information” and I do not see that any of it is because none of it was provided to Coastal Health solely to enable anyone to be contacted at a place of business.

[24] Coastal Health admits that the information in dispute is the applicant's personal information but says this information is interwoven with the personal information of the deceased and other third parties, including members of the deceased's healthcare team. Therefore, Coastal Health says all the information in dispute is third party personal information for purposes of s. 22(1).

[25] The applicant questions whether their personal information is interwoven with third party personal information. Specifically, the applicant seems to argue that the deceased's healthcare team, as public body employees, do not meet the

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<sup>11</sup> Order F20-13, 2020 BCIPC 15 at para. 42.

definition of “third party” under FIPPA. The applicant does not directly address Coastal Health’s submission that the applicant’s personal information is interwoven with the deceased’s personal information except to say that any such interwoven information is already known to the applicant and ought to be released on that basis.

[26] When I consider “all relevant circumstances” at the fourth stage of the s. 22 analysis, below, I will address the applicant’s argument regarding their pre-existing knowledge of any of their personal information that is interwoven with the deceased’s personal information.

[27] Turning to the applicant’s submission that public body employees are not third parties under s. 22(1), I find it is not well founded. Many prior orders have held that information about public body employees constitutes third party personal information under FIPPA, even where the relevant public body employer is a party to the inquiry.<sup>12</sup> Moreover, s. 22(4)(e) contemplates circumstances where a public body may be required to disclose the personal information of its employees. That section would serve no purpose if public body employees were not third parties for purposes of s. 22(1) in at least some cases. Given this, I reject what the applicant says in this regard and will not consider it further.

[28] Examining the information in dispute and what the parties say about it, I find that all of it is the applicant’s personal information. Further, it is clear to me that all of it is also the personal information of third parties, namely the deceased, the deceased’s healthcare team, or other third parties, as the case may be.

[29] Specifically, I find that all of the applicant’s personal information in dispute is also information “about” the deceased because it is contained in the deceased’s healthcare records or in the email which I find is a communication that was made in furtherance of the deceased’s interests and references the deceased. I find some of the applicant’s personal information in dispute is also about members of the deceased’s healthcare team because it would reveal information about the applicant that was provided to them by others, actions they took in relation to the applicant, and the days and times they documented their interactions with the applicant or discussed those interactions with others. I find the information is, in a few cases, also about other third parties because it reveals things those third parties said or did, the opinions of others, including the applicant, about those third parties, or those third parties’ own opinions about the applicant.<sup>13</sup>

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<sup>12</sup> See, for example, Order F24-41, 2024 BCIPC 49 at para. 46.

<sup>13</sup> A person’s opinion is their personal information. In addition, a person’s opinion about another person is, depending on the substance of the opinion, the personal information of both the opinion holder and the subject of the opinion: see Order F24-41, *ibid* at para. 47.

[30] Given this, I will move on to consider whether disclosing any of the applicant's personal information in dispute would unreasonably invade the personal privacy of any of the third parties referenced above.

### **Section 22(4) – not an unreasonable invasion**

[31] Section 22(4) lists circumstances where disclosing personal information is not an unreasonable invasion of third-party personal privacy. If s. 22(4) applies to personal information, Coastal Health cannot withhold that information under s. 22(1).

[32] Coastal Health says none of the circumstances set out in s. 22(4) applies in this case. The applicant raises ss. 22(4)(e) and says it applies to some of the personal information in dispute. Further, while they do not say so directly, the applicant makes some arguments which invoke s. 22(4)(a), so I will consider both ss. 22(4)(a) and (e) below.

### Section 22(4)(a) – written consent to disclosure

[33] This section says that disclosing a third party's personal information is not an unreasonable invasion of the third party's personal privacy if the third party has consented, in writing, to the disclosure.

[34] The applicant does not raise s. 22(4)(a) directly but does make two arguments which I find, when read together, invoke the potential application of this section.

[35] First, the applicant invokes FIPPA Division 3 (notice to third parties) and implies that Coastal Health should have asked whether the third parties whose personal information is at issue (or their representatives) consented to Coastal Health disclosing that information to the applicant under s. 23.

