



Order F26-46

FRASER HEALTH AUTHORITY

D. Hans Hwang
Adjudicator

June 10, 2026

CanLII Cite: 2026 BCIPC 58

Quicklaw Cite: [2026] B.C.I.P.C.D. No. 58

Summary: An applicant requested that the Fraser Health Authority (FHA) provide access under the *Freedom of Information and Protection of Privacy Act* (FIPPA) to records about their deceased parent (the Deceased). The FHA refused to disclose the requested records on the basis that the applicant was not authorized to make an access request on behalf of the Deceased under s. 5(1)(b) of FIPPA and s. 5 of the Freedom of Information and Protection of Privacy Act Regulation (Regulation). The FHA also refused to disclose the records under s. 22(1) (unreasonable invasion of third party-personal privacy) of FIPPA. The adjudicator found that the applicant was not acting on behalf of the Deceased under s. 5(1)(b) of FIPPA and s. 5 of the Regulation. The adjudicator further found that disclosing most, but not all, of the Deceased’s personal information would be an unreasonable invasion of their personal privacy under s. 22(1) and ordered the FHA to provide the applicant with access to the information that it was not required to withhold under s. 22(1).

Statutes Considered: *Freedom of Information and Protection of Privacy Act*, RSBC 1996 c 165, ss. 5(1)(b), 22(1), 22(2)(i), 22(3)(a), 22(3)(d) and 22(4). *Freedom of Information and Protection of Privacy Act Regulation*, BC Reg 155/2012, ss. 5(1)(a) and 5(1)(b). *Interpretation Act*, RSBC 1996, c. 283, s. 1 (definition of “personal representative”).

INTRODUCTION

[1] An individual (Applicant) requested, under the *Freedom of Information and Protection of Privacy Act* (FIPPA), the Fraser Health Authority (FHA) provide access to records about their deceased parent. I will refer to the Applicant’s deceased parent as the “Deceased”.

[2] The FHA refused to disclose the requested records because it said the Applicant did not make their request on behalf of the Deceased under s. 5(1)(b)

of FIPPA¹ and s. 5 of the Freedom of Information and Protection of Privacy Regulation (Regulation).² The FHA also refused to disclose the responsive records under s. 22(1) (unreasonable invasion of third-party personal privacy).

[3] After receiving the FHA's response, the Applicant asked the Office of the Information and Privacy Commissioner (OIPC) for a review of the FHA's decision. Mediation by the OIPC did not resolve the issues and the matter proceeded to inquiry.

Preliminary Matter – new issues

[4] In their submissions, both parties discuss an access request made by the Deceased in June 2024 (Deceased's request) which is not the subject of this inquiry.³ The FHA submits that they received the Deceased's request but failed to process it because of a miscommunication between staff who are in charge of processing FIPPA requests.⁴ The applicant does not specifically address FIPPA provisions but appears to complain about the FHA failing to make a reasonable effort to assist the Deceased under s. 6(1) and to respond to the Deceased's request within the statutory time limit imposed by s. 7(1).⁵

[5] Past OIPC Orders have consistently said parties must request and receive permission from the OIPC to introduce new issues at an inquiry.⁶ The OIPC's notice of inquiry and its *Instructions for Written Inquiries* clearly explain the process for adding new issues to an inquiry.

[6] While I can see from the Applicant's submission that the Applicant helped the Deceased with their access request,⁷ the Deceased's request is, as set out above, not the subject of this inquiry. The Applicant did not apply to the OIPC for permission to add ss. 6(1) and 7(1) regarding the Deceased's request into the inquiry nor explain why they are only raising these issues at this late stage. In addition, nothing before me suggests that it would be fair to add these new issues or that there is any exceptional circumstance that warrants adding them. Therefore, I will not add those issues or consider the Applicant's submissions about ss. 6(1) and 7(1) relating to the Deceased's request any further.

¹ For the remainder of this Order, when I refer to sections of an enactment I am referring to FIPPA unless otherwise stated.

