



# ANNUAL REPORT 2023-2024



Office of the Information and  
Privacy Commissioner of Alberta



Office of the Information and  
Privacy Commissioner of Alberta

**Office of the Information and Privacy  
Commissioner of Alberta**

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November 2024



Office of the Information and  
Privacy Commissioner of Alberta

November 2024

Honourable Nathan Cooper  
Speaker of the Legislative Assembly  
325 Legislature Building  
10800 – 97 Avenue  
Edmonton, AB T5K 2B6

Dear Speaker:

I am honoured to present to the Legislative Assembly the Annual Report of the Office of the Information and Privacy Commissioner for the period April 1, 2023 to March 31, 2024.

This report is provided in accordance with section 63(1) of the *Freedom of Information and Protection of Privacy Act*, section 95(1) of the *Health Information Act*, and section 44(1) of the *Personal Information Protection Act*.

Sincerely,

[ Original signed by ]

**Diane McLeod**  
Information and Privacy Commissioner

```
mirror_mod.us = False
mirror_mod.us = True
mirror_mod.us = False
elif operation == "MIRROR Z":
    mirror_mod.us = False
    mirror_mod.us = False
    mirror_mod.us = True
```

```
obj.select = 0 # add back the deselected mirror modifier object
obj.select = 1
obj.context.scene.objects.active = modifier_ob
print("Selected" + str(modifier_ob)) # modifier ob is the active ob
mirror_ob.select = 0
bpy.context.selected_objects
```

# CONTENTS

## 7 COMMISSIONER'S MESSAGE

## 11 ABOUT THE OFFICE

- 12 Mandate
- 15 Organizational Structure
- 16 Request for Review and Complaint Process
- 18 OIPC as a Public Body
- 21 Financial Overview
- 22 Achieving Our Goals

## 26 TRENDS AND ISSUES

- 27 PIPA Review
- 29 FOIP Act Review
- 31 Abandoned Health Records

## 32 BY THE NUMBERS

- 33 Total Cases Opened
- 35 Total Cases Closed
- 38 General Enquiries
- 40 Total Cases Carried Over into New Fiscal Year 2024-25

## 44 REGULATION AND ENFORCEMENT

- 45 Formal Investigations
- 47 Informal Investigations
- 49 Cases of Abandoned Health Records
- 51 Settled Requests for Reviews and Complaints
- 54 Requests for Time Extensions by Public Bodies
- 55 Privacy Impact Assessment Reviews
- 59 Privacy Breaches
- 64 Offence Investigations under HIA
- 64 Inquiry Decisions
- 68 Judicial Reviews and Other Court Decisions

## 70 EDUCATION AND OUTREACH

- 71 Engagement with Albertans
- 72 Collaboration with Other Jurisdictions
- 76 Media Awareness

## 78 FINANCIAL STATEMENTS

## 94 APPENDICES

- 95 Appendix A
- 99 Appendix B
- 103 Appendix C

## 106 LIST OF FIGURES



# COMMISSIONER'S MESSAGE

In this, my second annual report as Information and Privacy Commissioner of Alberta, I am pleased to report on the work of my office for 2023–24.



*Commissioner Diane McLeod*

## Achieving Our Goals

The 2023–24 year can best be characterized as a year of change and engagement for the office as we worked to tackle the goals set out in our Strategic Business Plan 2024–2027.

As you will read in other sections of this annual report, we undertook a full review of all our internal procedures with a specific focus on shortening timelines to settle requests for review and complaints, as well as other internal processes. To that end, we modified our case resolution procedures and began to put the new processes for requests for review and complaints into action in early 2024, with the official launch occurring on April 1, 2024. Prior to the launch, we met with access and privacy professionals across the province to ensure they knew what to expect, given that part of the success of the new procedures depends on public bodies, custodians and organizations working with us to settle matters in the most efficient manner, which will generally be through verbal communication.

As part of our process redesign, we also implemented a refer-back process for complaints about inadequate search and privacy compliance. This was done because it is often the case that these bodies are in the best position to try to address concerns firsthand, with our office intervening only when matters cannot be resolved between the parties. This positions our office in this regard in the appropriate role of last resort.

I am pleased to report that last year our Case Resolution team, which is responsible for trying to informally resolve requests for reviews and complaints, as well as other types of cases, settled 86% of these files, which is up from 78% the prior year. The ability to settle a higher volume of cases resulted in a reduced number of matters moving to inquiry, i.e. only 30 last year, down from 68 the year before.

The primary reason we modified our case resolution procedures was to reduce timelines to settle these cases so that the concerns of individuals about access to information and protection of privacy are addressed in a timelier manner. To achieve that goal, we will continue to work on increasing the number of files resolved by this team.

We also began looking at our other internal procedures, such as how we review privacy impact assessments and breaches reported to our office. We are working to make improvements that ensure timeliness and quality in completing our work associated with these cases.

As indicated in my business plan, an important aspect of improving our timelines for the work of our office is the use of technology to support our business operations. In 2023-24, several projects were underway to achieve this goal, including setting up Microsoft 365 and Azure Tenant for the office; introducing Teams as our virtual meeting platform; creating online forms for the public and stakeholders to submit information necessary for our case work; and modifying our case management system to better support workflow. Work on these projects was ongoing at the end of 2023-24.

Another goal set out in my business plan is to engage with stakeholders and government on how best to modernize and harmonize the *Personal Information Protection Act* (PIPA), the *Freedom of Information and Protection of Privacy Act* (FOIP Act), and the *Health Information Act* (HIA).

In January 2024, the review of PIPA was assigned to the Alberta Legislative Assembly's Standing Committee on Resource Stewardship. We were anticipating that the review of this Act would reconvene following the 2023 provincial election and had mostly completed our comments and recommendations to modernize that Act by the end of 2023. Late in 2023, we were informed by the Alberta government that the FOIP Act would also be amended. While we were not expecting to have to address amendments to that Act so soon, we are pleased to see that it too will be modernized. We made comments and recommendations for amending both Acts with the goal of ensuring that these Acts are fit for purpose to meet the needs of our evolving digital economy here in Alberta, including as it relates to the use of innovative technology such as artificial intelligence, while ensuring that the privacy rights of Albertans are adequately protected.

Another goal set out in the business plan that we tackled in 2023-24 is engaging the technology development sector in Alberta. The purpose of this engagement is to work with this sector to build privacy into the development of this technology and to ensure that its use would protect the privacy of Albertans in accordance with our privacy laws. We officially launched our engagement strategy in January 2024. As part of that launch, we reached out to key stakeholders, including Alberta Innovates and Alberta Health Services, to identify projects that we could engage with. This led to connections with local developers, and we began to work with them to build privacy compliance into their products. This work was ongoing at the end of 2023-24.

## About Our Work

As you will read in the Trends and Issues section of this annual report, our office saw a spike in reporting of abandoned health records cases. Alberta's HIA has



a gap in the protection of health information when a custodian who is a member of a regulated health profession, such as a physician, leaves their practice and becomes a non-member. When this occurs, they are no longer a custodian under HIA and no longer accountable to comply with the Act regarding the health information of their patients. Most other health information privacy laws in Canada have closed this gap by having successor provisions that make a custodian or another person accountable for these health records, no matter their status as a regulated member, until such time as the records are transferred to a successor custodian or destroyed in accordance with acceptable retention periods.

The amount of time and effort by my staff to investigate these cases was significant as you will see in the sections about these cases on page 31 and pages 49-50, particularly the case involving 14 physicians who abandoned health records at an Edmonton medical clinic. The cases that we investigated in 2023-24 were troubling on three fronts. First, it is very concerning that health care providers would simply walk away from their offices leaving records behind, in one case in the thousands. Second, when this occurs there is no protection for the Albertans whose health information is in these records. Third, these cases, which generally involve paper records, are just the tip of the iceberg. We know that there are likely many more cases of records being abandoned that we are unaware of, including those involving electronic health records. Unfortunately, we have had several other cases reported later in 2024 that we are actively working on.

To address the issue of abandoned records in Alberta, we met with representatives of Alberta Health late in 2023 about the abandoned records cases that we are aware of. These discussions were ongoing at the end of 2023-24.

In 2023-24, I generated two systemic investigations in accordance with my authority under the FOIP Act and HIA. Under the FOIP Act, we are investigating whether

the administrative practices of Government of Alberta departments/ministries (there are 27) in responding to access requests comply with that Act. This investigation was opened after numerous complaints related to these practices were received from applicants under the FOIP Act.

The other systemic investigation that I generated was under HIA, after we were notified of a breach by a custodian, involving the alleged unauthorized use of Connect Care by 35 physicians (and their staff) who worked at a medical clinic in Edmonton. Connect Care is the electronic medical record used by Alberta Health Services (AHS) for its patients. Under HIA, AHS is the custodian of this health information and is accountable for compliance with that Act as it relates to this information. We are investigating to determine if there was unauthorized collection, use or disclosure of health information by any of the custodians, including AHS, as a result of Connect Care being used by the clinic custodians in this manner. In addition, the investigation will determine whether the provisions of HIA and the Health Information Regulation that require custodians to adequately secure health information from unauthorized collection, use, disclosure and mismanagement were complied with. Both investigations were ongoing at the end of 2023-24. Due to the number of respondents involved, these two systemic investigations account for 63 of the investigations reported as opened by the Investigations team in 2023-24 as identified in the Investigations team table on page 42 of this annual report.

In 2023-24, we established a process for informally conducting Commissioner-generated investigations. The purpose of this new process was to try to resolve potential violations of the Acts in an expedited manner by working directly with the public body, custodian or organization to address any alleged non-compliance. Informal investigations are primarily led by the Case Resolution team, although the Compliance Support team may also work on these investigations. In 2023-

24, we opened 61 informal investigations (18 opened by the Case Resolution team and 43 by the Compliance Support team; see tables for those teams on pages 40–41 of this annual report). However, some of these investigations were combined because they involved multiple stakeholders in relation to the same matter. In addition, the increased cases of abandoned records, noted above, are investigated under this process. Some of our informal investigation work in 2023-24 is highlighted in the Regulation and Enforcement section of this annual report.

An alarming trend that we have seen over the past several years involves snooping by employees of custodians in health information systems and use of health information for unauthorized purposes. In 2022-23 and 2023-24, fourteen breaches were reported to my office that were referred to the Investigations team to investigate as potential offences under HIA. These breaches involve 11 employees of custodians and affect over 4,000 Albertans whose health records were inappropriately accessed. All reports of these incidents were made by custodians under HIA, who are required to report breaches to my office when they notify individuals who are at a risk of harm from the breach. As can be seen in the HIA Cases Opened table on page 34 of this annual report, 448 breach reports were received from custodians in 2023-24.

While all breaches are of concern, three that were reported to us during this period stood out. In one breach report, it was identified that an employee of a custodian used health information for financial gain by charging illegitimate fees to patients. Two other breaches involved individuals employed by different custodians. These employees together entered over 500 false COVID-19 vaccination records into our public health care information system.

In the face of resource challenges both in my office, the Crown Prosecutors' office and Alberta courts, it is concerning to see that we must be increasingly

selective and only pursue the most egregious cases. As a consequence, I regularly must decline pursuing offence investigations for cases that are arguably more concerning than some of the past cases this office has investigated under HIA and that resulted in individuals being fined under the offence provisions of that Act. Given this, I have recommended that the Commissioner be empowered in both the FOIP Act and PIPA (and I will do the same regarding HIA, once it has been reviewed for amendment) to issue administrative monetary penalties (AMPs) for serious and significant violation of those Acts. In my view, the ability to issue AMPs in these circumstances will serve as a stronger deterrence to violating these Acts than is the case with the offence provisions, which, for the reasons indicated, are largely failing on that front. I will note here that as of January 1, 2024, Ontario's Information and Privacy Commissioner has the power to issue AMPs under Ontario's *Personal Health Information Protection Act*.

I look forward to continuing our work in the coming years to meet the goals set out in my business plan and to advocate for the access to information and privacy rights of Albertans. I am pleased and proud of the hard work and dedication that all the teams within my office have demonstrated, as we move together toward achievement of these goals. Ultimately, our hope is that our efforts will make a real difference to Albertans.

More articles and stories about our work can be found throughout this annual report. I hope you find the information useful in understanding the work of my office.

**Diane McLeod**

Information and Privacy Commissioner

# ABOUT THE OFFICE



# MANDATE

The Information and Privacy Commissioner of Alberta is an Officer of the Legislative Assembly of Alberta. The Commissioner reports directly to the legislative assembly and is independent of the government.

Through the Office of the Information and Privacy Commissioner (OIPC), the Commissioner performs the legislative and regulatory responsibilities set out in Alberta's three access and privacy laws.

## ***Freedom of Information and Protection of Privacy Act***

The *Freedom of Information and Protection of Privacy Act* (FOIP Act) applies to public bodies, including provincial government departments, agencies, boards and commissions, municipalities, Métis settlements, drainage districts, irrigation districts, housing management bodies, school boards, post-secondary institutions, public libraries, police services, police commissions and health authorities.

The FOIP Act provides a right of access to any record in the custody or under the control of a public body, subject to limited and specific exceptions. The Act also gives individuals the right to access their own personal information held by public bodies and to request corrections to their own personal information. The Act protects privacy by setting out the circumstances in which a public body may collect, use or disclose personal information.

## ***Health Information Act***

The *Health Information Act* (HIA) applies to health custodians, including Alberta Health, Alberta Health Services, Covenant Health, nursing homes, physicians, registered nurses, pharmacists, optometrists, opticians, chiropractors, podiatrists, midwives, dentists, denturists and dental hygienists.

HIA also applies to “affiliates” who perform a service for custodians, such as employees, contractors, students and volunteers. Custodians are responsible for the information collected, used and disclosed by their affiliates.

HIA allows health services providers to exchange health information to provide care and to manage the health system.

HIA protects patients' privacy by regulating how health information may be collected, used and disclosed, and by establishing the duty for custodians to take reasonable steps to protect the confidentiality and security of health information. The Act also gives individuals the right to access their own health information, to request corrections, and to have custodians consider their wishes regarding how much of their health information is disclosed or made accessible through the provincial electronic health record information system (that is, Alberta Netcare).

## ***Personal Information Protection Act***

The *Personal Information Protection Act* (PIPA) applies to private sector organizations, including businesses, corporations, associations, trade unions, private schools, private colleges, partnerships, professional regulatory organizations and any individual acting in a commercial capacity.

PIPA protects the privacy of clients, customers, employees and volunteers by establishing the rules for the collection, use and disclosure of personal information by organizations.

PIPA seeks to balance the right of the individual to have their personal information protected with the need of organizations to collect, use or disclose personal information for reasonable purposes. The Act also gives individuals the right to access their own personal information held by organizations and to request corrections.

**Throughout the rest of this report, you will see the abbreviations FOIP Act, HIA and PIPA to refer to these three pieces of legislation.**



## Commissioner's Powers, Duties and Functions

The Commissioner oversees and enforces the administration of the Acts to ensure their purposes are achieved.

The Commissioner's powers, duties and functions include:

- providing independent review and resolution on requests for review of responses to access to information requests and privacy complaints related to the collection, use and disclosure of personal and health information;
- investigating any matters relating to the application of the Acts, whether or not a review is requested;
- conducting inquiries to decide questions of fact and law and issuing binding orders;
- reviewing privacy breach reports submitted by private sector organizations and health custodians as required under PIPA and HIA, and when voluntarily submitted by public bodies;
- reviewing and commenting on privacy impact assessments submitted to the Commissioner;
- receiving comments from the public concerning the administration of the Acts;
- educating the public about the Acts, their rights under the Acts, and access and privacy issues in general;
- engaging in or commissioning research into any matter affecting the achievement of the purposes of the Acts;
- commenting on the access and privacy implications of existing or proposed legislative schemes and programs;

- giving advice and recommendations of general application respecting the rights or obligations of stakeholders under the Acts; and
- commenting on the privacy and security implications of using or disclosing personal and health information for record linkages or for the purpose of performing data matching.

### Vision

A society that values and respects access to information and personal privacy.

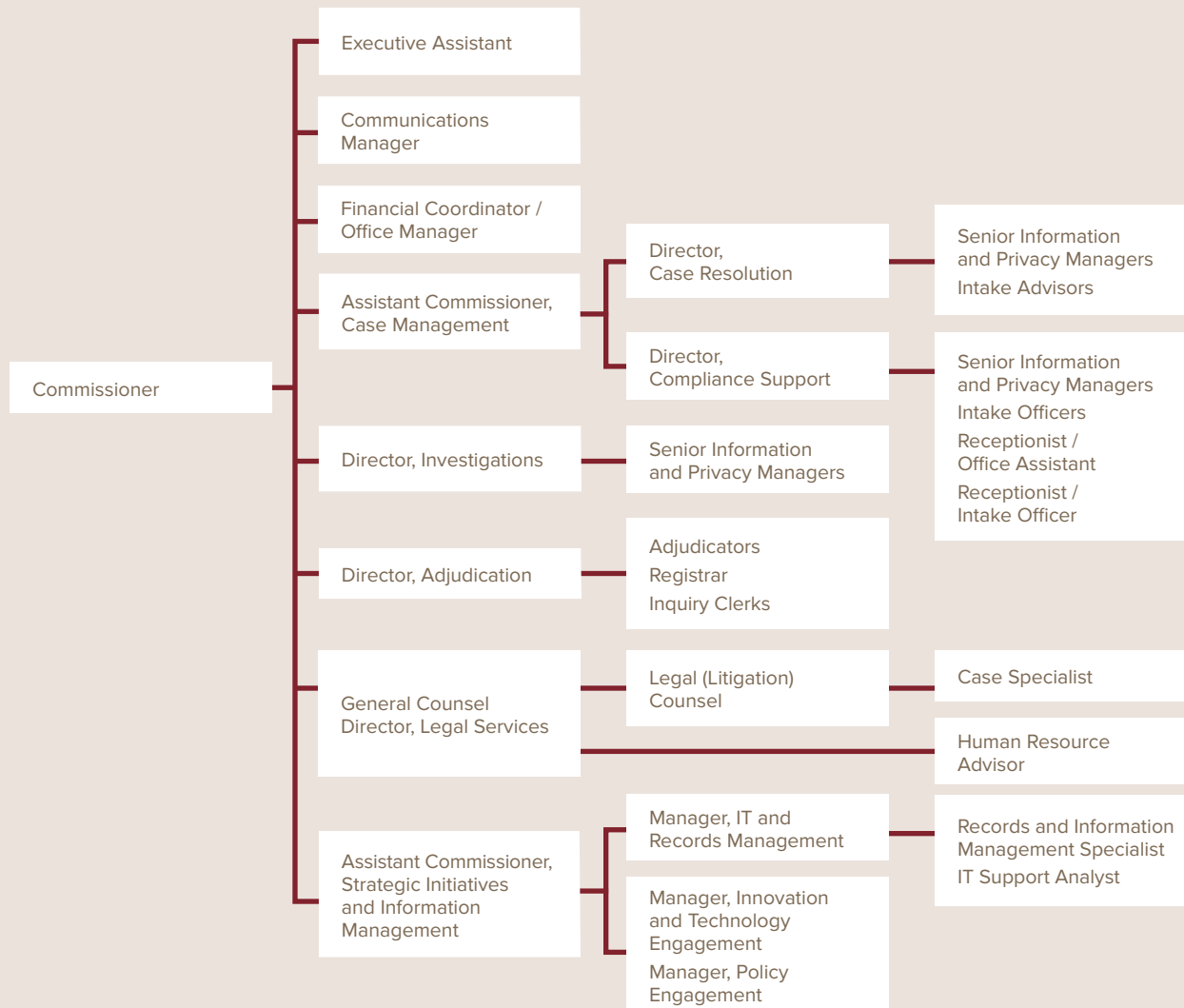
### Mission

Our work toward supporting our vision includes:

- advocating for the access and privacy rights of Albertans;
- ensuring public bodies, health custodians and private sector organizations uphold the access and privacy rights contained in the laws of Alberta; and
- providing fair, independent and impartial reviews in a timely and efficient manner.

# ORGANIZATIONAL STRUCTURE

Figure 1: 2023–2024 Organizational Structure



# REQUEST FOR REVIEW AND COMPLAINT PROCESS

Changes to our request for review and complaint process were being planned throughout this fiscal year. The two flow charts below illustrate the process used for the majority of the 2023-24 year as well as the new process which was developed during 2023-24 and implemented at the beginning of the 2024-25 year. You can also read more on our [website](#) about the new process.