[36] Second, the applicant invokes what they refer to as a "duty of candour [which] cuts across professions." The applicant implies that compliance with this duty would obligate the members of the deceased's healthcare team whose personal information is contained in the records to consent to disclosure if Coastal Health had asked them for their consent.

[37] In reply to these arguments, Coastal Health says that even if the duty of professional candour is relevant in this case, it is not clear that the conflict between that duty and the healthcare providers' duty of confidentiality to the deceased would be resolved in favour of candour. Furthermore, it says the duty of candour relevant to healthcare providers is a duty owed to their patients and not to disconnected third parties like the applicant.

[38] I am not persuaded by the applicant’s submission that Coastal Health was required by s. 23 to ask the third parties whether they consented to the release of their personal information. Section 23(2) granted Coastal Health discretion on this point because Coastal Health had decided it must withhold the disputed personal information in full. In the absence of any evidence or clear argument from the applicant that Coastal Health exercised its discretion improperly in this case, I find Coastal Health’s decision not to notify the deceased’s healthcare team under s. 23 is not relevant to the s. 22(1) analysis I am undertaking here.<sup>14</sup>

[39] Turning back to s. 22(4)(a), prior orders have found that section does not independently require a public body to seek out consent for the disclosure.<sup>15</sup> I agree with this interpretation as the section seems more relevant, to me, where an applicant adduces positive evidence of third party consent as a counterweight to a public body’s position under s. 22(1) that disclosure would be an unreasonable invasion of privacy.

[40] Here, the applicant has not shown that any of the relevant third parties consented, in writing, to the release of their personal information and therefore I find s. 22(4)(a) is clearly not applicable to the personal information in dispute.

#### Section 22(4)(e) – positions and functions of public body employees

[41] The applicant says that s. 22(4)(e) applies to some of the personal information in dispute because it is likely to be “work product information” as that term is defined in the *Personal Information Protection Act* (PIPA)<sup>16</sup> and would be released to the applicant had they requested it under that statute. Coastal Health does not address the applicant’s arguments regarding s. 22(4)(e).

[42] Section 22(4)(e) says that disclosure of personal information is not an unreasonable invasion of a third party’s personal privacy if the information is about the third party’s position, functions, or remuneration as an officer, employee, or member of a public body or as a member of a minister’s staff.

[43] Numerous prior OIPC orders have considered the meaning and scope of s. 22(4)(e). Key principles are that s. 22(4)(e) applies to information that reveals a public body employee’s name, signature, job title, duties, functions, remuneration (including salary and benefits) or position and to objective, factual

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<sup>14</sup> I have considered what the applicant says about the “duty of candour” in assessing Coastal Health’s exercise of discretion under s. 23(2). However, even if I were to accept everything the applicant says in this regard, I find the applicant would still not have established that this “duty” is owed to anyone by Coastal Health as a public body and is therefore relevant to how Coastal Health has exercised its discretion in this matter.

<sup>15</sup> See, for example, Order F20-22, 2020 BCIPC 26 at para. 31.

<sup>16</sup> SBC 2003, c 63 at s. 1.

information about what the public body employee did or said in the normal course of discharging their job duties.<sup>17</sup>

[44] I find the applicant's PIPA-related submission is not relevant here. PIPA and FIPPA are separate statutes with distinct schemes that cover different circumstances and are not intended to be cross-applied or automatically lead to the same conclusions. In the absence of more robust evidence or argument from the applicant establishing why PIPA's definition of "work product information" is actually relevant in this case, I decline to further consider this point.

[45] Examining the information in dispute based on the well-established standards under s. 22(4)(e), as set out above, I find that section does not apply here. I found above that all of the applicant's personal information in dispute is also the deceased's personal information. Therefore, even if that information is, in some cases, intermingled with basic information about public body employees, I find that s. 22(4)(e) does not apply to it because disclosing it would also reveal information about the deceased.<sup>18</sup>

[46] Therefore, Coastal Health is not required to release any of the personal information in dispute under s. 22(4)(e).

### **Section 22(3) – presumed unreasonable invasion**

[47] Section 22(3) lists circumstances where disclosing personal information is presumed to be an unreasonable invasion of third-party personal privacy. Coastal Health's submissions raise ss. 22(3)(a), (d), and (f) as applicable to the personal information in dispute. The applicant says only that these subsections do not apply.