² Freedom of Information and Protection of Privacy Regulation, BC Reg 155/2012.

³ The Deceased request was made approximately five months before the Applicant's access request that was made in November 2024. The Deceased's request was for records relating to their hospital visit.

⁴ Hospital's reply submission at para 10.

⁵ Applicant's response submission at paras A2 to B7.

⁶ Order F16-34, 2016 BCIPC 38 at para 9.

⁷ Applicant's response submission at para A2.

ISSUES AND BURDEN OF PROOF

[7] The issues I must decide in this inquiry are as follows:

1. Is the Applicant acting on behalf of the Deceased in accordance with s. 5(1)(b) of FIPPA and s. 5 of the Regulation?
2. Is the FHA required to refuse access to the information at issue under s. 22(1) of FIPPA?

[8] FIPPA does not identify which party has the burden to prove that an access applicant is an appropriate person to act on behalf of a deceased individual under s. 5(1)(b) of FIPPA and s. 5 of the Regulation. In these circumstances, past orders say that both parties are responsible for providing their best arguments and evidence to support their positions.⁸ I adopt this approach here.

[9] Section 57(2) places the burden on the Applicant to establish that disclosure of the information withheld under s. 22(1) would not be an unreasonable invasion of a third party's personal privacy. However, as the public body in this matter, the FHA has the burden of proving that the information withheld under s. 22(1) is personal information.⁹

DISCUSSION

Background

[10] The Deceased was admitted to a hospital operated by the FHA in March 2024 and subsequently discharged. The Deceased passed away at home in October 2024. The Applicant is the executor of the Deceased's estate.

[11] In November 2024, the Applicant requested the Deceased's records related to their hospitalization. The Applicant specified that they were seeking access to a hospital visit summary, social worker notes and any records related to the Deceased during their hospital stay.¹⁰

⁸ Order F24-22, 2024 BCIPC 28 (CanLII) at para 5; Order F18-08, 2018 BCIPC 10 (CanLII) at para 7; Order F07-10, 2007 CanLII 30395 (BC IPC) at paras 10-11.

⁹ Order 03-41, 2003 CanLII 49220 (BC IPC) at paras 9-11.

¹⁰ Applicant's access request dated November 14, 2024.

Records and information at issue

[12] The records at issue total 416 pages consisting of medical records and reports about the Deceased. The FHA has withheld the information in the records in full.

Acting of behalf of the deceased individual, s. 5(1)(b)

[13] An issue in this inquiry is whether the Applicant is authorized to make an access request on behalf of the Deceased. The outcome of this matter will affect how the issue of s. 22 is determined in this inquiry. If the Applicant is found to be acting on behalf of the Deceased, then the access request is treated as if the Deceased made the request. In other words, the analysis under s. 22 would consider that the Deceased is requesting access to their own personal information rather than the Applicant requesting access to the personal information of a third party under FIPPA.¹¹

[14] The requirements for determining whether an access applicant is acting on behalf of a deceased individual in exercising the deceased individual's access rights under FIPPA are set out in s. 5(1)(b) of FIPPA and in s. 5 of the Regulation. Section 5(1)(b) of FIPPA specifies how an applicant may make a request on behalf of another person. It reads:

5(1) To obtain access to a record, the applicant must make a written request that

(b) provides written proof of the authority of the applicant to make the request, if the applicant is acting on behalf of another person in accordance with the regulations,

[15] Section 5(1)(a) of the Regulation states that if an individual is deceased, an "appropriate person" may act for the deceased in relation to s. 5 of FIPPA. The term "appropriate person" is defined in s. 5 of the Regulation. The provisions relevant to this inquiry read as follows:

5(1) In this section:

"appropriate person" means,

(a) in respect of a deceased adult, one of the following:

(i) a committee acting under section 24 of the Patients Property Act for the deceased;

(ii) if there is no committee acting for the deceased, the personal representative of the deceased;

(iii) if there is no committee acting for the deceased and no personal representative of the deceased, the nearest relative of the deceased, and

¹¹ Schedule 1 of FIPPA defines the term "third party" as any person, group of persons or organization other than the person who made the access request or a public body.