Figure 2: **2023–24 Process**

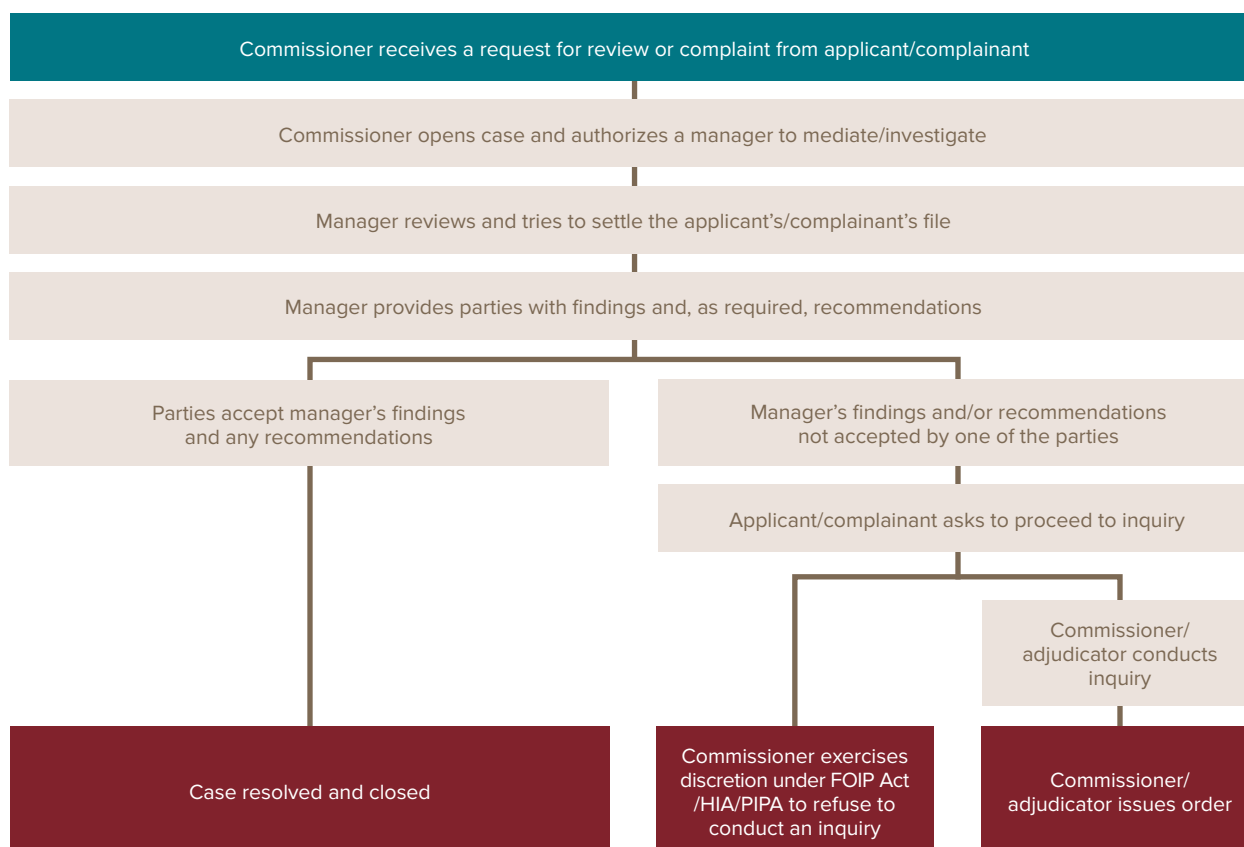
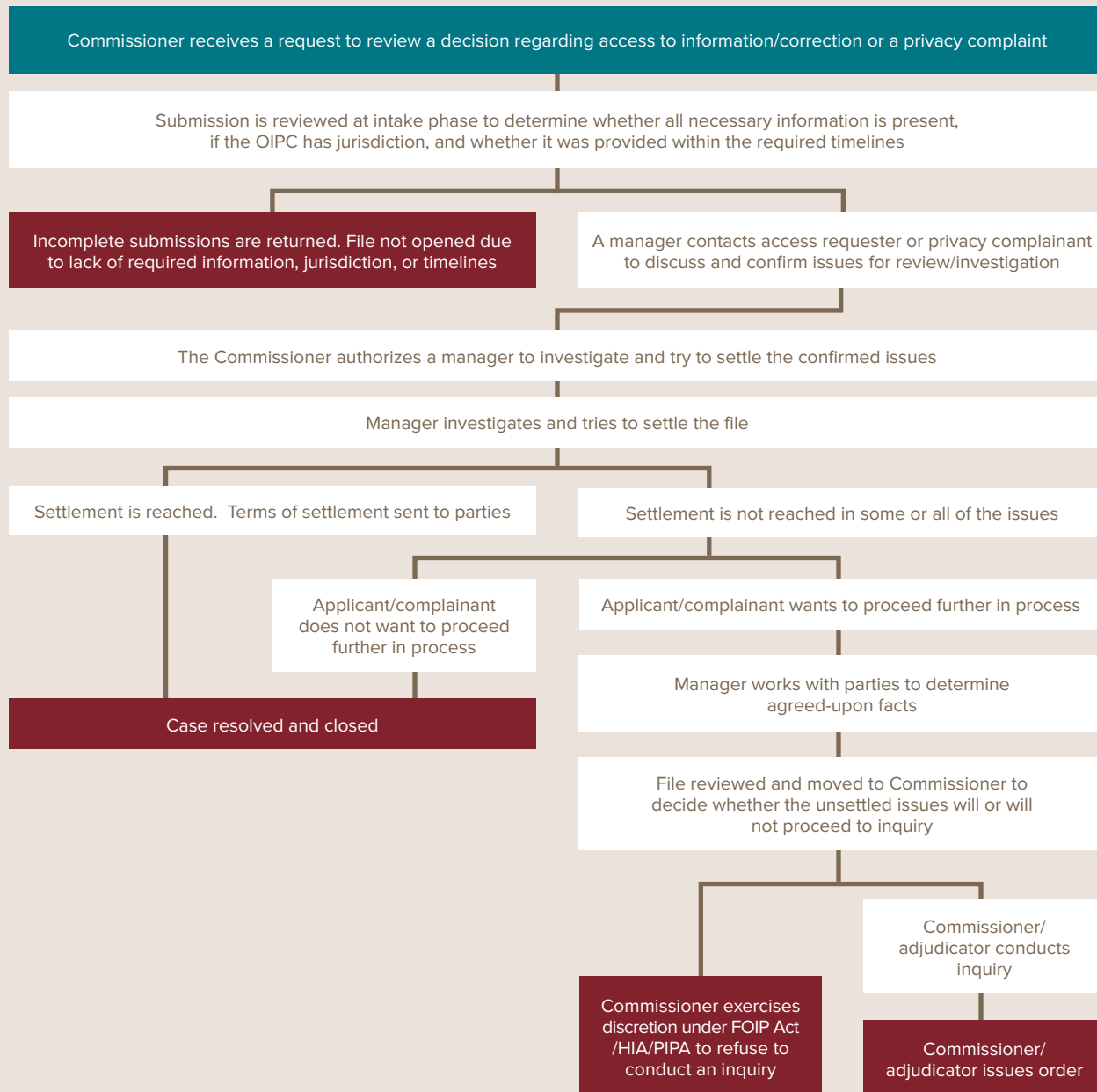




Figure 3: **New Process Developed in 2023–24 and Implemented April 1, 2024**



# OIPC AS A PUBLIC BODY

## FOIP Act Requests to the OIPC

As a public body under the FOIP Act, the OIPC receives access to information requests on occasion. In 2023-24, the OIPC received three general information requests and three personal information requests under the FOIP Act. The OIPC responded to all requests within 30 days.



## OIPC Privacy Matters

In 2023-24, the OIPC conducted sixteen investigations into internal incidents involving potential privacy breaches.

### Email sent in error (6 incidents)

The predominant type of breach in 2023-24 involved over-reliance on the autocomplete feature in Microsoft Outlook to populate the name of an email recipient, without carefully checking that any autofilled names were the correct recipients of the email. There were six such incidents in this fiscal year.

In all cases, the OIPC contacted the incorrect recipient of the email and requested that the email be double deleted. The OIPC assessed that there was no real risk of significant harm to anyone from these incidents, and notification was not required in any of the cases.

To assist in reducing the number of emails sent in error, the OIPC asked staff to delete the auto-population cache. The OIPC also implemented a delay when emails are sent.

### **Personal information disclosed in error (5 incidents)**

There were a variety of situations in which personal information was disclosed in error. Documents intended for one individual were sent to another (2 incidents); documents were sent to a presumed representative who no longer was a representative (1 incident); and disclosures occurred as a result of inadvertence (2 incidents). One incident in which documents were sent to the wrong person and one incident of disclosure resulting from inadvertence were assessed as having a real risk of significant harm, requiring notification, which was done. The other three incidents were assessed as having no real risk of significant harm and not requiring notification.

To prevent recurrence, the OIPC reminded staff about the importance of a second check before sending correspondence.

### **Lost personal information (2 incidents)**

In one instance, personal information was considered to be lost when the OIPC could not locate a request for review that it had received by email. The evidence pointed to a possible internal deletion of the email containing the request for review. The OIPC assessed that there was no real risk of significant harm and that notification was not required. To prevent recurrence, the OIPC asked intake staff to be mindful when processing the receipt of a digital submission and to check to ensure that they had not deleted it.

In another instance, personal information was considered to be lost when a public body could not find a notification package that the OIPC sent to it by mail. The OIPC assessed that there was a real risk of significant harm and that three individuals should be notified. To prevent recurrence in circumstances in which the OIPC needs to send correspondence by mail, and to track that correspondence, the OIPC decided to use registered mail in future.

### **Disclosure of OIPC employee information unrelated to email (3 incidents)**

In one instance, certain members of the finance team disclosed personal information to other members of the finance team, for the purposes of audit accountability. The disclosure to the other members was not necessary for the performance of those members' duties. However, there was no real risk of significant harm, and notification was not required. To prevent recurrence, the OIPC reminded team members not to disclose employee personal information to other members, unless that disclosure is necessary for the other members to perform their duties.

In another instance, disclosure occurred in the context of posting management expenses on the OIPC's website. Some personal information that should have been redacted before posting was not redacted. The affected employee was notified, and the posting was removed from the website so that the personal information could be redacted. To prevent recurrence, the OIPC decided to have managers review their own expenses to check for personal information that needs to be redacted, before the OIPC posts those expenses.

In the third instance, the OIPC discovered that the salary of one of its employees was being paid by a government department instead of by the OIPC. This error resulted from a change that the OIPC had made to a cost centre in 1GX, which is One Government eXperience, a payroll management system (among other things) used by the Government of Alberta. After investigating, the OIPC determined that no one in the government department had had access to the employee's personal information because no one in that department had been assigned roles in 1GX that would allow access to the employee's personal information. To prevent recurrence, the OIPC determined that it would no longer make changes to cost centres in 1GX.

## Proactive Travel and Expenses Disclosure

Every second month, the OIPC discloses the vehicle, travel and hosting expenses of the Commissioner, and the travel and hosting expenses of the Assistant Commissioners and Directors. The disclosures are available on the OIPC [website](#).

## Public Sector Compensation Transparency Act

The *Public Sector Compensation Transparency Act* requires public sector bodies, including the OIPC, to publicly disclose compensation and severance provided to an employee if it is more than \$125,000 in a calendar year, as adjusted according to the Act. For the 2022 calendar year, the threshold was adjusted to \$141,183. Other non-monetary employer-paid benefits and pension are also reported.

This disclosure is made annually by June 30 and is available on the OIPC [website](#).

## Public Interest Disclosure (Whistleblower Protection) Act

There were no disclosures received by the OIPC's designated officer under the *Public Interest Disclosure (Whistleblower Protection) Act* in 2023-24.



# FINANCIAL OVERVIEW

In 2023-24, the total approved budget for the OIPC was \$8,535,000. The total cost of operating expenses and capital purchases was \$8,060,866. The OIPC returned \$474,134 to the Legislative Assembly.

Figure 4: **Total Actual Costs Compared to Budget**

	Voted Budget		Actual		Difference
Operating Expenses*	\$	8,485,000	\$	8,014,743	\$ 470,257
Capital Purchases	\$	50,000	\$	46,123	\$ 3,877
<b>TOTAL</b>	<b>\$</b>	<b>8,535,000</b>	<b>\$</b>	<b>8,060,866</b>	<b>\$ 474,134</b>

\*Amortization is not included

Figure 5: **Total Actual Costs Compared to Prior Year**

	2023–2024		2022–2023		Difference
Operating Expenses*	\$	8,014,743	\$	7,410,102	\$ 604,641
Capital Purchases	\$	46,123	\$	–	\$ 46,123
<b>TOTAL</b>	<b>\$</b>	<b>8,060,866</b>	<b>\$</b>	<b>7,410,102</b>	<b>\$ 650,764</b>

Total costs for operating expenses and capital purchases increased by \$650,764 from the previous year.

# ACHIEVING OUR GOALS

In our [Strategic Business Plan 2024-2027](#), issued in the fall of 2023, the OIPC set out a number of goals and priorities for the coming years.

Goal		Priority 1	Priority 2
1	Enhancing internal processes to support our legislative mandate and improve timelines	Tackling backlogs meaningfully	Transforming our office to a digital environment
2	Providing information and support to improve the protection of personal and health information	Support stakeholders in implementing proactive measures to protect personal information and facilitate access to information	Identify, facilitate and support opportunities to enhance access and privacy education and protections for children and youth
3	Modernizing regulatory mechanisms	Advocate for the updating of Alberta's access to information and privacy laws	Work with stakeholders to evaluate how to modernize the legal framework in Alberta to facilitate innovation that will best serve Albertans

During the 2023-24 fiscal year, we advanced a number of process improvements and initiatives to move our office closer to meeting these goals and priorities. Some of these improvements and initiatives are set out below.

## To meet Goal 1

On February, 1, 2024, the OIPC ceased conducting courtesy searches on behalf of public bodies to determine if a third party request for review has been received. The provision of this service is not a responsibility of the OIPC under the FOIP Act and as our office works to streamline and improve our processes to provide better service to Albertans in the areas of our legislated responsibilities, the provision of this courtesy service was discontinued.

In 2023-24, the OIPC developed two sets of process changes to improve efficiencies, reduce timelines and serve Albertans better, which were implemented just as the fiscal year ended, on April 1, 2024. This included revising procedures for processing breach notifications received under PIPA and revising investigation procedures for access request reviews and privacy complaints under Alberta's three access and privacy laws. See more detail on both sets of process changes on pages 53 and 60 of this report.

Throughout the fiscal year, planning work was proceeding on changes to the way time extension requests under Section 14 of the FOIP Act are managed, with implementation early in the 2024-25 fiscal year. The changes, which came into effect June 17, 2024, included the introduction of two new forms for use by public bodies to submit time extension requests, as well as new guidance on how to fill out and use the form. The decisions made in response to time extension requests will also look different. The information provided in the forms by public bodies will

be incorporated into the decisions on the form itself. The public body will fill in the form requesting the time extension and the Commissioner's decision will appear at the bottom of the form. These changes streamline this process. Read more on the OIPC [website](#).

Work was begun in 2023-24 to change the way Privacy Impact Assessments (PIAs) are reviewed and managed in order to increase efficiency in OIPC reviews, enable timely resolution of PIA files, help reduce backlogs in processing these files, and allow the OIPC to allocate resources to PIA files that require increased attention. Information about those process improvements will be shared in the 2024-25 annual report.

## To meet Goal 2

On November 30, 2023, the OIPC responded to the increasing use of artificial intelligence (AI) by providing guidance regarding AI to custodians, as defined in the *Health Information Act* (HIA) and its regulation. Artificial intelligence is an advanced form of information processing created for the purpose of automating and/or enhancing the performance of human tasks. Because it is still a relatively new type of technology, many organizations are likely to be unfamiliar about how best to ensure their use of AI complies with the law. The new guidance on the use of AI is particularly focused on small custodians in the health sector and is published on the OIPC's website. For organizations other than custodians, the OIPC cooperated with its provincial, territorial and federal counterparts to issue high-level guidance on the use of generative AI. More information is available on the OIPC [website](#).

On December 13, 2023, the OIPC issued new guidance for landlords and tenants on privacy and access to information issues. The guidance was made available on the OIPC [website](#) and was distributed to organizations whose stakeholders have a direct

interest. The guidance included information to help landlords and tenants address questions related to their own specific situation and help ensure they remain aware of privacy and access to information responsibilities and rights under provincial law. The resource also addressed emerging privacy concerns raised by the alleged over-collection of personal information and use of social media to screen prospective tenants.

On January 24, 2024, the OIPC announced a [stakeholder engagement plan](#) for the Alberta innovative technology development sector. The plan, which acknowledges that there is a need to enable innovation while preserving privacy and access rights, is working to build alliances, understand and improve privacy protection within innovative technologies, and contribute to making legislation and regulatory practices appropriate for the current and future waves of innovation. The plan includes working with organizations that develop or operate innovative technologies, and those that provide funding, resources, expertise, information or other inputs to start-ups, small or medium enterprises in the innovative technology development industry.

In the months following the release of the stakeholder engagement plan, the OIPC met with various small businesses and organizations that play a role in the development of innovative technology in Alberta to help them understand the requirements of our privacy laws where they relate to AI. In turn, the OIPC took this opportunity to learn about the various initiatives that are underway to change the way personal information is processed in the health, private and public sectors.

Staff of the OIPC engaged with Alberta's grade 6 school classes as part of the School at the Legislature Program. OIPC staff quizzed the children on their privacy knowledge, gave information about their

privacy rights, and delivered a presentation that addressed salient issues such as the risks of using ChatGPT for homework.

The Alberta OIPC participated in a global privacy sweep which examined more than 1,000 websites and mobile applications. The annual Global Privacy Enforcement Network Sweep took place between January 29 and February 2, 2024. It involved participants, or "sweepers," from 26 privacy enforcement authorities from around the world, including Alberta's OIPC. Our office focussed on scanning apps used in education and educational games, including apps suggested by the Calgary and Edmonton school boards. Sweepers replicated the user experience by engaging with websites and apps to assess the ease with which they could make privacy choices, obtain privacy information, and log out of or delete an account. The results of the privacy sweep were published in July 2024. Read more on the OIPC [website](#).

## To meet Goal 3

As part of the stakeholder engagement plan previously noted for the Alberta innovative technology development sector, the OIPC is collecting the experiences of custodians on the use of innovative technology where this technology leverages health information. In turn, this information will be used to inform the OIPC's recommendations regarding the modernization of privacy legislation, such as PIPA and HIA, that affects the private and health sectors.

In addition to engaging with healthcare providers regarding their use of technology and with businesses providing technology services to providers, the OIPC engaged with organizations such as the Alberta Registered Nurses Association, the



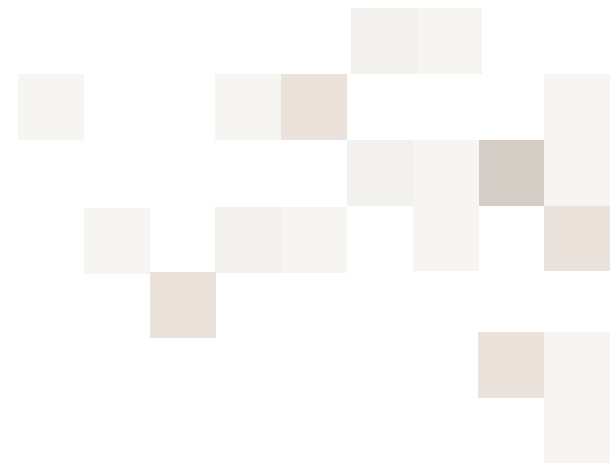
Primary Care Network's privacy officer community of practice, various researchers and Alberta Innovates regarding where their work intersects with HIA, and to inquire regarding opportunities for collaboration.

The OIPC provided the Government of Alberta with its recommendations regarding improvements needed to the FOIP Act. OIPC staff reviewed national and international developments in privacy legislation and privacy rights, the use of innovative technology, and the changing roles of governments. To inform recommendations, the OIPC also reviewed the workings of the access to information system in relation to public bodies. Core recommendations address streamlining access provisions, enhancing protection of Albertans' privacy rights, modernizing enforcement measures, and improving accountability, compliance and trust. More detail on this work is included in the FOIP Act Review portion of the Trends and Issues section of this report.

The OIPC provided the Alberta Legislative Assembly's Standing Committee on Resource Stewardship with its recommendations regarding changes to PIPA. Part of the PIPA review focused on the changing role of data and technology in commerce, and the need to both protect Albertans when engaging in the digital economy and to enable businesses to pursue innovation. Staff reviewed national and international developments in privacy legislation and privacy rights, and looked at major concerns such as the use of technologies like AI and protection of sensitive information, including biometrics. The OIPC has provided more detail on these recommendations on its [website](#). As well, more detail on our work in this area is included in the PIPA Review portion of the Trends and Issues section of this report.

On December 12, 2023, the Commissioner appeared before the House of Commons Standing Committee

on Industry and Technology, as part of the committee's deliberations on Bill C-27. One of Bill C-27's purposes is to replace the current federal private sector privacy law, the *Personal Information Protection and Electronic Documents Act* (PIPEDA). The reason for her appearance was because Alberta's private sector privacy law, PIPA, is substantially similar to PIPEDA and it must remain substantially similar to PIPEDA's successor legislation as well. At her presentation, the Commissioner offered insights regarding challenges faced in the context of Alberta's PIPA and highlighted the changes needed in Bill C-27 to ensure it provides the right balance between the rights of Canadians to privacy and the needs of the digital economy, including innovation.





# TRENDS AND ISSUES

# PIPA REVIEW

The *Personal Information Protection Act* (PIPA) applies to private sector organizations, providing individuals with the right to request access to their own personal information while also setting a framework for private sector organizations to collect, use and disclose personal information.

Section 63 of PIPA requires a special committee of the Legislative Assembly to begin a comprehensive review of the Act every six years after the previous special committee submits its final report.

On May 25, 2022, a government motion was passed by the Legislative Assembly that referred PIPA to the Standing Committee on Alberta's Economic Future to conduct the review, pursuant to section 63 of PIPA.

On January 10, 2023, the Commissioner presented to the committee highlighting PIPA's importance and the Commissioner's powers, as well as identifying global changes in privacy laws that must be considered to ensure PIPA remains relevant.

Just before the provincial election in Alberta in May 2023, all standing committees were dissolved. The review of PIPA re-commenced after the election, led by the Standing Committee on Resource Stewardship, which began its work on January 22, 2024.

Throughout 2023-24, the Commissioner developed a comprehensive submission to the committee, with a number of key recommendations to update and strengthen this law, which is critical to the advancement of the province's interests in the information and digital economy.

Since PIPA came into force more than twenty years ago, in January 2004, the state of technology and the amount of personal information shared by individuals with organizations has changed monumentally. In the early 2000s, less than seven percent of the world was online. By 2020, this had increased to more than 50 percent. Dramatically expanded use of cell phones, apps, social media and online shopping has created a world in which technology touches everything. Vast amounts of personal information are shared by individuals and collected, used and disclosed by private sector organizations, mostly for profit. More recently, the development and use of artificial intelligence, or AI, is ushering in even more changes, including effects on education and children.

In its work to develop its submission to the standing committee, the OIPC also considered the impact of generative AI and quantum computing, since these technological changes have immense potential benefits for societies, but also great potential for harm.

PIPA needs to be amended to protect Albertans' privacy in our evolving information-based society, while also enabling commerce, especially where it relates to the development and deployment of innovative technologies. Alberta needs a modernized private sector privacy law that aligns with leading global privacy laws and achieves a proper balance between protecting privacy and enabling the use of technology by businesses in order to prosper.

Amongst other things, the OIPC’s key recommendations are that PIPA should include:

- recognition of the protection of personal information as a fundamental human right;
- application to political parties and not-for-profit organizations;
- the right of Albertans to access their own personal information;
- the “right to be forgotten”;
- the right to data portability and mobility;
- rules about automated decision-making, including that individuals be granted the right to contest automated decision-making;
- specific protection for children’s personal information;
- specific requirements for privacy management programs and privacy impact assessments, and modifications regarding mandatory breach notification;

- requirements for compliance by service providers and downstream service providers;
- enhanced requirements for organizations to use security safeguards to protect personal information commensurate with its sensitivity;
- requirements for communication in plain language;
- requirements for de-identification and anonymization of personal information;
- provisions for the creation and use of a regulatory sandbox operated by the OIPC; and
- enhanced provisions for enforcement of PIPA.