[48] I do not see that any of the subsections of s. 22(3) other than those referenced by Coastal Health may apply in this case, so I will only consider ss. 22(3)(a), (d), and (f).

### **Section 22(3)(a) – medical history**

[49] Under s. 22(3)(a), disclosing information related to a third party's medical, psychiatric or psychological history, diagnosis, condition, treatment or evaluation is presumed to be an unreasonable invasion of that third party's personal privacy. Much of the personal information in dispute is contained in the deceased's healthcare records. On this basis, Coastal Health argues I should find s. 22(3)(a) applies to all of that information.

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<sup>17</sup> See Order F20-54, 2020 BCIPC 63 at para. 56 and note 45; Order F18-38, 2018 BCIPC 41 at para. 70; Order F22-62, 2022 BCIPC 70 at para. 27.

<sup>18</sup> See Order F25-79, 2025 BCIPC 93 at paras. 54-55 for a similar conclusion.

[50] Given the specific form and content of the healthcare records, I find that all of the information they contain is related to the deceased's medical history, condition, diagnosis, and treatment.<sup>19</sup> I also find that the email is a communication between members of the deceased's healthcare team and third parties acting on behalf of the deceased that was sent and received for the purpose of discussing aspects of the deceased's medical and psychological health and making decisions regarding the same. As such, I find that the content of the email, including the identities of the parties involved and the date and time it was sent and received form part of the deceased's medical and psychiatric history.

[51] Given the above, I find that all the personal information in dispute is subject to the presumption under s. 22(3)(a).

Sections 22(3)(d) and (f) – employment history and financial information

[52] Under s. 22(3)(d), disclosure of information related to a third party's employment, educational, or occupational history is presumed to be an unreasonable invasion of the third party's personal privacy.

[53] Under s. 22(3)(f), disclosure of information related to a third party's finances, income, assets, liabilities, net worth, or related matters is presumed to be an unreasonable invasion of the third party's personal privacy.

[54] Coastal Health says that disclosing some of the personal information in dispute would reveal the educational and employment history of the deceased and aspects of the deceased's finances and financial history. Based on this, Coastal Health says that disclosing that information would be a presumptively unreasonable invasion of the deceased's personal privacy.

[55] As mentioned above, only the applicant's personal information in the email and on pages 7, 9, and 10 of the healthcare records is in dispute in this inquiry. Examining just that information, I do not see, and Coastal Health does not adequately explain, how ss. 22(3)(d) or (f) applies to any of it. Therefore, I find Coastal Health has not established that the presumptions under those sections apply in this case.<sup>20</sup>

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<sup>19</sup> The analysis under s. 22(1) is about the actual information in dispute and not simply the kinds or classes of records containing that information. However, prior orders have also found it appropriate to consider the entire content of an individual's medical records subject to the presumption under s. 22(3)(a) depending on specific form and content of those medical records: See, for example, Order F25-79, *ibid* at para. 58.

<sup>20</sup> There is some information about aspects of how the deceased managed their personal affairs which is interwoven with the applicant's personal information and is therefore in dispute. However, in the absence of any evidence or explanation from Coastal Health indicating that this included financial management on behalf of the deceased, I find s. 22(3)(f) does not apply to that information.

### **Section 22(2) – relevant circumstances**

[56] Section 22(2) says that when a public body is deciding whether disclosing personal information would be an unreasonable invasion of third-party personal privacy, it must consider all relevant circumstances, including those listed in s. 22(2). Some circumstances weigh in favour of disclosure and some weigh against. Circumstances favouring disclosure may rebut s. 22(3) presumptions.

[57] Coastal Health says that ss. 22(2)(f) and (i) apply to the personal information in dispute and weigh against disclosing it. The applicant says that ss. 22(2)(a), (c), and (g) each apply and weigh in favour of disclosing the personal information in dispute. The applicant also says that their pre-existing knowledge of some of the personal information in dispute weighs in favour of disclosing that information to them.

[58] I will consider each of the subsections of s. 22(2) raised by the parties below. I will also consider the applicant's arguments regarding pre-existing knowledge, and the fact that the information in dispute is the applicant's own personal information.