"nearest relative" means the first person referred to in the following list who is willing and able to act under subsection (2) of this section for a deceased individual:

- (a) spouse of the deceased at the time of death;
- (b) adult child of the deceased;

...

5(4) If the right to act under subsection (2) of this section passes to persons of equal rank in the listed order in the definition of "nearest relative", the right passes to the person who is the eldest of the persons and descends in order of age to the next person who is willing and able to act.

[16] Applying those provisions, previous OIPC orders have developed the following two-part test to determine whether an applicant is authorized to make an access request for a deceased individual:

1. Is the applicant an "appropriate person" under s. 5(1)(b) of the Regulation?
2. Is the applicant acting "on behalf of" the deceased individual under s. 5(1) of FIPPA?¹²

[17] Both parts of the test must be established for an applicant to exercise a deceased individual's access rights under FIPPA.¹³ I will take the same approach and apply this test below.

Is the Applicant an "appropriate person"?

[18] Section 5(1) of the Regulation identifies in order of priority the following "classes of individuals"¹⁴ who can qualify as an appropriate person to act for a deceased individual in relation to s. 5 of FIPPA: (1) a committee acting under s. 24 of the *Patients Property Act*; (2) a personal representative; and (3) a nearest relative.

[19] The first question under s. 5(1) of the Regulation is whether there was a committee acting under s. 24 of the *Patients Property Act* for the deceased. The *Patients Property Act* regulates the management of an individual's estate when that individual qualifies as a "patient" as defined in s. 1 of that Act.¹⁵ If the person qualifies as a patient, then the Court may appoint a committee to manage the patient's affairs. In this case, the FHA says there is no evidence the Deceased had a committee.¹⁶ The Applicant does not dispute what the FHA says

¹² For example, Order F18-08, 2018 BCIPC 10 (CanLII) at para 10.

¹³ *Ibid.*

¹⁴ Section 76(2)(h) of FIPPA.

¹⁵ *Patients Property Act*, RSBC 1996, c 349. For a discussion about a committee's responsibilities and functions, see Order F07-21, 2007 CanLII 52746 (BCIPC) at paras 19-22.

¹⁶ FHA's initial submission at para 23.

about this matter. Based on the materials before me, I am unable to conclude the Deceased had a committee acting for them under s. 24 of the *Patients Property Act*.

[20] The next question under s. 5(1) of the Regulation is whether the Deceased has a personal representative. The term “personal representative” is not defined in FIPPA. However, the *Interpretation Act* defines the term “personal representative” to include “an executor of a will and an administrator with or without will annexed of an estate”.¹⁷

[21] I am satisfied that the Applicant is the Deceased’s personal representative. The Applicant says that they are the executor of the Deceased. Based on the information available to the FHA, including the last will of the Deceased which identifies the Applicant as the executor,¹⁸ the FHA does not dispute that the Applicant is an “appropriate person” under the statutory scheme.¹⁹ Rather, the FHA submits the Applicant failed to establish they were “acting on behalf” of their parent under s. 5 of FIPPA when making the access request.²⁰

[22] There is no evidence before me that the Applicant’s appointment as executor is invalid, or that a court has granted administration of the Deceased’s estate to someone else. There is also no evidence before me that a committee is currently acting on behalf of the Deceased.

[23] Taking these circumstances into account, I am satisfied that the Applicant is the Deceased’s personal representative and an appropriate person under s. 5(1) of the Regulation.

Was the Applicant’s request made on behalf of the Deceased?

[24] Having found the Applicant is an appropriate person to exercise the Deceased’s access rights under FIPPA, I must now decide whether the Applicant made their access request “on behalf” of the Deceased.

[25] FIPPA does not define what it means to be “acting on behalf of” another individual. Past orders have interpreted this term to mean acting to benefit the other individual, to further the other individual’s own goals or objectives, and

¹⁷ *Interpretation Act*, RSBC 1996, c. 283, s. 1 (definition of “personal representative”).