The OIPC’s goals in developing recommendations for changes to PIPA include ensuring that there are no gaps in the protection of personal information in Alberta that may create unacceptable risks to Albertans; ensuring adequate protection of personal information now and into the future; and promoting a foundation of trust on which to effectively grow the digital economy in Alberta.



# FOIP ACT REVIEW

On March 4, 2024, the OIPC submitted comments and recommendations to the Government of Alberta regarding changes to the FOIP Act. The Act has not been substantially amended since its proclamation in 1995 and has not kept up with societal and technological change and consequent developments in national and international privacy security and technology legislation.

Several developments have occurred that shape the context and need for the FOIP Act review.

There is increased stress on resources such as health services and certain government sectors, such as social services, due to demographic changes, so it is anticipated that government and custodians will use artificial intelligence (AI) in the health sector to relieve the pressures on the health system and improve outcomes.

An increasing share of the economy is the service sector, with the technology sector in particular experiencing expansion. Much of the service sector has started leveraging, or is more intensively utilizing, technologies that process personal information (PI).

Hopes are that technological advances can improve Canada's productivity growth. Technology flows from the private sector, where it is developed, to public and health sectors where it is deployed.

The use of technology utilizing PI has become pervasive in sectors such as education, healthcare and government services. A large share of social functions and processes as versatile as private resale of second hand goods, attending church, making

payments, and providing entertainment have moved from predominantly analog processes to digital or partially digital processes, which handle vast amounts of PI. This has resulted in a number of risks, including risks of harm to the public and to children, from the use of AI and other innovative technologies, including in the education sector, without proper guard rails.

Amongst other things, the OIPC's key recommendations are that a new FOIP Act should include the following improvements.

- Update the purpose sections in the Act, especially regarding the duties to protect personal information (PI), to reflect the changed processing of PI within public bodies.
- Ensure all relevant entities, i.e., those that interact with PI held by public bodies, are in scope of the FOIP Act.
- Codify the duty of public bodies to establish a freedom of information program to process requests within the timeframes established for response to such requests.
- Require a duty to document deliberations, actions and decisions and extend records management to new uses of technology to ensure these are captured within public body records.
- Include authority of the commissioner to require a person to attempt to resolve a dispute about a freedom of information request or complaint with the public body before the commissioner begins or continues the review or investigation of a complaint.

- Include authority for the commissioner to refuse to conduct a review or investigate a complaint where the request is frivolous or vexatious or not made in good faith, or the circumstances otherwise warrant.
- Clarify that the fees to process a freedom of information request must not exceed the actual costs of services.
- Existing exceptions to the right of access, such as cabinet confidences, advice from officials, law enforcement investigations, etc. should not be broadened to reduce the existing right of access.
- Include a right for individuals to access information, including their own PI, in a useable, common digital format.
- Include a right for individuals to object to the use of automated decision-making.
- Include “biometric information” in the definition of “sensitive information”.
- The commissioner be given the authority to decide constitutional and Charter of Rights questions.
- The commissioner be permitted to conduct joint investigations both intra-provincially and extra-provincially.
- The offence provisions be strengthened.
- The whistleblower provision be expanded in scope and strengthened.



# ABANDONED HEALTH RECORDS

The emerging issue of abandoned health records has taken up considerable time and resources of the OIPC in recent years and most notably during 2023-24. In particular, the OIPC's Case Resolution team has dealt with several significant cases, as is highlighted in the section of this annual report on that team's work.

Abandoned health records in Alberta is a serious issue. In these situations, not only is the security of the records in jeopardy but individuals are unable to access their health information for their ongoing treatment and care. The OIPC faces several challenges in dealing with these lengthy and resource-intensive cases:

- There is a lack of regulatory requirements in this area. HIA does not address situations where a custodian retires, leaves Alberta, becomes incapacitated or dies, and has not made arrangements for the ongoing management and protection of health records by arranging for a successor custodian to take custody and control of the records. The Act authorizes the disclosure or transfer of health records from one custodian to a successor custodian, but does not require it (section 35(1)(q)). The OIPC has initiated discussions with Alberta Health and other stakeholders about what legislative amendments to HIA or the *Health Professions Act* are necessary to prevent records from being abandoned by members of regulated colleges and how best to manage records that are abandoned.
- In some cases, the OIPC is unable to locate the responsible custodian or a designated successor custodian. Consequently, for some of these matters the OIPC has made arrangements for secure storage in order to protect the confidentiality and integrity of the records. However, the storage of these records by the OIPC is problematic, since the Commissioner is not a custodian under HIA and does not have authority to provide access to these patient records.
- Records are often left on the premises of commercial landlords, raising questions about their responsibilities in relation to patient records. Further, landlords who wish to lease the vacated space can be frustrated with the length of time it can take to identify responsible custodians or successor custodians and have health records removed or disposed of.

The Commissioner wrote to the Minister of Health on the issue of abandoned records in October 2023. Representatives of the OIPC then met with representatives of the Department of Health on December 8, 2023 to discuss legislative amendments to HIA or the *Health Professions Act* to address the matter of abandoned health records. These discussions continued into 2024-25.

This issue requires concerted attention by all stakeholders, including the Government of Alberta, the College of Physicians & Surgeons of Alberta and other regulated colleges, and the OIPC.

A woman with dark hair and glasses is looking thoughtfully to the right, holding a blue pen. The background is a blurred office setting with computer monitors. The image is overlaid with various data visualization graphics: a grid of squares in the top left, a line graph with three nodes in the top left, a bar chart with five bars in the middle left, a shield with a checkmark in the top right, and a complex line graph at the bottom. The text 'BY THE NUMBERS' is prominently displayed in the lower-left quadrant.

BY THE  
**NUMBERS**



# TOTAL CASES OPENED

Figure 6: **Cases Opened by Legislation (Three Year Comparison)**

FOIP Act   HIA   PIPA

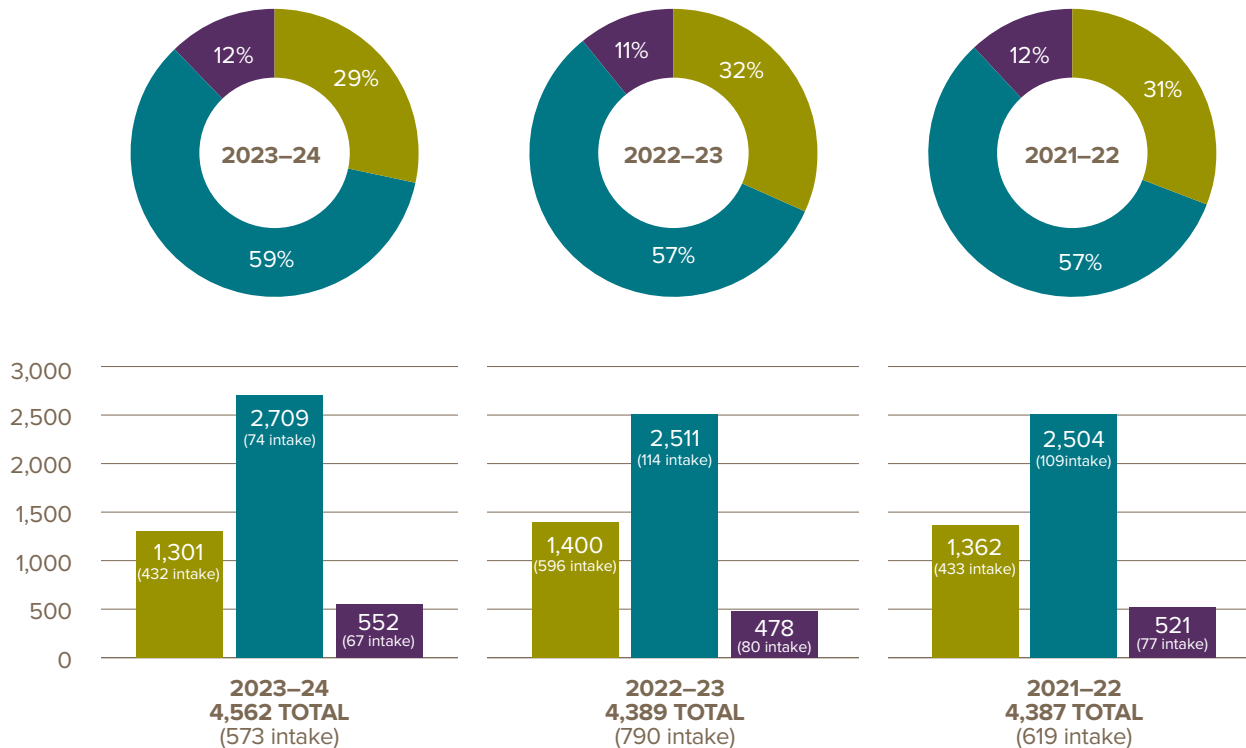


Figure 7: **Cases Opened by Case Type and by Legislation (Three Year Comparison)**

Statistics are from the period of April 1, 2023 to March 31, 2024

	FOIP Act Cases Opened			HIA Cases Opened			PIPA Cases Opened		
	2023-24	2022-23	2021-22	2023-24	2022-23	2021-22	2023-24	2022-23	2021-22
Advice and Direction									
Authorization to Disregard a Request	7	2	4			1		2	
Complaint	36	42	38	47	20	48	45	41	38
Disclosure to Commissioner									
Engage in or Commission a Study									
Excuse Fee	3	1	5						
Investigation Generated by Commissioner	28	4	2	53	1	6	6	3	2
Notification to OIPC	5	2	1						
Offence Investigation				1	5	17			
Privacy Impact Assessment	4	7	10	2,027	1,856	1,730	8	1	11
Request for Advanced Ruling									
Request for Authorization to Indirectly Collect									
Request for Information	6	4	14	31	16	23	8	3	7
Request for Review	460	349	343	25	24	19	37	34	52
Request for Review 3rd Party	55	46	41						
Request for Time Extension	213	294	398	3			1	1	1
Self-reported Breach	52	53	73	448	475	551	380	313	333
<b>SUB TOTAL</b>	<b>869</b>	<b>804</b>	<b>929</b>	<b>2,635</b>	<b>2,397</b>	<b>2,395</b>	<b>485</b>	<b>398</b>	<b>444</b>
Intake-related cases	432	596	433	74	114	109	67	80	77
<b>OVERALL TOTAL</b>	<b>1,301</b>	<b>1,400</b>	<b>1,362</b>	<b>2,709</b>	<b>2,511</b>	<b>2,504</b>	<b>552</b>	<b>478</b>	<b>521</b>

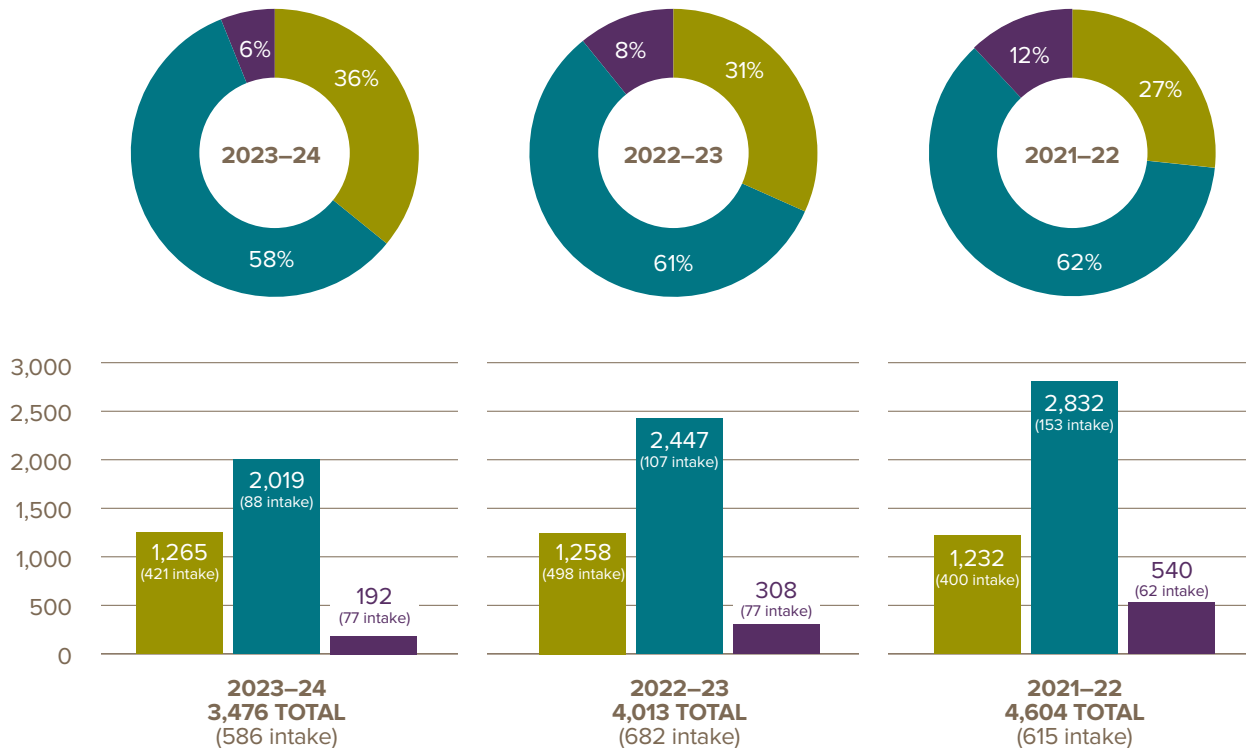
**Notes:**

- 1 See Appendix A for cases opened in 2023-24 by case type, entity type and legislation.
- 2 A listing of all privacy impact assessments accepted in 2023-24 is available on the OIPC website at oipc.ab.ca.
- 3 Only the FOIP Act allows a third party to request a review of a decision to release third party information to an applicant.
- 4 Intake cases include determining whether parties coming to the OIPC are properly exercising the rights set out in the FOIP Act, HIA and PIPA; whether the matters or issues identified by the parties are within the Commissioner's legislative jurisdiction; and investigating and trying to resolve certain requests or complaints.

# TOTAL CASES CLOSED

Figure 8: **Cases Closed by Legislation (Three Year Comparison)**

FOIP Act   HIA   PIPA



**Figure 9: Cases Closed by Case Type and by Legislation (Three Year Comparison)**

Statistics are from the period of April 1, 2023 to March 31, 2024

	FOIP Act Cases Closed			HIA Cases Closed			PIPA Cases Closed		
	2023-24	2022-23	2021-22	2023-24	2022-23	2021-22	2023-24	2022-23	2021-22
Advice and Direction			1						
Authorization to Disregard a Request	5	7	4		1			4	1
Complaint	59	50	36	53	34	56	37	55	64
Disclosure to Commissioner									
Engage in or Commission a Study									
Excuse Fee	3	3	6			1			
Investigation Generated by Commissioner	2	8	3	6	19	7	6	6	7
Notification to OIPC	5	2	1						
Offence Investigation	3		1	2	12	13			
Privacy Impact Assessment	10	11	13	1,367	1,557	1,560	6	7	6
Request for Authorization to Disregard Request									
Request for Authorization to Indirectly Collect									
Request for Information	2	5	15	17	14	18	3	1	7
Request for Review	407	286	286	33	22	24	40	38	52
Request for Review 3rd Party	47	30	31						
Request for Time Extension	228	293	375	2			1	1	1
Self-reported Breach	73	65	60	451	681	1,000	22	119	340
<b>SUB TOTAL</b>	<b>844</b>	<b>760</b>	<b>832</b>	<b>1,931</b>	<b>2,340</b>	<b>2,679</b>	<b>115</b>	<b>231</b>	<b>478</b>
Intake-related cases	421	498	400	88	107	153	77	77	62
<b>OVERALL TOTAL</b>	<b>1,265</b>	<b>1,258</b>	<b>1,232</b>	<b>2,019</b>	<b>2,447</b>	<b>2,832</b>	<b>192</b>	<b>308</b>	<b>540</b>

**Notes:**

- 1 See Appendix B for cases closed in 2023-24 by case type, entity type and legislation.
- 2 A listing of all privacy impact assessments accepted in 2023-24 is available on the OIPC website at oipc.ab.ca.
- 3 Only the FOIP Act allows a third party to request a review of a decision to release third party information to an applicant.
- 4 Intake cases include determining whether parties coming to the OIPC are properly exercising the rights set out in the FOIP Act, HIA and PIPA; whether the matters or issues identified by the parties are within the Commissioner's legislative jurisdiction; and investigating and trying to resolve certain requests or complaints.
- 5 Closed PIAs include those accepted, unaccepted, conditionally accepted, and out of jurisdiction.

## Figure 10: Cases Closed by Resolution Method

Statistics are from the period April 1, 2023 to March 31, 2024

Under the Acts, only certain case types can proceed to inquiry, if the matters are not resolved at the settlement stage. The statistics below are those case types that can proceed to inquiry (request for review, request for review 3rd party, request to excuse fees and complaint files).

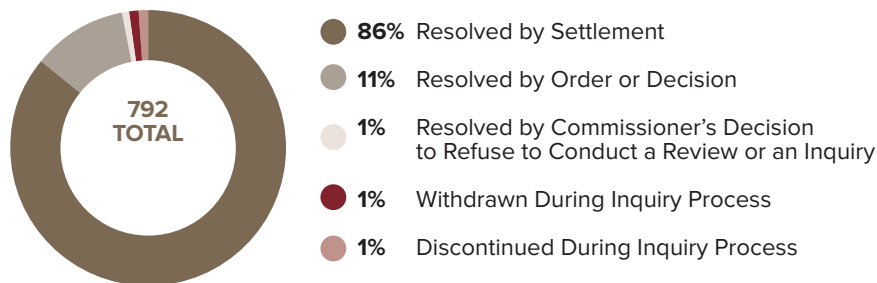
	FOIP Act	HIA	PIPA	TOTAL
Resolved by Settlement	516	86	77	679
Resolved by Order or Decision	68	11	8	87
Resolved by Commissioner's Decision to Refuse to Conduct a Review or an Inquiry	4	2	0	6
Withdrawn During Inquiry Process	9	0	1	10
Discontinued During Inquiry Process	10	0	0	10
<b>TOTAL</b>	<b>607</b>	<b>99</b>	<b>86</b>	<b>792</b>

FOIP Act Orders: 44 (67 cases); FOIP Act Decisions: 1 (1 case); HIA Orders: 11 (11 cases); PIPA Orders: 8 (8 cases)

### Notes:

- 1 This table includes only the orders and decisions issued that concluded/closed the file. See Appendix C for a list of all orders, decisions and public investigation reports issued in 2023-24. Copies of orders, decisions and public investigation reports are available on the OIPC website at oipc.ab.ca.
- 2 Orders and decisions are recorded according to the date on which the order or decision was signed, rather than the date on which the order or decision was publicly released.
- 3 An inquiry can be discontinued due to a lack of contact with or participation of the applicant or complainant or if the issues have become moot.

## Figure 11: Percentage of Cases Closed by Resolution Method



# GENERAL ENQUIRIES

Figure 12: **Total Number of General Enquiries**

Statistics are from the period April 1, 2023 to March 31, 2024

FOIP Act	Telephone Calls
Public Bodies	51
Individuals	193
<b>TOTAL</b>	<b>244</b>

HIA	Telephone Calls
Custodians	243
Individuals	485
<b>TOTAL</b>	<b>728</b>

PIPA	Telephone Calls
Organizations	93
Individuals	626
<b>TOTAL</b>	<b>719</b>

FOIP Act / HIA / PIPA / Non Jurisdictional	Emails
<b>TOTAL</b>	<b>471</b>

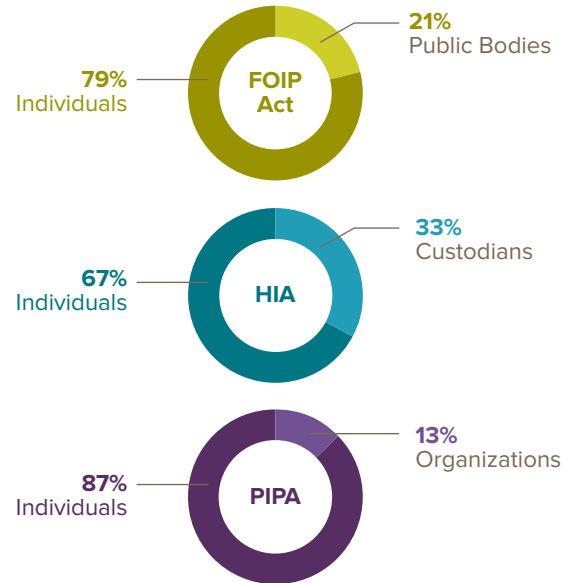
Non-jurisdictional	Telephone Calls
<b>TOTAL</b>	<b>148</b>

<b>OVERALL TOTAL</b>	<b>2,310</b>
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Figure 13: **Percentage Distribution of General Enquiries**

Statistics are from the period April 1, 2023 to March 31, 2024



“ The 2023-24 year can best be characterized as a year of change and engagement for the office as we worked to tackle the goals set out in our Strategic Business Plan 2024-2027. My office undertook a full review of all our internal procedures with a specific focus on shortening timelines to settle requests for review and complaints, as well as other internal processes. To that end, we modified our case resolution procedures and began to put the new processes for requests for review and complaints into action in early 2024. We also began looking at our other internal procedures, such as how we review privacy impact assessments and breaches reported to our office. We are working to make improvements that ensure timeliness and quality in completing our work associated with these cases. I am pleased and proud of the hard work and dedication that all the teams within my office have demonstrated, as we move together toward achievement of these goals. Ultimately, our hope is that our efforts will make a real difference to Albertans.”