### **Section 22(2)(a) – disclosure desirable for public body accountability**

[59] Section 22(2)(a) recognizes that if disclosing personal information would foster the accountability of public bodies this favours disclosure.<sup>21</sup>

[60] The applicant raises serious allegations of misconduct by numerous public bodies and organizations, including Coastal Health. In the nexus of this alleged misconduct, the applicant says that "affording me ... full transparency (with my personal information) may well serve the public interest." The applicant also says that disclosing the information in dispute may promote public scrutiny of public bodies by illuminating procedural issues internal to Coastal Health and other health authorities that, the applicant alleges, have led to serious negative consequences. Coastal Health does not address what the applicant says about s. 22(2)(a).

[61] Having considered the information in dispute and all relevant information and argument provided by the parties, I find s. 22(2)(a) is not applicable here. Even if, strictly for the sake of argument, I were to accept everything the applicant says about alleged misconduct by public bodies, including Coastal Health, it would still not be clear to me how disclosing the specific personal information in dispute in this case would contribute to meaningful public scrutiny of those public bodies. Put simply, the personal information in dispute is not of

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<sup>21</sup> Order F05-18, 2005 CanLII 24734 (BC IPC) at para. 49.

the kind, character, or amount which the applicant seems to assume in making their submission.

Section 22(2)(c) – Fair determination of an applicant’s rights

[62] Section 22(2)(c) applies to personal information that is relevant to a fair determination of an applicant’s rights. Section 22(2)(c) applies where:

1. The right in question is a legal right drawn from the common law or statute, as opposed to a non-legal right based only on moral or ethical grounds;
2. The right is related to a proceeding which is either underway or is contemplated, not a proceeding that has already been completed;
3. The personal information sought by the applicant has some bearing on, or significance for, determination of the right in question; and
4. The personal information is necessary to prepare for the proceeding or to ensure a fair hearing.<sup>22</sup>

[63] The applicant says that the personal information in dispute is relevant to a fair determination of their right to request correction and annotation of their own personal information in the custody or under the control of Coastal Health under FIPPA. Coastal Health says the applicant has failed to establish each element of the test set out above.

[64] For the reasons that follow, I find the applicant has not satisfied the s. 22(2)(c) test. I accept that the right to request a correction or annotation of one’s own personal information held by a public body is enshrined in s. 29 and is therefore a legal right based in FIPPA. I also find that Coastal Health clearly has at least some of the applicant’s personal information in its custody and under its control because that very information is the subject of this inquiry.

[65] Notwithstanding this, I find the applicant fails at the second step of the test. Some prior orders have, either expressly or impliedly, concluded that an applicant contemplating making a s. 29 request satisfies this step.<sup>23</sup> However, recently in Order F25-86, the adjudicator had cause to reconsider those conclusions and ultimately held that a s. 29 request is not itself a “proceeding” for purposes of s. 22(2)(c).<sup>24</sup> Without finding it necessary to reproduce that adjudicator’s reasoning here, I find that it is cogent, well-supported, and applicable to the circumstances before me. Therefore, I adopt that reasoning and

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<sup>22</sup> Order F23-71, 2023 BCIPC 84 at para. 69, citing Order 01-07, 2001 CanLII 21561 (BC IPC).

<sup>23</sup> See Orders F14-47, 2014 BCIPC 51 at paras. 24-27; F19-02, 2019 BCIPC 2 at para. 59; and, F24-09, 2024 BCIPC 12 at paras. 51-53.

<sup>24</sup> 2025 BCIPC 100 at paras. 32-37.

find that the applicant has not established that the personal information in dispute is related to an ongoing or contemplated proceeding.

[66] In order for s. 22(2)(c) to weigh in favour of disclosing personal information, an applicant must meet every step of the test set out above. Therefore, it is not necessary for me to consider the third or fourth steps of that test here and I decline to do so. Section 22(2)(c) does not weigh in favour of Coastal Health disclosing any of the personal information in dispute to the applicant.

Section 22(2)(f) – supplied in confidence

[67] Under s. 22(2)(f), where personal information was supplied to a public body in confidence this weighs against disclosing it.