¹⁸ Release of Information Advisor (Advisor)’s affidavit #1, Exhibit B – the Deceased’s last will.

¹⁹ FHA’s initial submission at paras 28 and 32.

²⁰ FHA’s initial submission at para 24.

acting in the other individual's best interest.²¹ Additionally, if an applicant requests information to further their own interests, then this is not enough to establish they are acting on behalf of the other individual.²²

[26] The Applicant says that they have always acted on behalf of the Deceased and continue to do so after their passing.²³ The FHA says the fact the Applicant was the executor of the Deceased is not determinative of the Applicant's assertion that they were acting on behalf of the Deceased.²⁴

[27] To understand the Applicant's motive for making the access request, I have considered what they said when they made the request to the FHA. In their access request, the Applicant identified themselves as a person who would receive the records, and they checked boxes indicating they are an adult child and an executor of the Deceased. They also wrote that the "Request was from [the Deceased's request dated] June 2024".²⁵ I considered the Deceased's last will indicating the Applicant as the executor. I also considered the FHA's affidavit evidence that none of the information available to the FHA indicates the Deceased wanted their records to be released to the Applicant.²⁶

[28] Based on the materials before me, I am not persuaded that the Applicant made the access request on behalf of the Deceased. The Applicant did not sufficiently explain their motive for making the access request. What the Applicant wrote only suggests they want to know the medical treatments the Deceased received during their FHA stay. However, the Applicant does not explain how their desire to scrutinize the records at issue would benefit the Deceased's interests or how it would further the Deceased's goals or objectives in the Deceased's best interest. Also, the Applicant does not explain what the Deceased's goals and objectives were.

[29] Based on what the Applicant says, in my view, the access request was made in pursuit of the Applicant's own interests in investigating their parent's medical condition and treatment. I can see that while the Deceased was alive the Applicant looked after them. However, none of the materials before me suggests

²¹ Order F24-22, 2024 BCIPC 28 at para 19, Order F24-05, 2024 BCIPC 7 (CanLII) at para 27, Order F18-08, 2018 BCIPC 10 (CanLII) at paras 12-13 relying on Order F17-04, 2017 BCIPC 4 (CanLII) at para 17.

²² Order F22-42, 2022 BCIPC 47 at para 23; Order F17-04, 2017 BCIPC 4 (CanLII) at paras 18-20; Order F07-16, 2007 CanLII 35477 (BC IPC) at paras 19-20; Order 02-44, 2002 CanLII 42478 (BC IPC) at paras 39-40.

²³ Applicant's response submission at paras A.3 and B.17.

²⁴ FHA's initial submission at para 31.

²⁵ Applicant's access request dated November 14, 2024.

²⁶ Fraser Health Authority Information and Privacy Manager's affidavit #1 at para 10 (This affidavit was submitted in the FHA's reply submission).

the Deceased asked the Applicant to examine their medical records to make informed decisions for the Deceased while they were alive or if they were to die.

[30] Considering all the above, I am unable to conclude that the Applicant's motives for seeking access and the disclosure of the disputed records to the Applicant would be in the Deceased's best interest or for their benefit or would further the Deceased's goals and objectives.

Conclusion on acting on behalf of a deceased individual

[31] While I found that Applicant is an appropriate person pursuant to s. 5 of the Regulation, I find the Applicant has not established that they are acting on behalf of the Deceased in accordance with s. 5(1)(b) of FIPPA and as interpreted by past OIPC orders.

Unreasonable invasion of third-party personal privacy, s. 22

[32] Section 22(1) requires a public body to refuse to disclose personal information that would unreasonably invade a third party's personal privacy. A "third party" is defined in Schedule 1 of FIPPA as any person, group of persons or organization other than the person who made the access request or a public body.