**Diane McLeod**

Alberta Information and Privacy Commissioner



# TOTAL CASES CARRIED OVER INTO NEW FISCAL YEAR 2024-25

Figure 14: **Case Resolution Team by Case Type**

Statistics are from the period of April 1, 2023 to March 31, 2024

Case Types (FOIP Act / HIA / PIPA)	Files Carried Over from 2022-23	Opened in 2023-24	Closed in 2023-24	Total Cases Carried Over to 2024-25
Advice and Direction				0
Authorization to Indirectly Collect				0
Complaint	115	120	112	123
Disclosure to Commissioner				0
Engage in or Commission a Study				0
Excuse Fee	3	3	3	3
Investigation Generated by Commissioner	7	18	8	17
Notification to OIPC				0
Offence Investigation				0
Request for Information	1	7	4	4
Request for Review	604	452	375	681
Request for Review 3rd Party	65	52	31	86
Request for Time Extension	26	207	230	3
<b>TOTAL</b>	<b>821</b>	<b>859</b>	<b>763</b>	<b>917</b>

**Note:**

The bulk of the work of the Case Resolution (CR) Team is to informally resolve complaints and requests for review (RFRs) received from the public, which are related to the exercise of their rights under the FOIP Act, HIA and PIPA. Overall, the RFRs and complaint files opened in this fiscal year have increased compared to 2022-23 (there were 112 more RFR files and 32 more complaint files opened in 2023-24 than in 2022-23). Despite a large carryover of RFR files from 2022-23 (604), the CR team closed a significant number of request for review files in 2023-24 (375 as opposed to 250 in 2022-23). There was some assistance provided later in the 2023-24 fiscal year by contractors hired to assist; however, it takes significant internal resources and time to bring contractors up to speed so that they are able to do the work. The team composition remains at 7.2 FTE, as it was last fiscal year. There is a significant number of RFR files (681) being carried over into the next fiscal year.



## Figure 15: Compliance Support Team by Case Type

Statistics are from the period of April 1, 2023 to March 31, 2024

Case Types (FOIP Act / HIA / PIPA)	Files Carried Over from 2022-23	Opened in 2023-24	Closed in 2023-24	Total Cases Carried Over to 2024-25
Advice and Direction				0
Authorization to Indirectly Collect				0
Complaint	12		12	0
Disclosure to Commissioner				0
Engage in or Commission a Study				0
Excuse Fee				0
Investigation Generated by Commissioner	9	43	4	48
Notification to OIPC		5	5	0
Offence Investigation	10	1	9	2
Privacy Impact Assessment	1,886	2,039	1,386	2,539
Request for Information	22	35	21	36
Request for Review				0
Request for Review 3rd Party				0
Request for Time Extension				0
Self-reported Breach	580	881	545	916
<b>TOTAL</b>	<b>2,519</b>	<b>3,004</b>	<b>1,982</b>	<b>3,541</b>

### Note:

The bulk of the work for the Compliance Support (CS) Team is reviewing PIAs, SRBs, and carrying out privacy education (stakeholder engagement). There was a reduction in the number of PIAs closed in 2023-24 from the previous fiscal year. The CS team was down by approximately 1.5 FTE members during several periods of the fiscal year. There was also an increase of 707 PIAs submitted in 2023-24 as compared to 2022-23. The increase could be attributed to additional custodians coming on board under the HIA Regulation as well as a number of Netcare PIAs, including many PIAs associated with a new real time integration pharmacy system. Out of the 2,027 PIA files opened in 2023-24 under HIA, 488 were Netcare-related. The team was also focused on the re-design of the self-reported breach (SRB) process. This resulted in fewer closures of SRB files in 2023-24. There were 580 SRBs carried over from 2022-23 and 916 are being carried over into 2024-25. The changes to the SRB process will be brought into effect in 2024-25.

## Figure 16: Investigations Team by Case Type

Statistics are from the period of April 1, 2023 to March 31, 2024

Case Types (FOIP Act / HIA / PIPA)	Files Carried Over from 2022-23	Opened in 2023-24	Closed in 2023-24	Total Cases Carried Over to 2024-25
Advice and Direction				0
Authorization to Indirectly Collect				0
Complaint	9			9
Disclosure to Commissioner				0
Engage in or Commission a Study				0
Excuse Fee				0
Investigation Generated by Commissioner	20	66	3	83
Notification to OIPC				0
Offence Investigation	10	1		11
Privacy Impact Assessment				0
Request for Information	1			1
Request for Review				0
Request for Review 3rd Party				0
Request for Time Extension				0
Self-reported Breach	9			9
<b>TOTAL</b>	<b>49</b>	<b>67</b>	<b>3</b>	<b>113</b>

**Note:**

In 2023-24, the Investigations Team opened up 66 investigations generated by the Commissioner. Of these, two are systemic investigations. One involves 26 public bodies. The other involves 36 custodians.

## Figure 17: Adjudication Team by Case Type

Statistics are from the period of April 1, 2023 to March 31, 2024

Case Types (FOIP Act / HIA / PIPA)	Files Carried Over from 2022- 23	Opened in 2023-24	Closed in 2023-24	Total Cases Carried Over to 2024-25
Complaint	23	4	16	11
Excuse Fee		1		1
Request for Review	151	23	72	102
Request for Review 3rd Party	38	2	14	26
<b>TOTAL</b>	<b>212</b>	<b>30</b>	<b>102</b>	<b>140</b>

**Note:**

The carryover files for the Adjudication Team decreased by 34% from 2022-23 to 2023-24, which is positive. This is the result of a 56% decrease in files opened in 2023-24 as compared to 2022-23. The files closed for each year are on par. A smaller number of carryover files means we have decreased our backlog and should position us to complete adjudications in a timelier manner in 2024-25.

A man and a woman in business attire are looking at a laptop in a server room. The background is filled with server racks. The image is overlaid with various digital graphics: a network diagram with three nodes and lines in the top center; a padlock icon inside a dashed box on the right; a hand pointing at a screen on the right; a barcode-like graphic above the laptop; and a target-like graphic on the left. The overall color scheme is blue and white.

# REGULATION AND ENFORCEMENT

# FORMAL INVESTIGATIONS

The Commissioner has the power to conduct investigations to ensure compliance with the FOIP Act, HIA, and PIPA. The results of some, but not all, of these investigations are included in public investigation reports.

Below are summaries of two formal investigations completed in 2023-24.

## Unauthorized disclosure of personal information on Brightsquid messaging service

On July 20, 2020, a physician asked the Commissioner to investigate the potential unauthorized disclosure of personal information on Secure-Mail, an email-like secure messaging service provided by Brightsquid Secure Communications Corporation. Secure-Mail enables the exchange of information between health care practitioners (providers) and their patients and other health care practitioners. The investigation focused on Brightsquid's disclosure of patient and provider personal information and its collection and disclosure of patient personal health numbers.

With respect to patient personal information, the investigation found Brightsquid was disclosing patients' names, email addresses, dates of birth, and general location to all providers on Secure-Mail for the reasonable purpose of enabling them to verify patient identity prior to establishing communication. However, the investigation found that disclosure of patient personal information to all providers on Secure-Mail,

including those outside Alberta, is beyond the extent that is reasonable and contravenes section 19(2) of PIPA. Further, Brightsquid did not have consent for the disclosure of patients' personal information under section 8 of PIPA, nor did it have authority to disclose personal information without consent under section 20.

The investigation also determined that Brightsquid was collecting the personal health numbers of patients. Brightsquid is not permitted by section 11 of PIPA for this collection. Consequently, it has no authority to disclose this information.

With respect to provider personal information, the investigation found Brightsquid was disclosing personal information (association or college name) of providers to all users (providers and patients) of Secure-Mail for the reasonable purpose of enabling all users to verify the identity of a provider prior to establishing communication. Disclosing providers' association or college name to all users is to the extent reasonable; however, Brightsquid did not have consent for the disclosure of provider personal information under section 8 of PIPA, nor did it have authority to disclose personal information without consent under section 20. Brightsquid disputed these findings on the basis that it does not collect or disclose the association or college name of providers.

A series of recommendations were provided to remedy the non-compliance found in the investigation. Brightsquid was asked to modify its privacy policy to specify purposes for disclosing personal information,

to obtain consent from its users for such disclosure, and to cease disclosure where consent could not be obtained. Brightsquid was also asked to cease its collection of personal health numbers and destroy any that it had already collected. All recommendations were accepted by Brightsquid, which was very cooperative throughout the investigation and took action to remedy compliance issues as they were brought to their attention.

### **City of Edmonton collection of personal information for DATS scheduling in response to COVID-19 pandemic authorized under the FOIP Act**

The OIPC investigated a practice which had been implemented during the COVID-19 pandemic by the Dedicated Accessible Transit Service (DATS), an amenity operated by the City of Edmonton. The City had instituted a requirement that DATS clients answer questions about their health/COVID-19 status before a trip on the transit service would be booked. The questions helped to determine the type of ride service required, including if there was a need for single-client transport versus multi-client transport. The practice of requiring the screening questions began in April 2020 and ended during the summer of 2021.

The investigation concluded that the public body (City of Edmonton) had authority under section 33(c) of the FOIP Act to collect the responses from its clients to the health/COVID-19 status screening questions. Section 33 permits collection of personal information that relates directly to and is necessary for an operating program or activity of the public body. The OIPC published its findings in April 2023 as Investigation Report F2023-IR-01.



# INFORMAL INVESTIGATIONS

In 2023-24, on the initiative of the Commissioner, a new process was introduced to use an informal investigation approach, whenever possible, for investigations generated by the Commissioner. The purpose of such informal investigations is to attempt to determine whether there has been a contravention of the relevant Act and, if so, to understand how it occurred and then informally resolve matters in as efficient a manner as possible. If a matter is not resolved, it moves to a formal investigation and a public investigation report is issued. Some of these informal investigations are highlighted below.

## **Unauthorized disclosures of children’s personal information in Alberta Child Health Benefit Program eligibility letters**

An individual informed the OIPC of potential unauthorized disclosures under the FOIP Act of personal information contained in eligibility letters for the Alberta Child Health Benefit (ACHB) Program. In or around September 2022, certain letters from the Health Benefit Contact Centre included health benefit cards containing the names, dates of birth and identification numbers of children who were not related to the ACHB program applicants that the letters were addressed to. The program is jointly administered by Alberta Health and Seniors, Community and Social Services (SCSS).

An investigation was initiated under sections 53(1)(a) of the FOIP Act and 84(1)(a) of HIA to examine whether personal information of child applicants was being disclosed to individuals other than the guardians who had applied on the child’s behalf.

The investigation found that there were unauthorized disclosures of personal information of child applicants under the FOIP Act, consisting of names, dates of birth and identification numbers. No health information was disclosed. Alberta Health and SCSS determined that changes to the annual renewal process had caused the information to be processed in an unexpected manner. They implemented four recommendations for the 2023 annual renewal process to mitigate against further unauthorized disclosures.

The Commissioner was satisfied with the outcome of the review conducted by Alberta Health and SCSS and the informal investigation was concluded.

## **Products returned to online retailers found at Calgary liquidation store with buyers’ personal information still attached**

An individual reported that a Krazy Binz Liquidation outlet in Calgary was selling returned merchandise packages from various online retailers to the public with the mailing labels intact. The labels included names, mailing addresses and phone numbers, allowing for the identification of the original purchasers.

The Commissioner opened an investigation into Krazy Binz under PIPA. The purpose of the investigation was to determine whether Krazy Binz, an organization covered under PIPA, was collecting and disclosing personal information in the manner described and, if so, whether it had authority to do so under PIPA and whether it made reasonable security arrangements to protect the personal information.

The investigation determined that Crazy Binz did not have authority or consent to collect or disclose these customers' personal information. It also found that the organization did not have appropriate safeguards in place. It did not require its suppliers to remove previously-used shipping labels, nor did it have consistent practices in place to remove labels prior to placing them into bins for sale. Crazy Binz accepted the recommendations made by the OIPC to ensure removal of customer personal information from packages before sale.

### **Personal information disclosed on Accident Support Services International kiosk when reporting traffic accident information**

An individual informed the OIPC that, when reporting a traffic accident at an Accident Support Services International (ASSI) self-serve kiosk in Edmonton, the individual was able to view personal information of other individuals on the kiosk screen. The Commissioner initiated an investigation to review whether there was an unauthorized disclosure of personal information by ASSI, an organization covered under PIPA, and if appropriate safeguards were in place.

The investigation determined that there was an unauthorized disclosure of personal information as individuals were able to view personal information of others, for example those who had reported traffic accidents. Further, appropriate safeguards were not in place as electronic folders containing the personal information were open for viewing on the kiosks. Recommendations were made, and accepted, to correct the issue and prevent the folders containing personal information from being viewable on the kiosks. The Commissioner was satisfied with the outcome of the investigation.





# CASES OF ABANDONED HEALTH RECORDS

As indicated above in the Trends and Issues section of this report, abandoned health records is an emerging issue of great concern. Below are some examples of cases of this type that we worked on in 2023-24.

In 2023-2024, the OIPC received three reports of abandoned records involving numerous custodians and thousands of patient records left behind by custodians who closed or abandoned their practices and failed to transfer their health records to a successor custodian. In these cases, the OIPC tries to secure the cooperation of the custodians (or former custodians) to deal with the records in accordance with HIA or to transfer them to a successor custodian. These investigations are handled by the Case Resolution team or Compliance Support team, depending on the circumstances.

Two of these cases are highlighted below. The third case, involving abandoned electronic medical records, is ongoing.

## **Abandoned records from Calgary medical clinic**

In April 2023, a box containing patient health records was found near a dumpster at a building in Calgary. Subsequently, an entire storage space with 59 boxes of abandoned patients' records was discovered in the same building.

The OIPC took possession of the box found at the dumpster. The remaining boxes were securely stored by the landlord.

The assigned investigator had difficulty identifying the responsible custodian. The physician whose name was on the boxes had retired almost a decade ago and had sold his practice to two physicians. After reviewing various documents and information gathered from the purchasing physicians, one was identified as the responsible successor custodian.

This physician retained a lawyer who collected and secured the boxes of patient records with the assistance of an external information manager. The information manager reviewed the patient records and arranged for eligible records to be destroyed under the College of Physicians & Surgeons of Alberta retention standards. The remaining records were securely stored and were to be managed in accordance with HIA by the successor custodian.

## **Abandoned records from former multidisciplinary medical facility in Edmonton**

In July 2023, a property management company reported that a large volume of patient health records had been found in a former multi-disciplinary medical clinic located in a building in Edmonton. The physicians had vacated the premises and left health records and medical equipment behind.

OIPC investigators attended the site and discovered patient charts and other records in large recycling/shredding bins, a large volume of patient charts in the leased spaces on the second floor, and thousands of

patient records in a storage area called the penthouse, which was used as an overflow storage space for patient records. There were also boxes of records relating to former clinic employees.

Following the discovery, several OIPC staff attended the building on multiple occasions to sort through and review the records in an effort to identify the responsible custodians. The team identified 15 physicians who were custodians of the records (a mix of actively practicing and retired).

In the penthouse, the team discovered a large cache (thousands) of X-ray records which were from an X-ray department that the clinic had operated in the building. The physician responsible for the X-ray records had retired in 2021 and was no longer a regulated member of the College of Physicians & Surgeons of Alberta (CPSA), which also means that HIA no longer applies to the physician as a custodian. However, the physician agreed to attend the clinic and review the X-ray records. Subsequently, the property management company arranged for 550 lbs of X-rays to be securely disposed of by a medical waste disposal company.

In addition to the abandoned records, there were a number of abandoned diagnostic devices and other office equipment in the former clinic space. The assigned investigator consulted with the clinic's IT company and CPSA diagnostic equipment experts to try to determine whether the equipment held health information or not. The investigator also sent letters to the physicians advising them of their responsibility for any health information that may be stored on the equipment and giving them a deadline to advise the investigator on this issue. Shortly thereafter, the equipment was seized by a bailiff for auction. A consultant hired by a lawyer representing five of the custodians examined several of the diagnostic devices and concluded that they did not have hard drives nor were they capable of storing any health information.

The OIPC also examined how the custodians managed their electronic medical records (EMR) when the clinic closed. It was confirmed that the clinic's EMR account had been terminated and that no backups remained.

The practicing physicians either arranged for their patients' electronic medical records to be exported to a new EMR provider, set up their own account with the EMR vendor, or transferred their patient records over to the new clinic account. The retired physicians made prior "successor custodian" agreements for their patient records to transfer to another active physician.

Following several months of work by the assigned investigator, the paper records were either retrieved by the custodians or securely destroyed, where permitted by the retention schedule. The employment records were reviewed by the former clinic manager and the required documents were scanned and securely stored. The remainder were destroyed.

Overall, this investigation involved:

- 14 custodians, 4 of whom were retired;
- 12 HIA investigations (a number of retired custodians were dealt with in the master investigation file);
- 1 PIPA investigation to deal with abandoned employee records;
- 1 lawyer representing five custodians;
- 3 site visits to the medical clinic involving between 3 and 5 staff per visit;
- consultations with the IT company, the property manager, the bailiff, the auction company, two radiology groups, the clinic's former EMR provider and the CPSA.

# SETTLED REQUESTS FOR REVIEWS AND COMPLAINTS

All three Acts authorize the Commissioner to mediate or investigate a request for review or a complaint for the purposes of settling without the need to conduct an inquiry. In 2023-2024, 86% of files that could proceed to inquiry were resolved through settlement, an increase from 78% in 2022-2023. In total, 679 files were resolved through settlement, representing a 69% increase compared with 2022-23 (403).

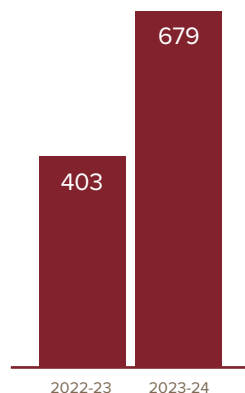
In 2023-24, a total of

# 679

files were resolved through settlement, an **increase** of

# ↑ 69%

compared to 2022-23.



## Health Information “Snooping” Complaints

In 2023-24, the OIPC received a large number of “snooping” complaints, involving alleged unauthorized access to individuals’ health information by health service providers. These complaints may come forward after an individual has requested the audit logs for their electronic medical records and identified suspicious accesses or when an individual has been notified by a health care custodian under HIA that their health information has been accessed without authorization.

The OIPC investigates whether the accesses were unauthorized under HIA and, if so, whether the custodian responsible for HIA compliance had reasonable safeguards in place to protect against unauthorized accesses to health information. Common factors found in unauthorized access cases include the following:

- The accesses are made by a known acquaintance, friend, co-worker or relative, or a user known to be in dispute (i.e. a legal matter) with the individual.
- The accesses are to the records of a well-known individual, or someone who has been in media reports, by users without an apparent need-to-know.
- The accesses are to the health records of an individual who has received little or no health services from the location the accesses were made from during the time in question.

The OIPC reminds custodians to ensure reasonable safeguards are in place to prevent snooping and to provide appropriate training and education to all those who have access to personal health information, in accordance with their duties under HIA and the Health Information Regulation.

## Requests to Expedite Files or Bypass the Settlement Process

The OIPC has seen an increase in requests by applicants or complainants to have their matters expedited in the queue or to bypass the settlement process and go directly to inquiry. Often, we get such requests when records are required for a legal proceeding or a media report.

The OIPC publishes our timelines for conducting a review on our website. Generally speaking, files are dealt with on a first come/first serve basis for fairness purposes. It is not part of our normal process to expedite certain matters. Our position is that it is not fair to prioritize certain requests over others as all FOIP Act requests and reviews are important, as recognized by the court (see *Blades v. Alberta (Information and Privacy Commissioner)*, 2021 ABQB 725 (CanLII) at paras. 62 & 63)). While there is some discretion to expedite a request for review if the Commissioner decides not to authorize the settlement process and to move a matter directly to inquiry, for example, there must be some compelling basis for exercising discretion in that way.

The OIPC recognizes the importance of timely reviews to the access and privacy rights of Albertans. The office continues to implement changes to address our backlog and work to reduce the time it takes to conduct reviews and investigate complaints. See the *Achieving Our Goals* section of this report, as well as a summary of some process improvements on page 53, for more detail.



## Improvements to OIPC Request for Review/Complaints Settlement Processes

In 2023, the OIPC examined its procedures for settling access request reviews and privacy complaints under Alberta's three access and privacy laws with the goal of reducing the time it takes to process a file, while still maintaining quality and value.

In March 2024, the OIPC announced changes to these procedures, which took effect on April 1, 2024.

Key changes include:

- enforcement of submission requirements and page limitations;
- contact with applicants and complainants at the intake stage to discuss their submission and obtain clarification;
- a new refer-back process for privacy complaints and single-issue 'adequacy of search' reviews to allow public bodies, organizations or custodians the opportunity to respond before the matter is dealt with by the OIPC;
- identification of complaint and review issues by the OIPC at the intake phase;
- a requirement that the public body, custodian or organization be asked to provide a contact person, with the ability to settle the issues, who will be responsible for working with the OIPC investigator to settle the matter;

- discussions between the OIPC investigator (SIPM) and the contact for the public body, custodian or organization over the phone or a virtual platform to try to settle the matter (the SIPM will not ask for or accept written submissions unless circumstances warrant); and
- in the case of partial or no resolution, the Request for Inquiry form used in the past will no longer be used. If the public body/custodian/organization or the applicant/complainant does not accept the SIPM's decision and any recommendations, the file will be brought to the Commissioner to determine whether an inquiry will proceed on those matters that have not been settled.

More detail about the process changes is found on the OIPC [website](#).

# REQUESTS FOR TIME EXTENSIONS BY PUBLIC BODIES

A public body must make every reasonable effort to respond to an access request under the FOIP Act within 30 calendar days (section 11). A public body may extend the time limit for responding by up to 30 days on its own authority in certain circumstances (section 14(1)).

An extension period longer than an additional 30 days requires the Commissioner’s approval (sections 14(1) and (2)). A failure by a public body to respond to a request within the 30-day time limit, or a time limit extended under section 14, is treated as a decision to refuse access (section 11(2)).

In 2023-24, there were 213 requests for time extensions submitted by public bodies to the OIPC (Figure 18), representing a 28 % decrease compared with 294 in 2022-23 (Figure 19).

Of the 213 requests received by the OIPC 84 % were the first request; 14 % were second requests; 1 % were third requests; and 1 % were fourth (or more) requests made by a public body.

In total, 33 % of the time extension requests were granted to the public body. The remaining requests were partially granted or denied, were non-jurisdictional, or were withdrawn by the public body.

The OIPC is pleased to see the downward trend in the number of requests for time extensions from public bodies and anticipates that improvements to OIPC procedures for these requests will lead to further decreases. The office will continue to monitor the requests being made and the impact that time extensions have on Albertans’ right to access information held by public bodies.