[68] Coastal Health says that any personal information provided by the deceased or on behalf of the deceased to the deceased's healthcare providers was clearly supplied in confidence and this weighs against disclosing it. The applicant says that if any of their own personal information in dispute was provided to Coastal Health with an expectation of confidentiality, this expectation was not reasonable because the information was unverified and false.

[69] I agree with Coastal Health that the personal information provided by the deceased or on behalf of the deceased to the deceased's healthcare providers was supplied in confidence. It is well-established that clinical conversations between patients and care providers are subject to a reasonable expectation of confidentiality in favour of the patient and nothing the applicant says convinces me that I should negate that expectation in this case. Given this, I find that s. 22(2)(f) weighs in favour of withholding most of the personal information in dispute.

[70] However, I find s. 22(2)(f) does not apply to the small amount of personal information in dispute that was provided to the deceased's healthcare providers by the applicant, was independently generated by those healthcare providers and not provided by anyone, or was provided to the deceased or their representatives by the deceased's healthcare providers.

Section 22(2)(g) – information likely to be inaccurate

[71] Under s. 22(2)(g), where personal information is likely to be inaccurate or unreliable this generally weighs against disclosing it.<sup>25</sup>

[72] The applicant says that their personal information in dispute is likely to be inaccurate because in prior instances where they have secured the release of

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<sup>25</sup> Order F24-100, 2024 BCIPC 114 at para. 112.

their own personal information from public bodies and organizations, they have found that personal information to be inaccurate. On this basis, the applicant submits that s. 22(2)(g) applies in this case and should weigh in favour of, not against, disclosing the personal information in dispute to them. Coastal Health does not address what the applicant says about s. 22(2)(g).

[73] Having considered what the applicant says, I find that s. 22(2)(g) does not apply in this case. I am not convinced that just because personal information the applicant has accessed in the past may have been inaccurate, that means the applicant's personal information in dispute here is likely to be inaccurate. The other public bodies and organizations the applicant has previously requested their personal information from are distinct from Coastal Health and the applicant has not sufficiently established that I should impute their alleged failings onto Coastal Health.

[74] Given this, it is not necessary that I consider the applicant's argument that if it did apply in this case s. 22(2)(g) would weigh in favour of disclosure.

#### Section 22(2)(i) – information about a deceased individual

[75] Under s. 22(2)(i), where the personal information of a deceased individual is in dispute, the public body must consider that the information is about a deceased individual and also consider how long it has been since the deceased individual passed away. Prior orders have found that where the personal information in dispute is about a deceased person this weighs against disclosing it until at least 20 years after the deceased passed away at which point the balance may shift in favour of disclosure.<sup>26</sup>

[76] Coastal Health says the deceased passed away much less than 20 years ago and therefore s. 22(2)(i) weighs against disclosing any of the deceased's personal information. The applicant says that s. 22(2)(i) does not apply in this case but does not explain their position in any greater detail.

[77] The parties all agree that the deceased passed away less than eight years ago. Therefore, I find that s. 22(2)(i) operates in this case to weigh against disclosing any of the deceased's personal information to the applicant.

#### Applicant's own personal information

[78] Where an applicant is seeking disclosure of their own personal information, this can weigh heavily in favour of disclosing that information to them. However, where the applicant's personal information is interwoven with the personal information of third parties this factor carries less weight.<sup>27</sup>

<sup>26</sup> See, for example, Order F24-05, 2024 BCIPC 7 at para. 48.

<sup>27</sup> Order F14-47, *supra* note 23 at para. 36.

[79] Here, all of the information in dispute is the applicant's own personal information. However, I have already found above that in each case the applicant's personal information is intermingled with the personal information of the deceased, the deceased's healthcare providers, or other third parties. Therefore, while the fact that the information is the applicant's own personal information weighs in favour of disclosing it, the weight I give to this point is tempered.

#### Applicant's prior knowledge

[80] An applicant's prior knowledge of personal information may weigh in favour of disclosing it. Here, the applicant says that they already know some of the information in dispute and that it should be released to them based on prior OIPC orders which the applicant says dealt with similar circumstances.

[81] Coastal Health says that the applicant has only demonstrated a loose knowledge of some facts surrounding the information in dispute and that disclosure to the applicant on that basis is not supported by the authorities cited by the applicant.