[33] I found the Applicant is not acting on behalf of the Deceased in exercising the Deceased's access rights under FIPPA. Therefore, the Applicant's request for records is treated as a request for access to records related to a third party. This does not mean, however, that the relationship between the Applicant and the Deceased is irrelevant. The s. 22 analysis considers the impact of disclosing the personal information at issue in light of all relevant circumstances, which may include considering the relationship between the Applicant and the Deceased.

[34] With that in mind, I will now consider under s. 22 whether disclosure of the information at issue would be an unreasonable invasion of the Deceased's personal privacy or another third party's personal privacy. Numerous OIPC orders have considered the application of s. 22 and I will apply the same approach in this inquiry. I will explain that approach in my discussion and analysis below.

[35] The FHA submits that s. 22(1) applies to the information in dispute. The Applicant does not address s. 22(1) and the FHA's submissions on this point.

Personal information

[36] Section 22 applies only to personal information. Therefore, the first step in the s. 22 analysis is to determine if the information at issue is personal

information. As previously noted, the FHA has the burden of proving the information at issue qualifies as personal information.

[37] Personal information is defined in Schedule 1 of FIPPA as “recorded information about an identifiable individual other than contact information.” Information is about an identifiable individual when it is reasonably capable of identifying a particular individual, either alone or when combined with other available sources of information.

[38] Contact information is defined in Schedule 1 of FIPPA as “information to enable an individual at a place of business to be contacted and includes the name, position name or title, business telephone number, business address, business email or business fax number of the individual.” Whether information will qualify as contact information under s. 22 depends on the context in which the information appears in the records.²⁷

[39] The FHA says the information it withheld in the disputed records is personal information because it is about the Deceased who is an identifiable third party.²⁸

[40] I find most of the information at issue is about the Deceased. It is recorded on hospital forms, reports and charts, and includes their name and other identifying details such as their birthdate, address, age, gender and personal health number. I find none of the withheld information about the Deceased qualifies as contact information as defined in FIPPA and interpreted by past OIPC orders. Therefore, I am satisfied most of the withheld information is the Deceased’s personal information under FIPPA.

[41] The FHA also withheld some information that is about individuals other than the Deceased, specifically information about the Deceased’s children, FHA staff and health care professionals. Some of those individuals are identified by name, or there is information that is directly linked to those individuals on its own or combined with other information such as job titles, initials, signatures, identification numbers, or descriptive information about their activities or assessments related to the Deceased.²⁹ Therefore, I am satisfied some of the information in dispute is personal information of other individuals or it is simultaneously personal information of the Deceased and other identifiable individuals, including the Applicant.

[42] While some of the withheld information includes several health care providers’ names and job titles, I find this information was not used or provided

²⁷ Order F21-35, 2021 BCIPC 43 (CanLII) at para 164.

²⁸ FHA’s initial submission at para 39.

²⁹ For example, information located on pp. 127-139, 237-344, 346-353 of the records.

for work contact purposes.³⁰ Past OIPC orders have considered similar information and concluded it was not contact information because the names are found in notes and records those professionals prepared about the Deceased's medical care and the names were provided to identify the individuals who provided the care or opinion, or an individual to be notified of this opinion.³¹ Consistent with past orders, I find the names and job titles of several health care providers and social workers identified in the disputed records is not contact information under FIPPA.

[43] The FHA also withheld some template information in a blank form that does not contain any information about an identifiable individual.³² Given the generic nature of this information, I am satisfied this form is a part of the Deceased's hospital file but does not reveal any information about the Deceased or any other individual. Therefore, I find all of the template information on this blank form is not personal information under FIPPA.

[44] For all those reasons, I am satisfied that, apart from the blank form discussed above, all the information at issue in this inquiry is personal information under FIPPA.

Disclosure not an unreasonable invasion of privacy, s. 22(4)

[45] The second step in the s. 22 analysis is to consider s. 22(4), which sets out circumstances where disclosure is not an unreasonable invasion of a third party's personal privacy. If information falls into one of the circumstances enumerated in s. 22(4), s. 22(1) does not apply.

[46] The FHA submits that none of the s. 22(4) circumstances apply here.³³

[47] I have considered whether any of the subsections in s. 22(4) apply and I find none apply.