Figure 18: Requests for Time Extensions Submitted by Public Bodies

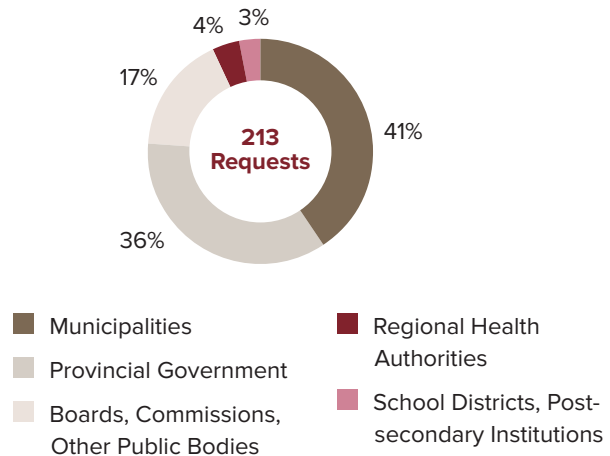
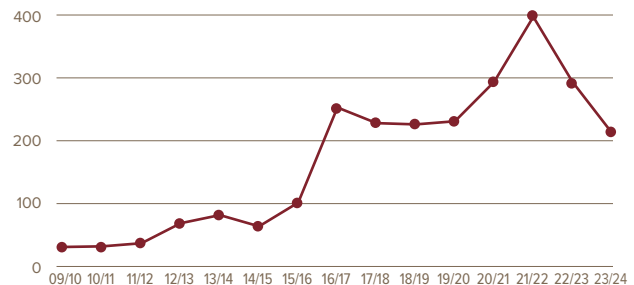


Figure 19: Trend in Number of Requests for Time Extensions 2009–2024



# PRIVACY IMPACT ASSESSMENT REVIEWS

A privacy impact assessment (PIA) helps to identify and address potential privacy risks that may occur in a project. A PIA is used for information systems, administrative practices and policy proposals that relate to the collection, use or disclosure of individually identifying personal or health information.

There were 1,383 PIAs accepted by the OIPC in 2023-24, representing a 25.8% decrease compared with 2022-23 (1,864). The OIPC's current practice is to either 'accept' or 'not accept' a PIA. Acceptance reflects the opinion of the person reviewing the PIA, usually a senior information and privacy manager, that the custodian, public body or organization has considered the requirements of the applicable privacy law and has made reasonable efforts to protect privacy. Work was begun in 2023-24 to change the way PIAs are reviewed and managed. Information about those process improvements will be shared in the 2024-25 annual report.

Health custodians under HIA submit the majority of PIAs to the OIPC. Only HIA, under section 64, requires the submission of PIAs to the OIPC for review and comment. Similar PIA requirements do not exist under the FOIP Act and PIPA. As a result, public bodies and private sector organizations submit few PIAs to the OIPC and any that are submitted are voluntary.

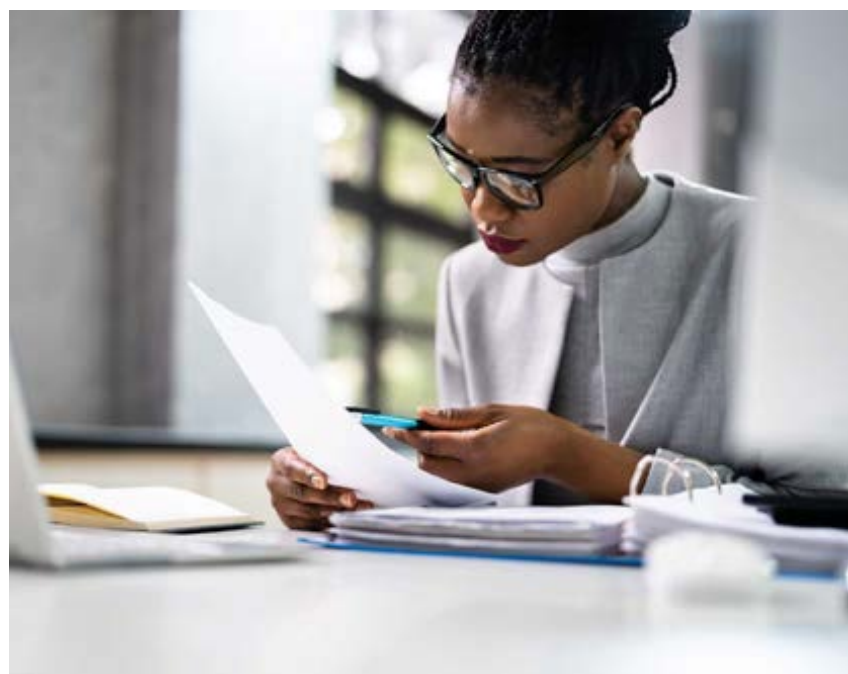
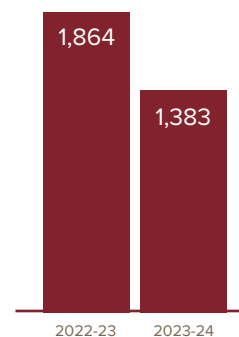
A number of notable PIAs, which were submitted voluntarily in 2023-24 to the OIPC under the FOIP Act and PIPA, are summarized below. One notable PIA was submitted to the OIPC under HIA, also summarized below.

# 1,383

PIAs were accepted by the OIPC, representing a **decrease** of

# ↓ 25.8%

compared to 2022-23.



## Notable HIA PIA

The Connect Care PIA was submitted to the OIPC by Alberta Health Services (AHS) and is still under review.

According to the submission, Connect Care is a province-wide multi-year clinical transformation project that changes the way AHS provides health care, fully integrating standards-driven health care and bridging health information between health services providers and patients. Connect Care provides a single health care record for each Albertan that can be accessed at the point of care to support informed health services delivery and to manage the health system. There are nine waves of Connect Care implementation, with the PIA describing waves one to seven. The first wave of Connect Care was implemented in November 2019.

Connect care is divided into three main components:

- **Connect Care Hyperspace:** AHS and its affiliates (including but not limited to Covenant Health, Lamont Health Centre, and Alberta Precision Laboratory) access health information in the hyperspace.
- **MyAHS Connect:** This portal provides patients (and others designated by them) with personalized and secure online access to a subset of their Connect Care record. It also offers patients and their designates a secure channel to communicate with their care teams and to access other core AHS resources and services.
- **Connect Care Provider Portal:** The portal supports access to health information necessary to inform the delivery of health care services. This access is provided to authorized community-based health services providers (custodians), and third-party clinical health services providers (affiliates under agreement with AHS).

## Notable PIPA PIAs

The following are examples of notable PIAs under PIPA that the OIPC reviewed and accepted during the 2023-24 fiscal year.

### **ATB Financial PIA on Oliu & Alberta.ca Account interface**

The Oliu platform is a digital identity management solution built and owned by ATB Ventures, the research and development arm of ATB Financial. ATB Financial submitted the PIA for the Oliu component that interfaces with Alberta.ca Account (previously known as MyAlberta Digital Identity service or MADI), which is the Government of Alberta digital identity and authentication solution used for verifying citizens' identities prior to granting them access to online services. By interfacing with Alberta.ca Account, Oliu provides an additional identity verification service to users, which enhances and streamlines the user identity verification process for businesses who accept identity verification via Alberta.ca Account.

### **7-Eleven PIA on point-of-sale system**

7-Eleven Inc. submitted a PIA for its point-of-sale scanning system and related processes for the purpose of verifying the age of 7-Eleven customers who intend to buy age-restricted products in Alberta. The PIA was submitted in response to the OIPC's recommendation, after working with 7-Eleven Inc. Canada to resolve a matter involving 7-Eleven stores in Alberta in March 2015. According to 7-Eleven, the implementation of the point-of-sale scanning system leverages the 2015 OIPC recommendations, which included limiting the collection of personal information.



## Notable FOIP Act PIAs

The following are notable PIAs that the OIPC reviewed and accepted under the FOIP Act during the 2023-24 fiscal year.

### Alberta Education PIA on Teacher and Teacher Leader Registry

This PIA was submitted by Alberta Education for its implementation of the Teacher and Teacher Leader Registry. According to the PIA, Alberta Education implemented the online registry to enhance and modernize the teaching profession in Alberta with the aim of increasing the effectiveness, transparency and accountability of teacher and teacher leader discipline in Alberta.

A key deliverable of the *Education Statutes (Students First) Amendment Act (SFA)* is the public disclosure of Alberta teaching and leadership certification information, including data about suspended and cancelled teacher and teacher leader certificates, in a provincial public-facing online teacher and teacher leader registry. The overarching intent of public disclosure using the registry is to increase the safety of Alberta's Kindergarten to Grade 12 students and to provide greater public assurance that matters of professional discipline involving Alberta-certified teachers and teacher leaders are appropriately addressed.

The online registry enables the public to access information authorized to be published under the Act by searching the name of a person who holds an Alberta teaching or leadership certificate. The PIA found that the disclosure was in accordance with the FOIP Act because it was done with authorization in legislation.

### Alberta Education PIA on Teacher and Teacher Leader Registry Exemption Process

This PIA was submitted by Alberta Education for the implementation of the Teacher and Teacher Leader Registry Exemption Process, as an addendum to the PIA on the registry itself. The PIA focuses on the collection and use of personal information for those teachers and teacher leaders who request an exemption to disclosure through the registry. The Office of the Registrar (OOR), which is the professional regulatory body for the teaching profession in Alberta, manages the exemption process via the use of TWINS (Teacher Workforce Information System). An exemption request containing personal information is uploaded through TWINS Self-Service by an applicant seeking the exemption. In rare circumstances, individuals may send exemption documents to the OOR via secure email, typically in situations where a third party is seeking an exemption on behalf of a teacher or teacher leader in extenuating circumstances.





## Government of Alberta PIA on the Affordability and Utilities Program

The Government of Alberta submitted this PIA to the OIPC in relation to its implementation of the Affordability and Utilities Program, Affordability Program Portal and database in 2023. The implementation of the program and associated systems required the collection, use and disclosure of personal information of Albertans.

The *Inflation Relief Statutes Amendment Act* received Royal Assent on December 15, 2022. Affordability and Utilities was a joint project involving government departments such as Seniors, Community and Social Services; Children's Services; Technology and Innovation; Treasury Board and Finance; and Service Alberta and Red Tape Reduction.

The program provided existing clients who met certain requirements with up to \$600 per eligible household member paid out over a six-month period.

The Affordability Program Portal was developed and implemented by the government to streamline the application, verification and payment process for individuals eligible for the benefit. It went live on January 18, 2023 and was available to the public until June 30, 2023. During the PIA review, the OIPC identified a number of compliance-related issues. The OIPC accepted the PIA on the condition that the government resolve the identified privacy issues.

# PRIVACY BREACHES

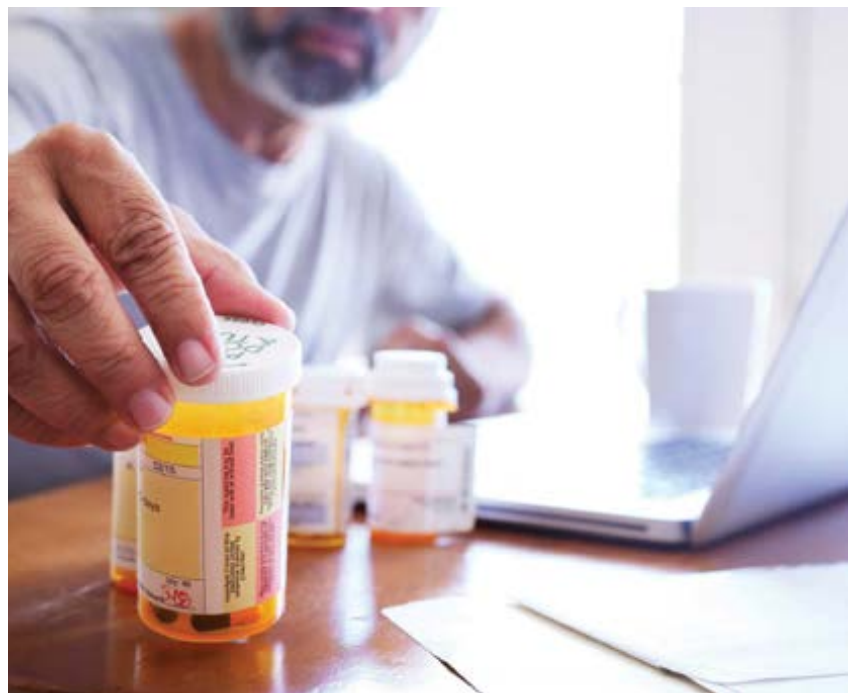
HIA and PIPA require health custodians and private sector organizations, respectively, to report certain privacy breaches to the OIPC. Public bodies may report breaches voluntarily under the FOIP Act.

In general, certain breaches are prioritized for review, including files where affected individuals have not yet been notified or when a significant number of Albertans have been affected or when notification did not meet the requirements of the applicable legislation.

During 2023-24, the OIPC focus was on initiating processes to review and improve the management of breaches reported under PIPA. During this period, a decision was made to focus on high-priority breaches only and put in abeyance those breaches where the reporting organization had already notified affected individuals in accordance with the applicable regulation. This resulted in fewer files being closed during this fiscal year. High-priority breaches included those where there was a real risk of significant harm (RROSH) and notification had not been provided to affected individuals, or if notification was not sufficient; or cases when the PIPA organization did not believe there was a RROSH and the OIPC disagreed. In summary, fewer breach files were closed, with a focus on the most urgent files, allowing more time to improve processes for the long term.

A number of trends were noted this year in the types of breach notices received by the OIPC and associated issues, including cyberattacks (mostly under PIPA, some under HIA); ransomware attacks (mostly under PIPA, some under HIA); prescription mix-ups at pharmacies

(HIA); no notification made due to safety concerns associated with abusive domestic relationships (HIA); no notification made due to transient nature of population (HIA); and access to health records in order to create false COVID-19 information (HIA). In addition, privacy breaches under HIA due to snooping into health information without a valid business purpose continues to be a predominant trend, as noted in last year's annual report and in this report, in the section above on health information snooping complaints.





## Improvements to PIPA Privacy Breach Notification Process

As noted above, during 2023-24, the OIPC identified and planned a number of improvements that could be made to the privacy breach notification process under PIPA.

A key purpose of the breach notification provisions in PIPA is to ensure that organizations notify, in a timely fashion, affected individuals for whom there exists a RROSH. In July 2022, the OIPC released a report that analyzed nearly 2,000 breaches reported in Alberta between 2010 and 2021. One of the report's significant findings was that since 2012-2013, at least 80% of organizations had already notified affected individuals of a privacy breach involving their personal information by the time the OIPC received notice of the breach. Therefore, in a majority of cases, this key purpose of the OIPC breach notification process had been fulfilled by organizations before the OIPC process began. After the release of the 2022 report, the OIPC identified a number of opportunities to improve efficiency and sustainability of its procedures for processing PIPA breach notification files.

Changes to this process were implemented on April 1, 2024, with the goals of enabling timely resolution of PIPA privacy breach files, reducing backlogs in processing PIPA privacy breach files, and allowing the OIPC to allocate resources to cases that require increased attention.

Changes include the following:

- The general practice of publishing all breach notification decisions will cease.
- Breach notification decisions will be issued when an organization has suffered a privacy breach that meets certain criteria (see PIPA section 34.1) but has not notified affected individuals or when notice to affected individuals does not meet the requirements of the PIPA Regulation.
- Breaches that meet the criteria of section 34.1 but affected individuals have not been notified, or if notification to individuals does not meet the requirements of the Regulation, will be processed on an expedited basis.

More detail about the process changes is found on the OIPC [website](#).

## Breaches at Organizations Under PIPA

Section 34.1 of PIPA requires organizations with personal information under their control, without unreasonable delay, to provide notice to the Commissioner of any privacy breach where a reasonable person would consider that there exists a real risk of significant harm (RROSH) to individuals as a result of the breach.

Section 37.1(1) provides the Commissioner with the discretion to require organizations to notify individuals if the privacy breach meets the criteria of section 34.1 in the form and manner prescribed by the regulations. Section 37.1(3) requires the Commissioner to establish an expedited process for determining whether to require an organization to notify individuals if the RROSH is obvious and immediate.

There were several notable breach decisions under PIPA in 2023-24.

### LastPass Technologies Canada ULC

LastPass Technologies, an organization under PIPA, is a provider of “password and identity management solutions,” including a secure digital vault for storing authentication credentials. LastPass was a victim of a cyberattack, where a threat actor gained unauthorized access to the organization’s cloud storage and then removed personal information from a database and encrypted information from the vault. LastPass maintained that there was no real risk of significant harm to affected individuals. It did, however, provide email notices to affected individuals and blog posts about the incident.

The Commissioner’s delegate disagreed and found that there was a real risk of significant harm to affected

individuals and issued a decision under section 37.1 of PIPA requiring the organization to notify all 128,000 affected individuals in Alberta in accordance with section 19.1 of the PIPA Regulation. The decision noted that while the organization provided guidance on how individuals could decrease the risk of harm by taking certain steps, any decrease was dependent on the user taking those steps. In addition, the encrypted vaults were in the custody of the threat actor. A lack of evidence that personal information in encrypted vaults has been misused does not mitigate against future harm, as brute force attacks and decryption of vault data could occur any time after the breach. Email notices sent to affected individuals prior to March 2023 did not meet the requirements of the PIPA Regulation; however, the March 2023 email notice did meet the requirements of the Regulation and, therefore, LastPass was not required to re-notify affected individuals.

### **CDI Education (Alberta) Inc. operating as CDI College and several associated educational institutions/colleges [Business Technology Healthcare, Reeves Education (Alberta) Inc. operating as Reeves College and VCAD Education (Alberta) Inc. operating as VCAD – Visual College of Art and Design] (collectively, the “organizations”)**

In November 2021, a number of educational organizations were the subjects of a ransomware attack affecting personal information in their control. The information included student identification, academic records, names, dates of birth, home addresses, telephone numbers, email addresses, social insurance numbers, government-issued photo identification (identity card, permanent resident card and driver’s license), bank account information, student loan and grant information, credit card information, patient X-rays and related self-disclosed medical conditions, and employee tax and benefit information.

The organizations completed their investigation on May 18, 2022 but failed to notify the OIPC of the incident pursuant to section 34.1 of PIPA because in their view there was no hard evidence that personal information had been misused. In the OIPC's view, a reasonable person would consider that the likelihood of harm resulting from this incident is increased because the personal information was compromised due to the malicious action of an unknown third party. The lack of evidence that personal information has been misused is not a mitigating factor, as identity theft, fraud and financial loss can occur months and even years after a data breach. The threshold is "real risk of significant harm" not awareness of actual misuse of information.

The OIPC issued a decision requiring the organizations to notify the affected individuals of the incident in accordance with section 19.1 of the PIPA Regulation, including a description of the affected personal information; to provide a copy of this notification and confirmation of notification to the OIPC within two weeks; and to confirm to the OIPC within two weeks that any indirect notices posted on their websites met the requirements of the PIPA Regulation, including the time frame of the breach and a description of the affected personal information.

### **Odishaw, Guido and Heil**

On July 7, 2021, a shed containing this law firm's closed files was broken into. Personal information in the files included names, addresses, telephone numbers, financial information and medical information of clients who were involved in motor vehicle accidents.

The organization reported, "No personal information appeared to be taken. Boxes were overturned and emptied but nothing appeared to be stolen." The organization reported that 11 boxes containing 104 files were emptied in the shed but added that some files were still completely intact after they were emptied from the boxes. The organization further stated that

because most of their client files were left intact, it believed the individuals who broke into the shed were looking for material items, not personal information. The organization maintained that there was not a real risk of significant harm to affected individuals.

The Commissioner's delegate disagreed and found that a reasonable person would consider that the likelihood of harm resulting from this incident is increased as it was the result of malicious intent, i.e. a break-in. The organization could only speculate as to the motives of the individuals who broke into the shed. Even though financial information that was part of the personal information may have been dated, the organization could not rule out that it was still valid.

As a result, the OIPC issued a decision requiring the organization to notify the individuals whose personal information was collected in Alberta and was part of the files that were disturbed, in accordance with section 19.1 of the PIPA Regulation. Where contact information for affected individuals was not available or valid, the organization was required to confirm to the OIPC within 30 days how it proposed to notify affected individuals indirectly.



## Breaches at Custodians Under HIA

It is mandatory for a custodian having individually-identifying health information in its custody or control to notify the Commissioner of a privacy breach if the custodian determines “there is a risk of harm to an individual as a result of the loss or unauthorized access or disclosure” (section 60.1(2)). In addition to notifying the Commissioner of the privacy breach, the custodian is also required by section 60.1(2) of HIA to notify the Minister of Health and the individuals affected by the privacy breach.

One notable breach under HIA in 2023-24 is summarized below.

### **Alberta Health and affiliate Alberta Dental Services Corporation**

On July 9, 2023, Alberta Health’s contracted service provider (affiliate), the Alberta Dental Services Corporation, discovered that it was victim to a cyberattack in which a threat actor “deployed malware, encrypting certain systems and data.” The incident affected the health information of about 1.47 million individuals. The custodian, Alberta Health, determined there was a risk of harm to the affected individuals because of the incident. The custodian provided written notification to the affected individuals pursuant to section 60.1 of HIA.

## Breaches at Public Bodies under the FOIP Act

The FOIP Act is Alberta’s only privacy law that does not require regulated entities to report privacy breaches to the Commissioner or to notify affected individuals. Modernized public sector privacy laws include mandatory breach notification for public bodies.

An example of one breach under the FOIP Act in 2023-24 is summarized below.

### **Children and Family Services’ Child Intervention Client Management System**

On September 22, 2022, a public body, the Ministry of Children and Family Services, reported a breach to the OIPC. It reported that one of its employees, a case worker, had inappropriately accessed personal information in the Child Intervention Client Management System. The employee had disclosed the personal information she had inappropriately accessed to an ex-convict. Four individuals were affected by the privacy breach, including a child. Upon completing its investigation, Children and Family Services disciplined the employee and notified one of the four affected individuals. While it is not a requirement to notify affected individuals of a breach under the FOIP Act, the OIPC recommended that Children and Family Services notify the other three affected individuals. The public body responded by saying it would consider accepting the OIPC recommendation.

# OFFENCE INVESTIGATIONS UNDER HIA

There were no convictions for unauthorized access to health information in 2023-24. However, as of March 31, 2024, two cases were before the courts and there were 15 offence files open.



# INQUIRY DECISIONS

## Unauthorized access to health records

In two cases, individuals complained that Dr. Ramneek Kumar, a custodian, had accessed health information in the Netcare Electronic Health Record (EHR) without authority under HIA.