[82] I find the applicant already has concrete knowledge of some of the information in dispute. For instance, some of the information reveals only that the applicant had a certain conversation or made a certain telephone call. Other information reveals basic facts about the applicant's past interactions with the deceased. These are clearly classes of information already known to the applicant because they relate to actions or experiences which impacted the applicant directly. I find the applicant's prior knowledge weighs strongly in favour of disclosing this personal information to them.<sup>28</sup>

[83] However, I agree with Coastal Health that the applicant's general knowledge regarding the deceased's medical, healthcare, and other circumstances does not demonstrate that the applicant has specific knowledge of the other personal information in dispute. Therefore, this factor does not weigh in favour of disclosing any of other personal information in dispute to the applicant.

#### **Conclusion – section 22(1)**

[84] I have found above that all of the information in dispute is in the email and on pages 7, 9, and 10 of the healthcare records. I have also found that this information is a combination of the applicant's personal information and the personal information of third parties including the deceased and members of the deceased's healthcare team. Further, I have found that none of the information in dispute is contact information as that term is defined in FIPPA.

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<sup>28</sup> This information is on pages 7 and 9-10 of the healthcare records.

[85] Turning to s. 22(4), I have found that neither s. 22(4)(a) nor (e), which were raised by the applicant, nor any of the other subsections of s. 22(4) apply in this case.

[86] Examining s. 22(3), I have found that releasing any of the applicant's personal information in dispute is presumed to be an unreasonable invasion of the deceased's personal privacy under s. 22(3)(a) because disclosure would reveal aspects of the deceased's medical and psychological history and treatment. I have found that none of the other subsections of s. 22(3) apply to any of the information in dispute.

[87] Considering s. 22(2) and all the relevant circumstances, I have found that s. 22(2)(i) weighs against disclosing any of the deceased's personal information and that s. 22(2)(f) weighs against disclosing most of that same personal information. However, I have found that the fact that the personal information in dispute is all the applicant's own personal information and the fact that the applicant already knows some of the personal information in dispute weigh in favour of disclosing that information to the applicant. I have found that none of the other circumstances raised by the parties weigh in favour of or against disclosing the personal information in dispute.

[88] Taking all of this together, I find that the presumption under s. 22(3)(a) has been rebutted regarding a small amount of the applicant's personal information that is already known to the applicant.<sup>29</sup> I find that disclosing the rest of the applicant's personal information in dispute would be an unreasonable invasion of the deceased's personal privacy. Coastal Health must refuse to disclose that information.

### ***Section 22(5) – summary of information***

[89] Section 22(5) provides that where a public body refuses to disclose information supplied in confidence about an applicant, the public body must give the applicant a summary of the information, unless the summary cannot be prepared without disclosing the identity of the third party who supplied the personal information. Neither party made submissions on the application of s. 22(5).

[90] In this case, I have considered whether any of the applicant's personal information I found above was supplied in confidence to the deceased's healthcare providers could be summarized by Coastal Health without enabling the applicant to discern the identity of the third party who provided the information. I find that it could not. Given the content of the information and the applicant's general pre-existing knowledge about the circumstances surrounding

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<sup>29</sup> This information is on pp. 7 and 9-10 of the healthcare records.

the deceased and their care, I think it would be relatively easy for the applicant to deduce who supplied this information. Therefore, I find that Coastal Health is not required to provide a summary of any of the applicant's personal information in dispute under s. 22(5).

## **CONCLUSION**

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

1. I confirm that s. 22(1) requires Coastal Health to withhold most, but not all, of the information in dispute.
2. Coastal Health must provide the applicant with the information I have highlighted in pink on pages 7, 9, and 10 of the copy of the healthcare records provided to Coastal Health alongside this order.
3. Coastal Health must concurrently copy the OIPC registrar of inquiries on its cover letter and the records it gives to the applicant in compliance with item 2, above.

[92] Pursuant to s. 59(1) of FIPPA, the public body is required to comply with this order by July 16, 2026.

June 3, 2026

## **ORIGINAL SIGNED BY**

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Alexander Corley, Adjudicator

OIPC File No.: F24-96023