Presumption of unreasonable invasion of privacy, s. 22(3)

[48] The third step in the s. 22 analysis is to determine whether any of the circumstances listed in s. 22(3) apply to the personal information. If one or more apply, disclosure is presumed to be an unreasonable invasion of a third party's personal privacy.

³⁰ For example, information located on pp. 130, 132, 134, 137, 139, 141, 144, 293, 295, 299 and 415 of the records.

³¹ Order F24-85, 2024 BCIPC 97 (CanLII) at para 40; Order F25-80, 2025 BCIPC 94 (CanLII) at para 53.

³² Information located on p. 416 of the records.

³³ FHA's initial submission at para 40.

[49] The FHA submits that s. 22(3)(a) applies to the information at issue³⁴ and did not identify any other s. 22(3) presumption that may apply. I have considered the other presumptions under s. 22(3) and find s. 22(3)(d) is also relevant in this case. I will consider ss. 22(3)(a) and 22(3)(d) below.

Medical history, diagnosis, condition, treatment or evaluation, s. 22(3)(a)

[50] Section 22(3)(a) states that a disclosure of personal information is presumed to be an unreasonable invasion of a third party's personal privacy if the personal information relates to a medical, psychiatric or psychological history, diagnosis, condition, treatment or evaluation.

[51] The FHA submits the presumption under s. 22(3)(a) applies because the information that it withheld clearly relates to the Deceased's medical history, diagnoses, conditions, or treatment.³⁵

[52] I agree with the FHA that the information at issue relates to the Deceased's medical history, diagnosis, condition, treatment or evaluation. This information was recorded or created when the Deceased was admitted to the hospital and when they were evaluated and treated by physicians, health care providers, and social workers. Therefore, I am satisfied that the disclosure of this information is presumed to be an unreasonable invasion of the Deceased's personal privacy under s. 22(3)(a).

Employment or occupational history, s. 22(3)(d)

[53] Section 22(3)(d) states that a disclosure of personal information is presumed to be an unreasonable invasion of a third party's personal privacy if the personal information relates to a third party's employment, occupational or educational history.

[54] Some of the withheld information reveals the identification number of several health care providers, including physicians and pharmacists. Previous OIPC orders have found that a person's employee number or work-related personal identifier relate to a person's employment history under s. 22(3)(d) and that other unique work-related identifiers such as physician identification numbers relate to a person's occupational history under s. 22(3)(d).³⁶

[55] Consistent with past orders, I am satisfied that s. 22(3)(d) applies to the identification numbers, account number, and logon ID of the health care providers since it is an individual, personal identifier assigned to those individuals

³⁴ FHA's initial submission at para 41.

³⁵ FHA's initial submission at para 41.

³⁶ Order F21-35, 2021 BCIPC 43 (CanLII) at para 189 and Order F23-14, 2023 BCIPC 16 (CanLII) at para 87.

and used by them as part of their employment or occupation.³⁷ I conclude, therefore, this work-related personal identifier is a part of their employment or occupational history and its disclosure is presumed to be an unreasonable invasion of third-party personal privacy under s. 22(3)(d).

Relevant circumstances, s. 22(2)

[56] The final step in the s. 22 analysis is to consider the impact of disclosing the personal information at issue in light of all relevant circumstances, including those listed in s. 22(2). Some circumstances weigh in favour of disclosure and some against. Relevant circumstances that weigh in favour of disclosure may rebut any applicable presumptions under s. 22(3).

Information about a deceased person, s. 22(2)(i)

[57] Section 22(2)(i) requires a public body to consider whether the information is about a deceased person and, if so, whether the length of time the person has been deceased indicates that the disclosure is not an unreasonable invasion of their personal privacy.