The custodian acknowledged that he accessed the complainants' health information in the EHR, and also acknowledged that he was not the treating physician of either complainant. The custodian argued that in each case, he and the complainant had been family friends at the time, and the complainants had asked the custodian to check on lab results available in the EHR. However, since that time, the complainants and the custodian had had a falling out.

The complainants in both cases argued that they did not ask the custodian to access their health information nor did they otherwise provide consent for him to access their health information.

The adjudicator found that the positions of the complainants and the custodian were each just as likely to be true. However, under HIA, custodians bear the burden of showing they have authority to access complainants' health information.

The adjudicator found that the custodian had failed to demonstrate he had accessed the lab results in the course of providing health services; accordingly he had failed to demonstrate authority to access the information. The adjudicator ordered the custodian to stop accessing the complainants' health information, if he had not already done so. She also noted that even



if HIA permits a custodian to provide a health service to a friend on a one-time basis (such as by accessing and interpreting information in Netcare) this case illustrates why it is often unwise to do so.

*Dr. Ramneek Kumar, Orders H2023-08 & H2023-09*

### **Disclosure of information by a public body to a professional regulatory body**

The complainant had a claim with the Workers' Compensation Board (WCB) of Alberta in relation to a workplace injury, for which he had received treatment by a chiropractor. The complainant believed that a letter written by the chiropractor to the WCB had a negative effect on his claim. He complained to the College of Chiropractors of Alberta (CCOA) regarding the conduct of the chiropractor. The CCOA contacted the WCB to enquire about the complainant's claim. This led the complainant to bring his case to the OIPC, saying that the WCB disclosed his personal information to the CCOA without authority under the FOIP Act.

The WCB argued that the Complaints Director of the CCOA requested information about the effect of the chiropractor's letter on the complainant's WCB claim and that disclosing information about the complainant's WCB claim in response to these questions was authorized under sections 40(1)(e) and (f) of the FOIP Act. These provisions permit disclosure for the purposes of complying with an enactment, or in accordance with an enactment that authorizes or requires the disclosure. The WCB argued that the *Health Professions Act* authorizes the CCOA to require any person to provide relevant information for an investigation.

The adjudicator found that while the CCOA was conducting an investigation into the complaint made against the chiropractor, the WCB failed to show that the CCOA had invoked its authority to require information from the WCB under the *Health Professions*

*Act*. The adjudicator found that the exercise of the authority to require information under the *Health Professions Act* is undertaken by a process more formal than simply asking whether relevant information could be provided. The adjudicator contrasted the CCOA's request for information with other situations in which a body requires information via a Notice to Produce, or situations in which the public body is a party to the relevant proceedings. Neither of those circumstances applied in the present case.

The adjudicator concluded that the WCB lacked authority to disclose the complainant's personal information to the CCOA as it had done and ordered it not to disclose the complainant's personal information in contravention of the FOIP Act.

*Workers' Compensation Board of Alberta, Order F2024-04*

### **Dealing with an access request when quasi-judicial capacity comes into play**

The applicant complained to the University of Calgary, a public body under the FOIP Act, that her research contributions had not been acknowledged in four scholarly articles. In response to her complaint, a committee was struck to investigate whether there had been a breach of "academic integrity" by a professor. The committee found there had been no breach of academic integrity and that the applicant's complaint was not supported. The committee issued a final report containing its decision and reasons. The applicant was not provided with a copy of this report.

The applicant made an access request for the final report under the FOIP Act. The public body refused to provide the report on the basis that it was a personal note, communication or draft decision created by or for a person who is acting in a judicial or quasi-judicial capacity within the terms of section 4(1)(b) of the FOIP Act, and that on this account, it was excluded from the

application of the Act. The public body relied on Order F2010-016, which had held that a final decision of a committee struck to review a complaint of misconduct by a professor was a “communication” of a “quasi-judicial” body, and not subject to the FOIP Act.

The adjudicator reviewed the interpretation of provisions equivalent to section 4(1)(b) and determined that provisions of this kind, including section 4(1)(b), are intended to protect deliberative secrecy, but not final decisions. The adjudicator also held that decisions made by employers regarding the conduct of employees are not “quasi-judicial” when the source of authority is a contract or collective agreement, not a statute. The adjudicator relied on *Commission scolaire de Laval v. Syndicat de l’enseignement de la région de Laval*, 2016 SCC 8 (CanLII), [2016] 1 SCR 29, which was decided after Order F2010-016.

The adjudicator decided not to follow Order F2010-016 and ordered the university to respond to the applicant (noting that it was not prohibited from applying any relevant exceptions).

*University of Calgary, Order F2023-45*

### **Access requests for information previously asked for**

The applicant made an access request under the FOIP Act to the University of Alberta seeking unredacted copies of records provided in response to another access request he had made five years earlier. The public body elected not to process the request, but offered a copy of the records provided five years earlier, with the original redactions.

In reviewing this case, the adjudicator found that the FOIP Act does not bar new requests for the same information and that when addressing such a request, public bodies must take into account the present circumstances surrounding the new request, since

this will inform the applicability of exceptions to disclosure. A public body cannot assume that the same circumstances and exceptions to disclosure based upon them, which applied to an earlier request, will also apply to a new request for access to the same records.

The adjudicator ordered the university to provide a new response to the applicant taking into account the circumstances surrounding the new request.

*University of Alberta, Order F2023-46*

### **When PIPA and the FOIP Act are both part of the picture**

A complainant complained that Money Mentors, an organization under PIPA, collected her personal information in contravention of PIPA. When collecting the information, the organization was exercising powers of the Debtors’ Assistance Board that had been delegated to Money Mentors under the *Debtors’ Assistance Act*. The board is a public body under the FOIP Act.

The adjudicator concluded that the FOIP Act, rather than PIPA, applied to the organization’s collection of personal information, since the collection was done pursuant to the delegated power. The adjudicator also concluded that the board, as the public body delegating its powers to the organization, was responsible for ensuring compliance with the FOIP Act, noting that the board could not avoid the requirements of the FOIP Act by delegating its powers to an organization. The board was accordingly added as a respondent to the complaint.

*Money Mentors, Orders P2023-10 and F2023-36*

### **Giving up the right to access information as part of a settlement agreement**

An applicant requested a review of a decision of the St. Albert School Division, a public body, to withhold responsive information from him under the FOIP Act, in response to his access request for information.

While the OIPC was looking into this case, the school division and the applicant entered into a settlement agreement which required the applicant to withdraw all the requests for information, complaints and applications he had made under the FOIP Act. The agreement also stated that the parties agreed that the settlement agreement resolved all existing disputes between them up to the date of execution.

The applicant did not withdraw his request for review and later requested that the Commissioner conduct an inquiry into the public body's decision to withhold responsive information from him.

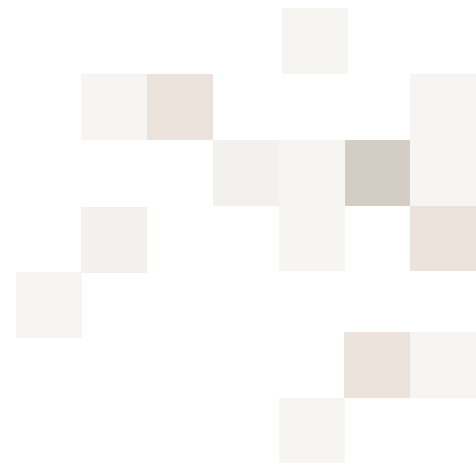
The public body argued that the Commissioner should not conduct an inquiry because the applicant had signed the settlement agreement. It asserted that the settlement agreement was valid since the FOIP Act did not contain language equivalent to section 4(7) of PIPA, which voids contractual waivers of rights under PIPA, and declares that PIPA applies despite such waivers.

The adjudicator determined that the absence of specific language in the FOIP Act equivalent to section 4(7) of PIPA did not indicate that it was permissible for public bodies to require individuals to give up their access rights under the FOIP Act.

Following previous OIPC orders and decisions made by the BC and Ontario Commissioners under their provincial legislation, the adjudicator determined that it was against public policy for the school division to require the applicant to give up his access to information rights under the FOIP Act by contract. Therefore, this particular requirement in the settlement agreement was void.

The adjudicator concluded that the settlement agreement had no effect on the applicant's ability to request a review of the public body's decision to withhold responsive information under the FOIP Act, nor on the Commissioner's ability to conduct such a review. Public bodies should be aware of this when drafting settlement agreements, waivers and releases.

*St. Albert School Division, Order F2024-11*



# JUDICIAL REVIEWS AND OTHER COURT DECISIONS

## Judicial Reviews

No judicial review decisions were finalized during this fiscal year. However, as of March 31, 2024, there were 15 judicial review matters underway.



## Other Court Decisions

### **Oleynik v University of Calgary, 2023 ABCA 265**

The applicant appealed a Court of King's Bench order striking an affidavit and related brief filed by the applicant in support of a judicial review of Order F2022-18 (Oleynik v University of Calgary, 2023 ABKB 43). The Alberta Court of Appeal dismissed the appeal, noting that this interlocutory application had incurred costs disproportionate to the underlying issues (paragraph 23) and ordered the appellant to pay enhanced costs to the public body.

### **Alberta Energy v Alberta (Information and Privacy Commissioner), 2023 ABKB 268**

The public body requested a judicial review of Order F2022-20, which ordered the public body to disclose the records at issue to the applicant. As part of the judicial review process, the Commissioner is required under the Rules of Court to publicly file the records that were before the decision-maker. However, public disclosure of the unredacted records at issue before the judicial review was heard would defeat the purpose of the public body's judicial review and is contrary to sections 59(1) and (3) of the FOIP Act. The Information and Privacy Commissioner applied for a sealing order over the unredacted records at issue, which was granted by the Court of King's Bench.

**Glen Carter v Information and Privacy Commissioner, Calgary Homeless Foundation (CHF) and Mustard Seed (the Shelter), 2023 CanLII 39589 (SCC)**

The Supreme Court of Canada granted the applicant's motion for an extension of time to serve and file the application for leave to appeal, but the Court dismissed other miscellaneous motions and dismissed the application for leave to appeal the judgment of the Court of King's Bench, Number 2201 08667, 2022 ABQB 517.

**McCormack v Alberta Health Services et al – Order of Applications Judge B.W. Summers, filed February 20, 2024, Court Docket 2303 19022**

An employee of the Office of the Information and Privacy Commissioner (OIPC) and the OIPC were named among 53 defendants in a civil lawsuit. The employee and the OIPC brought an application to have the action struck and dismissed. The Court of King's Bench granted the application for the following reasons: 1) the Statement of Claim disclosed no cause of action against the employee and the OIPC; 2) the employee and the OIPC are protected from any action or proceeding for anything done in good faith pursuant to section 60 of the FOIP Act and section 92 of HIA, as there was no factual basis for a claim in bad faith; and 3) the employee and the OIPC do not have a private law duty of care to the plaintiff.





# EDUCATION AND OUTREACH

# ENGAGEMENT WITH ALBERTANS

The Commissioner and staff presented at 22 events in 2023-24, sharing information about the office; the role and work of the OIPC; and privacy and access issues. Notably, the OIPC continued to participate in the School at the Legislature program, which provided the opportunity for the OIPC to make presentations on several occasions throughout the year to Alberta students in Grades 6 or 9 about digital privacy, privacy rights and the office's role in protecting personal information.

Audiences that OIPC representatives spoke to during 2023-24 included the Alberta Medical Association; Canadian Health Information Management Association; the Alberta Health Advocate and Alberta Mental Health Advocate; the Health Research Ethics Board of Alberta; the CAN-TECH Fall Conference 2023 in Toronto; the 2023 Federal/Provincial/Territorial Investigators Conference and a business forum organized by the Association of School Business Officials of Alberta, amongst others.

The OIPC took many other opportunities for direct engagement with Albertans on a variety of relevant topics, including by creating or initiating these opportunities. This work included reaching out to stakeholders to inform them of process changes within our office or to issue guidance on important issues; developing and beginning to implement a stakeholder engagement plan for the Alberta innovative technology development sector; gathering input on changes to Alberta's access and privacy legislation; and more. This work is outlined in greater detail in the Achieving Our Goals section of this annual report.



# COLLABORATION WITH OTHER JURISDICTIONS

The OIPC works with Information and Privacy Commissioners across Canada, as well as international counterparts, on a variety of initiatives.

## Privacy commissioners for Alberta, Canada, British Columbia and Québec launch joint investigation of OpenAI

On May 25, 2023, the privacy authorities for Alberta, Canada, British Columbia and Québec announced that they will jointly investigate OpenAI, the artificial intelligence company operating ChatGPT. The privacy authorities will investigate whether OpenAI:

- obtained valid and meaningful consent for the collection, use and disclosure of the personal information of individuals based in Canada via or in relation to ChatGPT;
- fulfilled its obligations with respect to openness and transparency;
- limited its collection of personal information to that which is necessary for its identified purposes;
- took reasonable steps to ensure that the information it generates about individuals is as accurate, complete, and up-to-date as is necessary for the purposes for which it is to be used;
- provided individuals with the ability to obtain access to, and correct, their personal information;
- fulfilled its obligations to establish appropriate retention and disposal procedures in place for the personal information that it collects, uses and discloses;

- collected, used and/or disclosed personal information for purposes that a reasonable person would consider appropriate, in the circumstances; and
- was accountable for the personal information under its control.

At the conclusion of the investigation, the offices will report publicly on their findings.

## Joint resolution to enhance access to government information

On October 4, 2023, federal, provincial and territorial Information Commissioners and Ombudspersons signed a joint [resolution](#) aimed at reinforcing the public's right to access government-held information.

Freedom of information regimes across Canada have faced persistent challenges in delivering timely responses to access to information requests, underscoring the need to implement alternative and efficient mechanisms for providing access to records, including through proactive disclosure.

Recognizing the urgent need for change, the regulators again called upon their respective governments to modernize legislation, policies and information management practices to advance transparency and ensure the preservation and dissemination of Canada's documentary heritage.

Building on a joint resolution issued in 2019, the 2023 resolution signaled a renewed sense of urgency in a



drastically-changed context and was a clarion call for federal, provincial and territorial governments to act swiftly and decisively in modernizing their respective laws, policies, and information management practices, to strengthen access to information regimes and to support a culture of transparency across Canada.

### **Joint resolutions on the privacy of young people and workplace privacy**

On October 6, 2023, privacy authorities from across the country called on their respective governments to improve privacy legislation to protect young people and employees – groups that are significantly vulnerable, each in their own way, to the growing influence of digital technologies.

Discussions by federal, provincial, and territorial information and privacy authorities at a meeting in Québec City resulted in joint resolutions calling on governments to do more to protect the privacy rights of young people and workers.

For young people, the [resolution](#) focused on the responsibility of organizations across all sectors to actively safeguard young people’s data through responsible measures, including minimized tracking, regulated data sharing, and stringent control over commercial advertising. It also called on organizations to safeguard young people’s rights to access, correction, and appeal regarding personal data. In addition, the resolution called on governments to review, amend or adopt legislation as necessary to ensure that it includes strong safeguards, transparency requirements and access to remedies for young people.

The resolution noted that while the digital environment presents many opportunities for young people, it has also brought well-documented harms, including the impact of social media on physical and mental health. Regulators say that special protections

are essential for younger generations, because their information can live online for a long time, and may become a life-long reputational burden.

The resolution also called on organizations to adopt practices that promote the best interests of young people, ensuring not only the safeguarding of young people’s data, but also empowering them with the knowledge and agency to navigate digital platforms and manage their data safely, and with autonomy. Initial steps include identifying and minimizing privacy risks at the design stage. Other recommendations include making the strongest privacy settings the default; turning off location tracking; and rejecting deceptive practices and incentives that influence young people to make poor privacy decisions or to engage in harmful behaviours.

The employee privacy [resolution](#) addressed the proliferation of employee monitoring software and how it has revealed that laws protecting workplace privacy are either out-of-date or absent altogether. In increasingly digital work environments, there needs to be robust and relevant privacy protections in place to safeguard workers from overly intrusive monitoring by employers.

With the shift toward increased remote work arrangements and use of monitoring technologies in this digital world, the privacy authorities called on governments to develop or strengthen laws to protect employee privacy. They also urged employers to be more transparent and accountable in their workplace monitoring policies and practices. Although some level of information collection is reasonable and may even be necessary, the adoption of digital surveillance technologies can have disproportionate impacts on privacy and can significantly impact an employee’s career and overall well-being, including heightened stress levels and other adverse mental health effects, not to mention reduced autonomy and creativity.

The resolution calls for a collective effort from governments and employers to address statutory gaps; to respect and protect employee rights to privacy and transparency; and to ensure the fair and appropriate use of electronic monitoring tools and AI technologies in the modern workplace.

### **Canadian privacy regulators issue companion pieces to resolution on best interests of young people**

On October 17, 2023, the Office of the Privacy Commissioner of Canada (OPC) and privacy regulators from across Canada, including the Office of the Information and Privacy Commissioner of Alberta, released two companion documents to support the joint resolution issued earlier in October, which was aimed at strengthening privacy protections for young people.

[Putting best interests of young people at the forefront of privacy and access to personal information](#) offers additional guidance for organizations about how they can concretely address the principles set out in the resolution.

[How organizations can help protect young people online](#) is aimed at young people and those who care for them. It explains the contents of the resolution in plain language and shares steps that organizations should take to protect young people's privacy.

### **Canadian privacy regulators launch principles for the responsible development and use of generative AI**

On December 7, 2023, federal, provincial and territorial privacy authorities launched a set of principles to advance the responsible, trustworthy and privacy-protective development and use of generative artificial intelligence (AI) technologies in Canada.

The authorities introduced the principles during an international symposium on privacy and generative AI, hosted in Ottawa by the Office of the Privacy Commissioner of Canada.

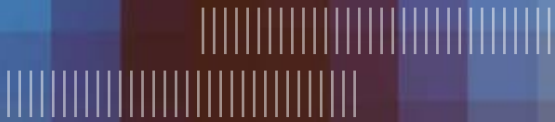
Artificial intelligence (AI) is an advanced form of information processing created for the purpose of automating and/or enhancing the performance of human tasks. Generative AI is a subset of machine learning in which systems are trained on massive information sets – often including personal information.

While AI presents potential benefits across many domains and in everyday life, the regulators noted that there are also risks and potential harms to privacy, data protection, and other fundamental human rights if these technologies are not properly developed and regulated. Organizations have a responsibility to ensure that products and services that are using AI comply with existing domestic and international privacy legislation and regulation.

Subject matter experts within the Office of the Information and Privacy Commissioner (OIPC) of Alberta contributed to the development of the principles, which include:

- establishing legal authority for collecting and using personal information and, when relying on consent, ensuring that it is valid and meaningful;
- being open and transparent about the way information is used and the privacy risks involved;
- making AI tools explainable to users;
- developing safeguards for the protection of privacy rights; and
- limiting the sharing of personal, sensitive or confidential information.

Developers were also urged to take into consideration the unique impact that these tools can have on vulnerable groups, including children.



“ These are high level principles intended for organizations that develop, customize or implement generative artificial intelligence for their clients. In the Alberta context, this would include some of our universities and the Alberta Machine Learning Institute, amongst others. Smaller custodians that are more likely to buy AI products directly from vendors can refer to our [Guidance for Small Custodians on the use of Artificial Intelligence](#). Our office places a high priority on assisting organizations which are using AI and other innovative technologies, and we hope to develop supports similar to this guidance in the near future.”

**Diane McLeod**

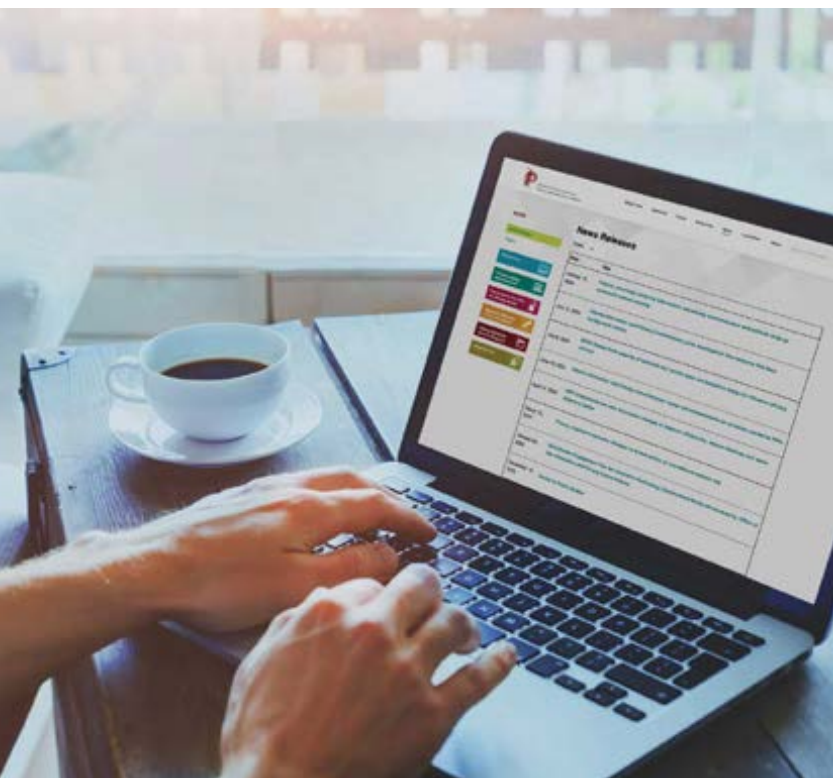
Alberta Information and Privacy Commissioner



AI



# MEDIA AWARENESS



## Traditional Media

The OIPC responded to 32 media requests in 2023-24, as compared to 49 in 2022-23.

Topics that generated the most media requests in 2023-24 include:

- the announcement of a joint investigation into ChatGPT;
- Government of Alberta departments' handling of access requests under the FOIP Act; and
- the announcement of an OIPC investigation into the compliance of Government of Alberta departments with several sections of the FOIP Act.

The OIPC issues news releases to publicize the work of the office and to raise awareness of access and privacy issues. During 2023-24, 11 news releases were issued, as compared to eight in 2022-23.

These news releases are posted on the OIPC [website](#) and are distributed via the Alberta government's news release distribution service. In addition, news release notifications are posted on social media.

## Social Media

The social media platform X (previously known as Twitter) is used by the OIPC to share investigation reports, publications, announcements and news releases, and to promote events or raise awareness about access and privacy laws.

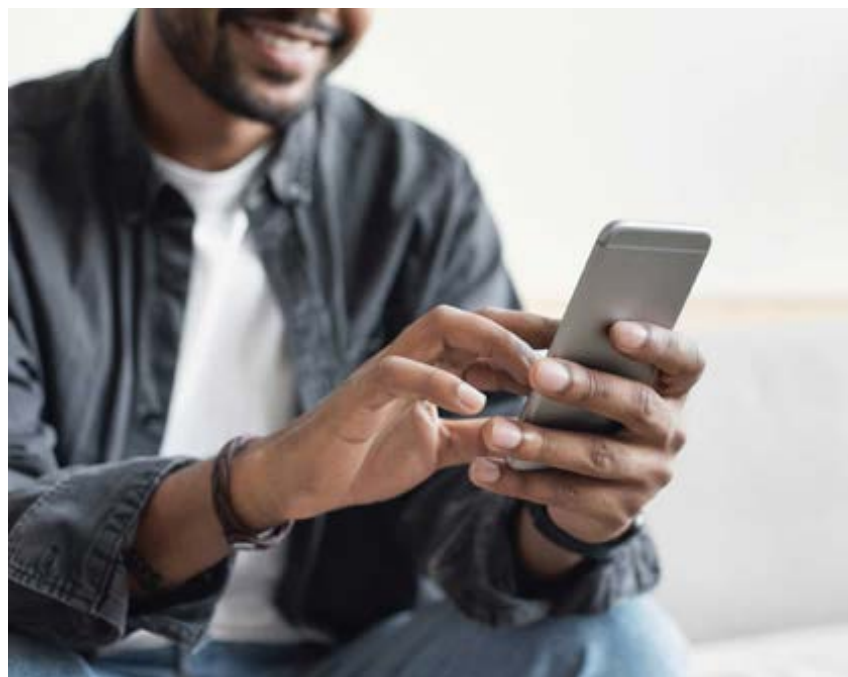
Some examples of information that was shared on X/ Twitter during 2023-24 are:

- the OIPC's investigation report on the City of Edmonton collection of health/COVID-19 status from DATS clients;
- an announcement that Canadian privacy commissioners will jointly investigate OpenAI, the artificial intelligence company operating ChatGPT;
- joint resolutions passed by the Commissioner and her counterparts across Canada at the October 2023 meeting of federal, provincial and territorial information regulators in Quebec City;
- an interview with the Commissioner as part of a podcast produced by Saskatchewan Information and Privacy Commissioner Ron Kruzeniski;
- issuance of the OIPC 2022-23 Annual Report;
- the launch by Canadian privacy regulators of principles for the responsible development & use of generative AI;
- annual events relevant to access and privacy such as Data Privacy Week and Right to Know Week;
- the OIPC engagement plan with the innovative technology development sector in Alberta; and

- guidance issued by the OIPC of Alberta including
  - guidance for small custodians under HIA on the use of artificial intelligence, and
  - guidance for landlords and tenants on privacy and access to information issues.

The OIPC's X/Twitter account is available at [x.com/ABoipc](https://x.com/ABoipc).

The OIPC also began looking into establishing an account for the office on the LinkedIn social media platform in the coming year.



# FINANCIAL STATEMENTS





## Independent Auditor's Report

To the Members of the Legislative Assembly

### Report on the Financial Statements

#### Opinion

I have audited the financial statements of the Office of the Information and Privacy Commissioner (the OIPC), which comprise the statement of financial position as at March 31, 2024, and the statements of operations, change in net debt, and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In my opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the OIPC as at March 31, 2024, and the results of its operations, its changes in net debt, and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

#### Basis for opinion

I conducted my audit in accordance with Canadian generally accepted auditing standards. My responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of my report. I am independent of the OIPC in accordance with the ethical requirements that are relevant to my audit of the financial statements in Canada, and I have fulfilled my other ethical responsibilities in accordance with these requirements. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

#### Other information

Management is responsible for the other information. The other information comprises the information included in the *Annual Report*, but does not include the financial statements and my auditor's report thereon. The *Annual Report* is expected to be made available to me after the date of this auditor's report.

My opinion on the financial statements does not cover the other information and I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, my responsibility is to read the other information identified above and, in doing so, consider whether the other information is materially inconsistent with the financial statements or my knowledge obtained in the audit, or otherwise appears to be materially misstated.

If, based on the work I will perform on this other information, I conclude that there is a material misstatement of this other information, I am required to communicate the matter to those charged with governance.

#### Responsibilities of management and those charged with governance for the financial statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the OIPC's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless an intention exists to liquidate or to cease operations, or there is no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the OIPC's financial reporting process.

## Auditor's responsibilities for the audit of the financial statements

My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, I exercise professional judgment and maintain professional skepticism throughout the audit. I also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the OIPC's internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the OIPC's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my auditor's report. However, future events or conditions may cause the OIPC to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

[Original signed by]

**W. Doug Wylie FCPA, FCMA, ICD.D**

Auditor General

July 25, 2024

Edmonton, Alberta



## Statement of Operations

Year ended March 31, 2024

	2024		2023
	Budget	Actual	Actual
<b>Revenues</b>			
Other Revenue	\$ -	\$ 246	\$ 283
<b>Expenses – Directly Incurred (Note 3b)</b>			
Salaries, Wages, and Employee Benefits	\$ 6,974,000	\$ 6,422,707	\$ 6,096,258
Supplies and Services	1,511,000	1,592,036	1,313,844
Amortization of Tangible Capital Assets (Note 5)	-	50,347	51,824
	8,485,000	8,065,090	7,461,926
<b>Net Cost of Operations</b>	\$ (8,485,000)	\$ (8,064,844)	\$ (7,461,643)

The accompanying notes and schedules are part of these financial statements.

## Statement of Financial Position

As at March 31, 2024

	<b>2024</b>	<b>2023</b>
<b>Financial Assets</b>		
Cash	\$ 200	\$ 200
Accounts Receivable	17,410	4,721
	17,610	4,921
<b>Liabilities</b>		
Accounts Payable and Other Accrued Liabilities	215,975	169,841
Accrued Vacation Pay	679,972	726,792
	895,947	896,633
<b>Net Debt</b>	<b>(878,337)</b>	<b>(891,712)</b>
<b>Non-Financial Assets</b>		
Tangible Capital Assets (Note 5)	153,792	158,016
Prepaid Expenses	87,868	60,671
	241,660	218,687
<b>Net Liabilities</b>	<b>\$ (636,677)</b>	<b>\$ (673,025)</b>
Net Liabilities at Beginning of Year	\$ (673,025)	\$ (683,040)
Net Cost of Operations	(8,064,844)	(7,461,643)
Net Financing Provided from General Revenues	8,101,192	7,471,658
Net Liabilities, at End of Year	\$ (636,677)	\$ (673,025)
Contractual obligations (Note 7)		

The accompanying notes and schedules are part of these financial statements.

## Statement of Change in Net Debt

Year ended March 31, 2024

	2024		2023
	Budget	Actual	Actual
<b>Net Cost of Operations</b>	\$ (8,485,000)	\$ (8,064,844)	\$ (7,461,643)
Acquisition of Tangible Capital Assets (Note 5)	(50,000)	(46,123)	-
Amortization of Tangible Capital Assets (Note 5)		50,347	51,824
(Increase) in Prepaid Expenses		(27,197)	(13,003)
Net Financing Provided from General Revenues		8,101,192	7,471,658
<b>Decrease in Net Debt</b>		13,375	48,836
<b>Net Debt, at Beginning of Year</b>		(891,712)	(940,548)
<b>Net Debt, at End of Year</b>		\$ (878,337)	\$ (891,712)

The accompanying notes and schedules are part of these financial statements.

## Statement of Cash Flows

Year ended March 31, 2024

	2024		2023
<b>Operating Transactions</b>			
Net Cost of Operations	\$ (8,064,844)	\$	(7,461,643)
Non-cash Items Included in Net Cost of Operations			
Amortization of Tangible Capital Assets (Note 5)	50,347		51,824
Valuation adjustment - Accrued Vacation Pay	(46,820)		105,358
	(8,061,317)		(7,304,461)
Increase in Accounts Receivable	(12,689)		(4,721)
Increase in Prepaid Expenses	(27,197)		(13,003)
Increase (Decrease) in Accounts Payable and Other Accrued Liabilities	46,134		(149,473)
Cash Applied to Operating Transactions	(8,055,069)	-	(7,471,658)
<b>Capital Transactions</b>			
Acquisition of Tangible Capital Assets (Note 5)	(46,123)		-
<b>Financing Transactions</b>			
Net Financing Provided From General Revenues	8,101,192		7,471,658
<b>Change in Cash</b>	-		-
<b>Cash, at Beginning of Year</b>	200		200
<b>Cash, at End of Year</b>	\$ 200	\$	200

The accompanying notes and schedules are part of these financial statements.

## Notes to the Financial Statements

March 31, 2024

### Note 1 Authority

The Office of the Information and Privacy Commissioner (the Office) operates under the authority of the *Freedom of Information and Protection of Privacy Act*. General Revenues of the Province of Alberta fund both the cost of operations of the Office and the purchase of tangible capital assets. The all-party Standing Committee on Legislative Offices reviews and approves the Office's annual operating and capital budgets.

### Note 2 Purpose

The Office provides oversight of the following legislation governing access to information and protection of privacy:

*Freedom of Information and Protection of Privacy Act*  
*Health Information Act*  
*Personal Information Protection Act*

The major operational purposes of the Office are:

- to provide independent reviews of decisions made by public bodies, custodians and organizations under the Acts and the resolution of complaints under the Acts;
- to advocate for protection of privacy for Albertans; and
- to promote openness and accountability for public bodies.

### Note 3 Summary of Significant Accounting Policies and Reporting Practices

#### Reporting Entity

These financial statements are prepared in accordance with Canadian public sector accounting standards. As the Office does not have any transactions involving financial instruments that are classified in the fair value category, there is no statement of re-measurement gains and losses.

#### Basis of Financial Reporting

(a) Revenue

All revenues are reported on the accrual basis of accounting.

## Notes to the Financial Statements

March 31, 2024

### Note 3 Summary of Significant Accounting Policies and Reporting Practices (Cont'd)

(b) Expenses

Expenses are reported on an accrual basis. The Office's expenses are either directly incurred or incurred by others:

Directly incurred

Directly incurred expenses are those costs incurred under the authority of the Office's budget as disclosed in the Office's budget documents.

Pension costs included in directly-incurred expenses comprise employer contributions to multi-employer plans. The contributions are based on actuarially-determined amounts that are expected to provide the plans' future benefits.

Incurring by others

Services contributed by other entities in support of the Office's operations are not recognized and are disclosed in Schedule 2.

(c) Financial assets

Financial assets are assets that could be used to discharge existing liabilities or finance future operations and are not for consumption in the normal course of operations.

Accounts Receivable

Accounts receivable are recognized at the lower of cost or net recoverable value. A valuation allowance is recognized when recovery is uncertain.

(d) Liabilities

Liabilities are present obligations of the Office to external organizations and individuals arising from past transactions or events, the settlement of which is expected to result in the future sacrifice of economic benefits.

They are recognized when there is an appropriate basis of measurement and when management can reasonably estimate the amounts.

(e) Non-financial assets

Non-financial assets are acquired, constructed, or developed assets that do not normally provide resources to discharge existing liabilities, but instead:

## Notes to the Financial Statements

March 31, 2024

### Note 3 Summary of Significant Accounting Policies and Reporting Practices (Cont'd)

- are normally employed to deliver the Office's services;
- may be consumed in the normal course of operations; and
- are not for sale in the normal course of operations.

Non-financial assets of the Office include tangible capital assets and prepaid expenses.

#### Tangible capital assets

Tangible capital assets are recorded at historical cost less accumulated amortization. Amortization begins when the assets are put into service and is recorded on a straight-line basis over the estimated useful lives of the assets. The threshold for tangible capital assets is \$5,000 except new systems development, which is \$250,000, and major enhancements to existing systems, which is \$100,000.

#### Prepaid expenses

Prepaid expenses are recognized at cost and amortized based on the terms of the agreement.

(f) Net debt

Net debt indicates additional cash required from General Revenues to finance the Office's cost of operations to March 31, 2024.

### Note 4 Future Accounting Changes

On April 1, 2026, the Office will adopt the following new conceptual framework and accounting standard approved by the Public Sector Accounting Board:

#### **The Conceptual Framework for Financial Reporting in the Public Sector**

The Conceptual Framework is the foundation for public sector financial reporting standard setting. It replaces the conceptual aspects of Section PS 1000 Financial Statement Concepts and Section PS 1100 Financial Statement Objectives. The conceptual framework highlights considerations fundamental for the consistent application of accounting issues in the absence of specific standards.

#### **PS 1202 Financial Statement Presentation**

Section PS 1202 sets out general and specific requirements for the presentation of information in general purpose financial statements. The financial statement presentation principles are based on the concepts within the Conceptual Framework.

Management is currently assessing the impact of the conceptual framework and the standard on the financial statements.

## Notes to the Financial Statements

March 31, 2024

### Note 5 Tangible Capital Assets

	Leasehold Improvements	Office Furniture and Equipment	Computer Hardware and Software	2024 Total	2023 Total
<b>Estimated Useful Life</b>	5 years	5 years	5 years		
<b>Historical Cost</b>					
Beginning of Year	\$ 43,142	\$ 113,759	\$ 609,849	\$ 766,750	\$ 766,750
Additions	-	13,753	32,370	46,123	-
Disposals	-	-	-	-	-
<b>Total Historical Cost</b>	\$ 43,132	\$ 127,512	\$ 642,219	\$ 812,873	766,750
<b>Accumulated Amortization</b>					
Beginning of Year	\$ 20,267	\$ 91,360	\$ 497,107	\$ 608,734	\$ 556,910
Amortization Expense	8,628	8,599	33,120	50,347	51,824
Disposals	-	-	-	-	-
<b>Total Accumulated Amortization</b>	\$ 28,895	\$ 99,959	\$ 530,227	\$ 659,081	\$ 608,734
<b>Net Book Value at March 31, 2024</b>	\$ 14,247	\$ 27,553	\$ 111,992	\$ 153,792	
<b>Net Book Value at March 31, 2023</b>	\$ 22,875	\$ 22,399	\$ 112,742		\$ 158,016



## Notes to the Financial Statements

March 31, 2024

### Note 6 Defined Benefit Plans

The Office participates in the multi-employer pension plans: Management Employees Pension Plan, Public Service Pension Plan and Supplementary Retirement Plan for Public Service Managers. The expense for these pension plans is equivalent to the annual contributions of \$553,709 for the year ended March 31, 2024 (2023 – \$572,253).

At December 31, 2023, the Management Employees Pension Plan reported a surplus of \$1,316,313,000 (2022 - surplus \$924,735,000) and the Public Service Pension Plan reported a surplus of \$4,542,500,000 (2022 – surplus \$4,258,721,000). At December 31, 2023 the Supplementary Retirement Plan for Public Service Managers had a deficit of \$21,343,000 (2022 - deficit \$25,117,000).

The Office also participates in a multi-employer Long Term Disability Income Continuance Plan. At March 31, 2024, the Management, Opted Out and Excluded Plan reported an actuarial deficit of \$6,855,000 (2023 – deficit \$1,962,000). The expense for this plan is limited to employer’s annual contributions for the year.

### Note 7 Contractual Obligations

Contractual Obligations are obligations of the Office to others that will become liabilities in the future when the terms of those contracts or agreements are met.

	2024	2023
Obligations under operating leases and contracts	\$ -	\$ 1,562

### Note 8 Contingent liabilities

The Office is named in one (2023 - One) legal matter where legal costs are being sought and the outcome of this claim is not determinable.

### Note 9 Budget

The budget shown on the statement of operations is based on the budgeted expenses that the all-party Standing Committee on Legislative Offices approved on December 2, 2022. The following table compares the office’s actual expenditures, excluding non-voted amounts such as surplus sales and amortization, to the approved budgets:

## Notes to the Financial Statements

March 31, 2024

### Note 9 Budget (Cont'd)

	Voted Budget	Actual Expended	Unexpended
Operating expenditures	8,485,000	8,014,743	470,257
Capital investments	50,000	46,123	3,877
	8,535,000	8,060,866	474,134

### Note 10 Approval of Financial Statements

These financial statements were approved by the Information and Privacy Commissioner.

Office of the Information and Privacy Commissioner

## Schedule 1 - Salary and Benefits Disclosure

Year ended March 31, 2024

	2024			2023
	Base Salary (a)	Other Non- cash Benefits (b) (c)	Total	Total
<b>Senior Official</b>				
Information and Privacy Commissioner	\$ 255,621	\$ 72,204	\$ 327,825	\$ 332,755

(a) Base salary is comprised of pensionable base pay.

(b) Other non-cash benefits include the Office's share of all employee benefits and contributions or payments made on behalf of employees, including pension, supplementary retirement plan, health care, dental coverage, group life insurance, short and long term disability plans, health spending account, conference fees, professional memberships, and courses. No bonuses were paid in 2024.

(c) Other non-cash benefits for the Information and Privacy Commissioner paid by the Office includes \$9,991 (2023: \$8,186) being the lease, fuel, insurance and maintenance expenses for an automobile provided by the Office.

## Schedule 2 - Related Party Transactions

Year ended March 31, 2024

Related parties are those entities consolidated or accounted for on the modified equity basis in the Government of Alberta's Consolidated financial statements. Related parties also include key management personnel and close family members of those individuals in the Office. The Office and its employees paid or collected certain taxes and fees set by regulations for premiums, licenses and other charges. These amounts were incurred in the normal course of business, reflect charges applicable to all users, and have been excluded from this schedule.

The Office of the Information and Privacy Commissioner had the following transactions with related parties recorded on the Statement of Operations and the Statement of Financial Position at the amount of consideration agreed upon between the related parties:

	Other Entities	
	2024	2023
<b>Expenses - Directly Incurred</b>		
Alberta Risk Management Fund	\$ 4,620	\$ 4,392
Postage	9,226	10,132
Information and Technology Services	39,300	17,562
Consumption	2,947	3,055
Fleet vehicle	5,664	5,108
	\$ 61,757	\$ 40,249

The Office of the Information and Privacy Commissioner also had the following transactions with related parties for which no consideration was exchanged. The amounts for these related party transactions are estimated based on the costs incurred by the service provider to provide the service. These amounts are not recorded in the financial statements but are disclosed in Schedule 3.

	Other Entities	
	2024	2023
<b>Expenses - Incurred by Others</b>		
Accommodation Costs	\$ 495,040	\$ 489,217
Business Services	76,000	54,000
	\$ 571,040	\$ 543,217

## Schedule 3 - Allocated Costs

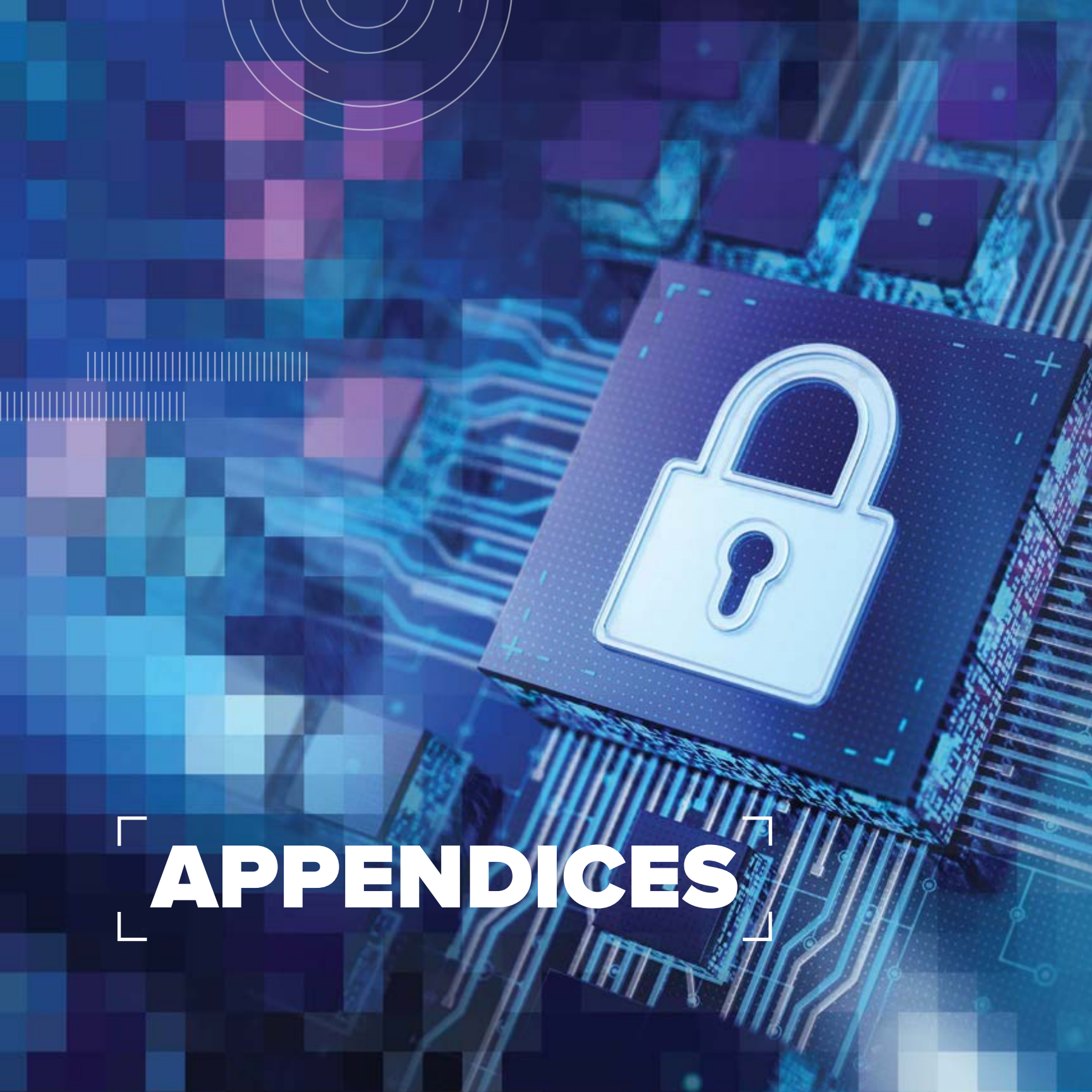
Year ended March 31, 2024

Program	2024				2023	
	Expenses - Incurred by Others					
	Expenses (a)	Accommodation Costs (b)	Business Services (c)	Total Expenses	Total Expenses	
Operations	\$ 8,065,090	\$ 495,040	\$ 76,000	\$ 8,636,130	\$ 8,005,143	

(a) Expenses - Directly Incurred as per Statement of Operations which include related party transactions as disclosed in Schedule 2.