[58] The FHA submits that insufficient time has lapsed since the Deceased passed away for s. 22(2)(i) to weigh in favour of disclosing the information at issue.³⁸

[59] Section 22(2)(i) recognizes that deceased individuals have privacy rights, although those rights may diminish with time, and the degree which they do may vary based on the particular circumstances.³⁹

[60] FIPPA does not specify a length of time after which disclosing a deceased individuals' personal information will not be an unreasonable invasion of privacy. Previous OIPC orders have found that an individual's personal privacy rights are likely to continue for at least 20 years after they have passed away.⁴⁰ In the present case, the Deceased passed away less than two years ago. Several past OIPC orders have found s. 22(2)(i) does not apply when the deceased individual has been dead for approximately two years.⁴¹ I agree that this short length of time since the Deceased's death usually means the Deceased's privacy rights

³⁷ For example, information located on pp. 30-39, 68, 70, 72, 73, 79, 83, 86, 88, 90, 91, 92, 93, 96, 99 of the records.

³⁸ FHA's initial submission at para 43.

³⁹ Order F22-42, 2022 BCIPC 47 (CanLII) at para 51 and Order F15-36, 2015 BCIPC 39 (CanLII) at para 29.

⁴⁰ Order F18-08, 2018 BCIPC 10 at paras 31-32; Order F14-09, 2014 BCIPC 11 at para 30; Order F23-92, 2023 BCIPC 108 at paras 60-62.

⁴¹ Order F23-92, 2023 BCIPC 108 (CanLII) at paras 62-63 and Order F15-36, 2015 BCIPC 39 (CanLII) at paras 29-30, and the other orders cited there.

under FIPPA have not diminished to such a degree that there are no longer any privacy concerns about disclosing the Deceased's personal information.

[61] I also find there is nothing about the specific circumstances of this case that would warrant reaching a different conclusion about the information at issue. As a result, I find s. 22(2)(i) does not weigh in favour of disclosing the Deceased's personal information.

Applicant's motives for requesting the Deceased's personal information

[62] Previous OIPC orders have found that an access applicant's motives are legitimate and understandable and weigh in favour of disclosure when the access applicant is seeking information to deal with the aftermath of a family member's death, including to find closure, or to better understand the circumstances surrounding the death or to hold the public body accountable.⁴²

[63] The Applicant does not specifically explain how their motive is relevant to the s. 22 analysis. All the Applicant says is that they want to know the medical treatments the Deceased received during their hospital stay.⁴³ In my view, this suggests the Applicant may be seeking the Deceased's medical records to better understand the circumstances surrounding their death. Consistent with past OIPC orders, I find that the fact the Applicant may have unresolved questions about the Deceased's condition and is seeking closure is a factor that weighs in favour of disclosure.

Applicant's knowledge about the information at issue

[64] An applicant's knowledge of the personal information at issue may be a factor that weighs in favour of disclosure where there is evidence, or the circumstances indicate, that an access applicant already knows or likely knows the information at issue.⁴⁴

[65] I find the FHA withheld some information in the disputed records which the Applicant already knows or would likely already know given the Applicant's involvement in the Deceased's life and care.⁴⁵ In some cases, the Applicant provided information to health care providers and social workers when some of the medical records were created and when certain assessments took place. This information was recorded in forms about the Deceased. I also find some of

⁴² For example, Order 00-11, 2000 CanLII 10554 (BCIPC), Order F14-32, 2014 BCIPC 35 (CanLII) at paras 39-41 and Order F24-05, 2024 BCIPC 7 (CanLII) at paras 50-51.

⁴³ Applicant's submission at para B.30.

⁴⁴ For example, Order F23-13, 2023 BCIPC 15 (CanLII) at para 184 and Order F17-05, 2017 BCIPC 6 (CanLII) at paras 54-60.

⁴⁵ For example, information located on pp. 128, 131, 132, 133, 135, 140, 365 and 378 of the records.

the information withheld in the records at issue was already disclosed to the Applicant during the OIPC's mediation process.⁴⁶

[66] It is clear to me that the Applicant already knows some of the information that the FHA withheld in the records and this is personal information about both the Applicant and the Deceased. I find the Applicant's knowledge of some of the withheld information in the records is a significant factor that favours disclosure of that information.