(b) Costs shown for Accommodation (includes grants in lieu of taxes), allocated by square meters.

(c) Business services includes charges for shared services, finance services, technology services, 1GX, and Corporate Overhead.



# APPENDICES

# APPENDIX A

Figure 20: **Cases Opened under the FOIP Act (by Entity Type and Case Type)**

Statistics are from the period of April 1, 2023 to March 31, 2024

Entity Type under the FOIP Act	Advice and Direction	Authorization to Disregard Request	Authorization to Indirectly Collect	Complaint	Excuse Fee	Investigation Generated by Commissioner	Notification to OIPC	Offence Investigation	Other	Privacy Impact Assessment	Request for Information	Request for Review	Request for Review 3rd Party	Request for Time Extension	Self-reported Breach	TOTAL
Agencies																0
Boards			5									23	1	9		38
Colleges			1									5			6	12
Commissions			1	1						1		8		14	1	26
Committees																0
Crown Corporations												1				1
Federal Departments																0
Foundations															1	1
Government Ministries/Departments			9	1	27					1	1	187	23	76	6	331
Health Quality Council of Alberta																0
Hospital Board (Covenant Health)														2		2
Independent Agencies																0
Law Enforcement Agencies			7	1		4				1	1	77			1	92
Legislative Assembly Office												2				2
Local Government Bodies												1			2	3
Long Term Care Centres		1														1
Municipalities		5	4									91	27	87	10	224
Nursing Homes												1				1
Office of the Premier/Alberta Executive Council						1						4				5
Officers of the Legislature												2		1		3
Panels																0
Regional Health Authorities (Alberta Health Services)			1							1		24	4	8		38
School Districts			5									11		3	17	36
Tribunal														2		2
Universities		1	1			1						19		4	3	29
Other			2								4	4		7	5	22
<b>TOTAL</b>	<b>0</b>	<b>7</b>	<b>0</b>	<b>36</b>	<b>3</b>	<b>28</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>6</b>	<b>460</b>	<b>55</b>	<b>213</b>	<b>52</b>	<b>869</b>

**Note:**

The total does not include intake cases, because they are not broken down by entity type. See Figure 23 for intake numbers.

Figure 21: **Cases Opened under HIA (by Entity Type and Case Type)**

Statistics are from the period of April 1, 2023 to March 31, 2024

Entity Type under HIA	Advice and Direction	Authorization to Disregard Request	Authorization to Indirectly Collect	Complaint	Engage in or Commission a Study 84(1)(e) HIA	Excuse Fee	Investigation Generated by Commissioner	Notification to OIPC	Offence Investigation	Privacy Impact Assessment	Request for Information	Request for Review	Request for Time Extension	Self-reported Breach	TOTAL
Affiliates and Information Managers (Electronic Medical Record Vendors, Consultants)															0
Associations, Boards, Councils, Committees, Commissions, Panels or Agencies, created by Custodians															0
Chiropractors										84	1				85
Dental Hygienists										20					20
Dentists				8						161				2	171
Denturists										7					7
Government Ministries/Departments															0
Health Professional Colleges and Associations															0
Health Quality Council of Alberta															0
Hospital Board (Covenant Health)				1						3				9	13
Long Term Care Centres										1		1	1	1	4
Midwives										1	1			3	5
Minister of Health (Alberta Health)				5			1			10		2		42	60
Minister of Mental Health and Addiction										3					3
Nursing Homes															0
Opticians															0
Optometrists				1						29		1		1	32
Pharmacies/Pharmacists				3						485		1		167	656
Physicians				6			50			1063	22	11		99	1251
Podiatrists															0
Primary Care Networks										22				1	23
Regional Health Authorities (Alberta Health Services)				23			1		1	37	3	4	1	118	188
Registered Nurses										94		1			95
Research Ethics Boards															0
Researchers											1				1
Subsidiary Health Corporations										1		4		4	9
Universities/Faculties of Medicine															0
Other							1			6	3		1	1	12
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>47</b>	<b>0</b>	<b>0</b>	<b>53</b>	<b>0</b>	<b>1</b>	<b>2027</b>	<b>31</b>	<b>25</b>	<b>3</b>	<b>448</b>	<b>2635</b>

**Note:**

The total does not include intake cases, because they are not broken down by entity type. See Figure 23 for intake numbers.



Figure 22: **Cases Opened under PIPA (by Entity Type and Case Type)**

Statistics are from the period of April 1, 2023 to March 31, 2024

Entity Type under PIPA	Advice and Direction	Authorization to Disregard Request	Authorization to Indirectly Collect	Complaint	Excuse Fee	Investigation Generated by Commissioner	Notification to OIPC	Offence Investigation	Privacy Impact Assessment	Request for Information	Request for Review	Request for Time Extension	Self-reported Breach	TOTAL
11 Agriculture, Forestry, Fishing and Hunting														0
21 Mining, Oil and Gas				1							2		14	17
22 Utilities													4	4
23 Construction				1							2		2	5
23 Trades/Contractors											1		2	3
31-33 Manufacturing				1									30	31
41 Wholesale Trade				2									8	10
44-45 Retail				2					1		2		38	43
44-45 Dealers in Automobiles													4	4
48-49 Transportation													5	5
51 Information and Cultural Industries						1				1			27	29
52 Finance				1		1			1		1		44	48
522 Credit Unions													16	16
524 Insurance Industry				2							5		26	33
53 Real Estate, Rental, Leasing				9							2		7	18
54 Professional, Scientific and Technical				2						1	2		43	48
54 Legal Services				5									12	17
55 Management of Companies and Enterprises				1										1
56 Admin and Support Services				1							3		5	9
56 Collection Agencies														0
56 Credit Bureaus														0
56 Investigative and Security Services				1							1		1	3
61 Educational Services											1	1	5	7
62441 Child Day Care Services											2		3	5
62 Health Care and Social Assistance				1		2			5	2	3		30	43
624 Private Healthcare and Social Assistance				2							3		7	12
621510 Medical and Diagnostic Laboratories														0
623 Nursing Homes/Home Health Care				2					1				3	6
71 Arts, Entertainment and Recreation				2		1					1		7	11
72 Accommodation and Food Services				3									8	11
81 Motor Vehicle Parts and Accessories													1	1
91-92 Public Administration										1	1			2
81 Other Services				6		1				3	5		28	43
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>45</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>8</b>	<b>8</b>	<b>37</b>	<b>1</b>	<b>380</b>	<b>485</b>

**Note:**

The total does not include intake cases, because they are not broken down by entity type. See Figure 23 for intake numbers.

### Figure 23: Intake Cases Opened under the FOIP Act, HIA, PIPA (by Case Type)

Statistics are from the period of April 1, 2023 to March 31, 2024

Case Type	FOIP Act	HIA	PIPA
Intake - 3rd party RR Search	297	1	0
Intake - Complaint	30	19	55
Intake - Info Rec'd in Error	0	0	0
Intake - PIA	0	36	0
Intake - Request for Access to P/C/O Info	9	4	2
Intake - Request for Information	0	0	0
Intake - Request for Review	95	14	10
Intake - Request for Review 3rd Party Intervention	1	0	0
Intake - Request to Excuse Fees	0	0	0
<b>TOTAL</b>	<b>432</b>	<b>74</b>	<b>67</b>
<b>OVERALL TOTAL</b>	<b>573</b>		

# APPENDIX B

Figure 24: **Cases Closed under the FOIP Act (by Entity Type and Case Type)**

Statistics are from the period of April 1, 2023 to March 31, 2024

Entity Type under the FOIP Act	Advice and Direction	Authorization to Disregard Request	Authorization to Indirectly Collect	Complaint	Disclosure to Commissioner	Excuse Fee	Investigation Generated by Commissioner	Notification to OIPC	Offence Investigation	Privacy Impact Assessment	Request for Information	Request for Review	Request for Review 3rd Party	Request for Time Extension	Request for Advance Ruling	Self-reported Breach	TOTAL
Agencies																	0
Boards			5								16	1	9				31
Colleges			1						1		1					7	10
Commissions		1	1							1	2		13				18
Committees																	0
Crown Corporations												1					1
Federal Departments																	0
Foundations																1	1
Government Ministries/Departments			18		2	1		1	3	1	139	21	93		9		288
Health Quality Council of Alberta																	0
Hospital Board (Covenant Health)													2				2
Law Enforcement Agencies			6				4	2	1	1	81		1		3		99
Legislative Assembly Offices																	0
Local Government Bodies											2					1	3
Long Term Care Centres																	0
Municipalities		3	15		1	1			1		84	18	86		16		225
Nursing Homes																	0
Office of the Premier/Alberta Executive Council											12						12
Officers of the Legislature											2		1		1		4
Panels																	0
Regional Health Authorities (Alberta Health Services)			1						1		17	6	7		1		33
School Districts			6						2		15		3		17		43
Tribunals													2				2
Universities		1	4				1				29	1	4		7		47
Other			2								6		7		10		25
<b>TOTAL</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>59</b>	<b>0</b>	<b>3</b>	<b>2</b>	<b>5</b>	<b>3</b>	<b>10</b>	<b>2</b>	<b>407</b>	<b>47</b>	<b>228</b>	<b>0</b>	<b>73</b>	<b>844</b>

**Note:**

The total does not include intake cases, because they are not broken down by entity type. See Figure 27 for intake numbers.

## Figure 25: Cases Closed under HIA (by Entity Type and Case Type)

Statistics are from the period of April 1, 2023 to March 31, 2024

Entity Type under HIA	Advice and Direction	Authorization to Disregard Request	Authorization to Indirectly Collect	Complaint	Disclosure to Commissioner	Engage in or Commission a Study 8.4(1)(e) HIA	Excuse Fee	Investigation Generated by Commissioner Notification to OI/PC	Offence Investigation	Privacy Impact Assessment	Request for Advance Ruling	Request for Information	Request for Review	Request for Review 3rd Party	Request for Time Extension	Self-Reported Breach	TOTAL	
Affiliates and Information Managers (Electronic Medical Record Vendors, Consultants)							1										1	
Associations, Boards, Councils, Committees, Commissions, Panels or Agencies, created by Custodians											1						1	
Chiropractors										57							57	
Dental Hygienists										18							18	
Dentists										236						2	238	
Denturists										3							3	
Government Ministries/Departments																	0	
Health Professional Colleges and Associations																	0	
Health Quality Council of Alberta																	0	
Hospital Board (Covenant Health)										3		1			9		13	
Long Term Care Centres			1									1			2		4	
Midwives										1	1				4		6	
Minister of Health (Alberta Health)			1				1		20		2	1		1	31		57	
Nursing Homes																1	1	
Opticians									1								1	
Optometrists										24							24	
Pharmacies/Pharmacists			5							266		1			162		434	
Physicians			15				2		634		9	12			95		767	
Podiatrists																	0	
Primary Care Networks										24					1		25	
Regional Health Authorities (Alberta Health Services)			29				1		33		2	13		1	134		213	
Registered Nurses										47							47	
Research Ethics Boards																	0	
Researchers											1						1	
Subsidiary Health Corporations			2				1	1				4			8		16	
Universities/Faculties of Medicine																	0	
Other										1	1				2		4	
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>53</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>2</b>	<b>1367</b>	<b>0</b>	<b>17</b>	<b>33</b>	<b>0</b>	<b>2</b>	<b>451</b>	<b>1931</b>

**Note:**

The total does not include intake cases, because they are not broken down by entity type. See Figure 27 for intake numbers.

## Figure 26: Cases Closed under PIPA (by Entity Type and Case Type)

Statistics are from the period of April 1, 2023 to March 31, 2024

Entity Type under PIPA	Advice and Direction	Authorization to Disregard Request	Authorization to Indirectly Collect	Complaint	Disclosure to Commissioner	Excuse Fee	Investigation Generated by Commissioner	Notification to OIPC	Offense Investigation	Privacy Impact Assessment	Request for Advance Ruling	Request for Information	Request for Review	Request for Review 3rd Party	Request for Time Extension	Self-reported Breach	TOTAL
11 Agriculture, Forestry, Fishing and Hunting																	0
21 Mining, Oil and Gas				1									1			2	4
22 Utilities																	0
23 Construction				2													2
23 Trades/Contractors																	0
31-33 Manufacturing				1									4			1	6
41 Wholesale Trade																	0
415 Motor Vehicle Parts and Accessories																	0
441110 Dealers in Automobiles														1			1
44-45 Retail				3			2		1			2				1	9
48-49 Transportation				3													3
51 Information and Cultural Industries								2					2			1	5
52 Finance										1						1	2
522 Credit Unions																	0
524 Insurance Industry				4									2			4	10
53 Real Estate, Rental, Leasing				7									6			1	14
54 Legal Services				1									3			3	7
54 Professional, Scientific and Technical				2			1					1	1			2	7
55 Management of Companies and Enterprises																	0
56 Admin and Support Services				1									2			1	4
56144 Collection Agencies																	0
56145 Credit Bureaus				1													1
5616 Investigative and Security Services																	0
61 Educational Services				1										1	1	1	3
62 Health Care and Social Assistance				1			1		3			1				1	7
621510 Medical and Diagnostic Laboratories																	0
623 Nursing Homes/Home Health Care																	0
624 Private Healthcare and Social Assistance				2									2			1	5
62441 Child Day Care Services													1			1	2
71 Arts, Entertainment and Recreation													1				1
72 Accommodation and Food Services				1									1				2
91 Public Administration																	0
81 Other Services				6						1		2	10			1	20
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>37</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>3</b>	<b>40</b>	<b>0</b>	<b>1</b>	<b>22</b>	<b>115</b>

**Note:**

The total does not include intake cases, because they are not broken down by entity type. See Figure 27 for intake numbers.

Figure 27: **Cases Closed at Intake under the FOIP Act, HIA, PIPA (by Case Type)**

Statistics are from the period of April 1, 2023 to March 31, 2024

Case Type	FOIP Act	HIA	PIPA
Intake - 3rd party RR Search	297	1	0
Intake - Complaint	33	24	63
Intake - Info Rec'd in Error	0	0	0
Intake - PIA	0	48	0
Intake - Request for Access to P/C/O Info	9	4	2
Intake - Request for Information	0	0	0
Intake - Request for Review	81	11	12
Intake - Request for Review 3rd Party Intervention	1	0	0
Intake - Request to Excuse Fees	0	0	0
<b>TOTAL</b>	<b>421</b>	<b>88</b>	<b>77</b>
<b>OVERALL TOTAL</b>	<b>586</b>		

# APPENDIX C

Figure 28: **FOIP Act Orders, Decisions and Public Investigation Reports Issued**

Statistics are from the period of April 1, 2023 to March 31, 2024. See Notes 1 to 6 on page 105.

FOIP Act Respondent	Orders	Decisions	Public Investigator Reports	Total	#Files	Notes
Affordability and Utilities	1			1	1	
Alberta Energy Regulator	2			2	4	
Alberta Health Services	3	1		4	4	Note 1
Alberta Human Rights Commission	1			1	1	
Alberta Motor Vehicle Industry Council	1			1	1	
Calgary Heritage Housing	1			1	1	
Calgary Police Commission	1			1	1	
Calgary Police Service	6			6	6	Note 2
Children's Services	1			1	1	
Children's Services; Forestry, Parks and Tourism; Public Safety and Emergency Services; Service Alberta and Red Tape Reduction	1			1	4	
City of Calgary	2			2	7	
City of Edmonton	5		1	6	5	
Credit Counselling Services of Alberta Ltd. O/A Money Mentors and Debtors' Assistance Board	1			1	1	Note 3
Edmonton Police Service	1			1	1	Note 4
Edmonton School Division	1			1	1	
Energy	1			1	1	
Environment and Protected Areas	1			1	1	
Health	1			1	14	
Justice	3			3	3	Note 5
Public Safety and Emergency Services	3			3	3	Note 6
Service Alberta and Red Tape Reduction	1			1	1	
St. Albert School Division	1			1	1	
Town of Irricana	1			1	1	
Town of Two Hills	1			1	1	
University of Alberta	1			1	1	
University of Calgary	2			2	2	
Village of Edgerton	1			1	1	
Workers' Compensation Board	1			1	1	
<b>TOTAL</b>	<b>46</b>	<b>1</b>	<b>1</b>	<b>48</b>	<b>70</b>	

## Figure 29: HIA Orders, Decisions and Public Investigation Reports Issued

Statistics are from the period of April 1, 2023 to March 31, 2024. See Note 1 on page 105.

HIA Respondent	Orders	Decisions	Public Investigaton Reports	Total	#Files	Notes
Alberta Health Services	3			3	3	Note 1
Covenant Health	1			1	1	
Dr. Andrew Mamo	1			1	1	
Dr. Brian Isaac	1			1	1	
Dr. Gail Bateman	1			1	1	
Dr. Mahmoud Ismael	1			1	1	
Dr. Oluwaseun Oyeniran	1			1	1	
Dr. Ramneek Kumar	2			2	2	
<b>TOTAL</b>	<b>11</b>	<b>0</b>	<b>0</b>	<b>11</b>	<b>11</b>	



## Figure 30: PIPA Orders, Decisions and Public Investigation Reports Issued

Statistics are from the period of April 1, 2023 to March 31, 2024

PIPA Respondent	Orders	Decisions	Public Investigator Reports	Total	#Files	Notes
Association of Academic Staff of the University of Alberta	1			1	1	
Credit Counselling Services of Alberta Ltd. O/A Money Mentors and Debtors' Assistance Board	1			1	1	Note 3
Frohlich Rollins Schwab, Barristers and Solicitors	1			1	1	
Lindt & Sprungli (Canada) Inc.	1			1	1	
Loblaws Companies Limited	1			1	1	
TD Insurance Meloche Monnex	1			1	1	
United Nurses of Alberta	2			2	2	
West Fraser Mills Ltd.	1			1	1	
<b>TOTAL</b>	<b>9</b>	<b>0</b>	<b>0</b>	<b>9</b>	<b>9</b>	
<b>OVERALL TOTAL FOR FOIP ACT, HIA &amp; PIPA</b>	<b>66</b>	<b>1</b>	<b>1</b>	<b>118</b>	<b>90</b>	

### Notes:

- 1 Order F2024-06/H2024-01 covers files 031795 (FOIP Act) and 022139 (HIA).
- 2 Order F2021-19 issued 2021/22 did not close the file. Order F2023-14 issued 2023/24 closed the file.
- 3 Order P2023-07/F2023-06 covered files 010063 (PIPA) and 023731 (FOIP Act) and did not close the files.
- 4 Order F2023-R-01 was a reconsideration of Order F2020-17.
- 5 Order F2023-37 did not close the file (022957).
- 6 Order F2021-42 issued 2021/22 did not close the file. Order F2023-18 issued 2023-24 closed the file.
- 7 This table contains all orders and decisions released by the OIPC whether the issuance of the order or decision concluded the matter or not.
- 8 The number of orders, decisions and investigation reports are counted by the number of order, decision or investigation report numbers assigned. A single order, decision or investigation report can relate to more than one entity and more than one file.
- 9 Orders and decisions are recorded by the date the order or decision was signed, rather than the date the order or decision was publicly released.
- 10 Only those investigation reports that are publicly released are reported.
- 11 Copies of orders, decisions and public investigation reports are available on the OIPC web site at oipc.ab.ca.

# LIST OF FIGURES

<b>Figure 1:</b> 2023–2024 Organizational Structure .....	Page 15
<b>Figure 2:</b> 2023–24 Process .....	Page 16
<b>Figure 3:</b> New Process Developed in 2023–24 and Implemented April 1, 2024 .....	Page 17
<b>Figure 4:</b> Total Actual Costs Compared to Budget .....	Page 21
<b>Figure 5:</b> Total Actual Costs Compared to Prior Year .....	Page 21
<b>Figure 6:</b> Cases Opened by Legislation (Three Year Comparison) .....	Page 33
<b>Figure 7:</b> Cases Opened by Case Type and by Legislation (Three Year Comparison) .....	Page 34
<b>Figure 8:</b> Cases Closed by Legislation (Three Year Comparison) .....	Page 35
<b>Figure 9:</b> Cases Closed by Case Type and by Legislation (Three Year Comparison) .....	Page 36
<b>Figure 10:</b> Cases Closed by Resolution Method .....	Page 37
<b>Figure 11:</b> Percentage of Cases Closed by Resolution Method .....	Page 37
<b>Figure 12:</b> Total Number of General Enquiries .....	Page 38
<b>Figure 13:</b> Percentage Distribution of General Enquiries .....	Page 38
<b>Figure 14:</b> Case Resolution Team by Case Type .....	Page 40
<b>Figure 15:</b> Compliance Support Team by Case Type .....	Page 41
<b>Figure 16:</b> Investigations Team by Case Type .....	Page 42
<b>Figure 17:</b> Adjudication Team by Case Type .....	Page 43
<b>Figure 18:</b> Requests for Time Extensions Submitted by Public Bodies .....	Page 54
<b>Figure 19:</b> Trend in Number of Requests for Time Extensions 2009–2024 .....	Page 54
<b>Figure 20:</b> Cases Opened under the FOIP Act (by Entity Type and Case Type) .....	Page 95
<b>Figure 21:</b> Cases Opened under HIA (by Entity Type and Case Type) .....	Page 96
<b>Figure 22:</b> Cases Opened under PIPA (by Entity Type and Case Type) .....	Page 97
<b>Figure 23:</b> Intake Cases Opened under the FOIP Act, HIA, PIPA (by Case Type) .....	Page 98
<b>Figure 24:</b> Cases Closed under the FOIP Act (by Entity Type and Case Type) .....	Page 99
<b>Figure 25:</b> Cases Closed under HIA (by Entity Type and Case Type) .....	Page 100
<b>Figure 26:</b> Cases Closed under PIPA (by Entity Type and Case Type) .....	Page 101
<b>Figure 27:</b> Cases Closed at Intake under the FOIP Act, HIA, PIPA (by Case Type) .....	Page 102
<b>Figure 28:</b> FOIP Act Orders, Decisions and Public Investigation Reports Issued .....	Page 103
<b>Figure 29:</b> HIA Orders, Decisions and Public Investigation Reports Issued .....	Page 104
<b>Figure 30:</b> PIPA Orders, Decisions and Public Investigation Reports Issued .....	Page 105



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