Sensitivity of the personal information

[67] Past OIPC orders have considered the sensitivity of a deceased individual's personal information to determine whether the disclosure of this information would be an unreasonable invasion of the deceased's personal privacy.⁴⁷ Where the information is sensitive, previous decision-makers have found this is a factor that weighs in favour of withholding the information.⁴⁸ However, where the information is of a non-sensitive nature, or that sensitivity is reduced by the circumstances, then this factor may weigh in favour of disclosure.⁴⁹

[68] The records and information at issue in this case reveal the care and treatment the Deceased received during their hospital stay and the various assessments the Deceased experienced during this time. Also, some of the withheld information is about the Deceased's emotional state and social and family history. I accept this information is clearly sensitive, and I find this factor weighs against disclosing it to the Applicant.

Conclusion, s. 22(1)

[69] I found most of the information the FHA withheld under s. 22 is the personal information of the Deceased. In addition, some of it is about other identifiable individuals' interactions with the Deceased, so it is simultaneously the Deceased's personal information and other individuals' personal information.

[70] I found none of the circumstances in s. 22(4) apply here.

[71] I found that the disclosure of most of the personal information in dispute is presumed to be an unreasonable invasion of the Deceased's personal privacy under s. 22(3)(a) because it is about their medical condition and treatment. I also

⁴⁶ Information located on pp. 128, 131, 365 and 378 of the records.

⁴⁷ For example, Order F25-63, 2025 BCIPC 73 (CanLII) at para 98 and Order F24-05, 2024 BCIPC 7 (CanLII) at para 55.

⁴⁸ For example, Order F22-42, 2022 BCIPC 47 (CanLII) at para 61 and Order F24-05, 2024 BCIPC 7 (CanLII) at para 56.

⁴⁹ Order F24-05, 2024 BCIPC 7 (CanLII) at para 55.

found certain work-related personal identifiers such as identification numbers of health care providers are subject to the presumption under s. 22(3)(d) because this information relates to the employment or occupational history of those individuals.

[72] I found that the Deceased's privacy rights have not been reduced by the passage of time and s. 22(2)(i) weighs against disclosure. I also found that the Deceased's personal information about medical care and assessment they received is sensitive, and this fact weighs against disclosure. These factors support the s. 22(3)(a) presumption.

[73] I found that the Applicant's motive to investigate the Deceased's condition was a factor that weighs in favor of disclosure, but this is not sufficient to rebut the ss. 22(3)(a) and 22(3)(d) presumptions in most instances. I found that the Applicant already knows some of the Deceased's personal information that is simultaneously the Applicant's personal information, and with respect to that information I am satisfied that disclosure would not be an unreasonable invasion of the Deceased's personal privacy.

[74] Taking all of the above circumstances into account, I conclude the balance weighs against disclosure of most of the Deceased's personal information in the records at issue and the FHA must refuse to give the Applicant access to that information.

CONCLUSION

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

1. I confirm the FHA's decision that the Applicant is not acting on behalf of the Deceased in exercising their access rights under s. 5(1)(b) of FIPPA.
2. Under s. 58(2)(c) of FIPPA, and subject to item 3 below, I require the FHA to refuse access under s. 22(1) to the information withheld in the disputed records.
3. The FHA is not required, under s. 22(1), to refuse access to information located on pages 128, 129, 130, 131, 132, 133, 135, 140, 141, 365, 378 and 416 of the records that I have highlighted in green in a copy of the records that will be provided to the FHA with this order. Therefore, under s. 58(2) of FIPPA, I require the FHA to give the Applicant access to that green highlighted information.

-
4. I require the FHA to copy the OIPC registrar of inquiries on its cover letter to the applicant together with a copy of the information it discloses in compliance with item 3 above.

[76] Pursuant to s. 59(1) of FIPPA, the FHA is required to comply with this order by **July 23, 2026**.

June 10, 2026

ORIGINAL SIGNED BY

D. Hans Hwang, Adjudicator

OIPC File No.: F24-98840