

---

# Health Canada

Annual Report on the *Access to Information Act* and  
the *Privacy Act*

2024-2025



Health Canada is the federal department responsible for helping the people of Canada maintain and improve their health. Health Canada is committed to improving the lives of all of Canada's people and to making this country's population among the healthiest in the world as measured by longevity, lifestyle and effective use of the public health care system.

- Health Canada's mission and vision statement

Également disponible en français sur le site Web de Santé Canada sous le titre :  
Rapport annuel 2024-2025 sur la *Loi sur l'accès à l'information* et la *Loi sur la protection des renseignements personnels*

## **Health Canada**

Access to Information and Privacy Services Directorate

1600 Scott Street, Tower B, 3107A

7<sup>th</sup> Floor, Suite 700

Ottawa, Ontario, K1A 0K9

Tel: 613-954-9165

Email: [atip-aiprp@hc-sc.gc.ca](mailto:atip-aiprp@hc-sc.gc.ca)

© His Majesty the King in Right of Canada, as represented by the Minister of Health, 2023

Publication date: 2025

This publication may be reproduced for personal or internal use without permission provided the source is fully acknowledged.

Cat.: H1-9/3E-PDF

ISSN: 1910-3506

Pub.: 250156

## Table of contents

Introduction .....	5
About Health Canada .....	5
Purpose of the Acts .....	5
Organizational structure .....	5
Shared services partnership agreement .....	5
Access to Information and Privacy Operations Division .....	6
Privacy Management Division.....	6
Total full-time equivalents supporting the <i>Access to Information Act</i> and the <i>Privacy Act</i> ....	7
Governance .....	7
Delegation of authority .....	8
Proactive publication under Part 2 of the <i>Access to Information Act</i> .....	8
Performance for 2024-2025 .....	13
Data quality .....	13
<i>Access to Information Act</i> .....	13
<i>Privacy Act</i> .....	19
Costs for administering the <i>Access to Information Act</i> .....	24
Costs for Administering the <i>Privacy Act</i> .....	24
Training and awareness.....	24
Access to information training .....	24
Access to information awareness .....	25
Privacy training.....	25
Privacy awareness.....	25
Policies, guidelines, procedures and initiatives.....	26
Betterment Solutions Working Group .....	26
ATIP Operations Division’s Professional Development Program .....	26
Indigenous Reconciliation.....	26
Operation Glasswing.....	26

Request processing software solution project .....	26
New case management system .....	27
New privacy breach management and reporting process .....	27
Transparency requirements for sharing personal information with third parties .....	27
Standard on Privacy Impact Assessment .....	27
Canadian Dental Care Plan Privacy Task Force .....	28
Concept for artificial intelligence supported Privacy Impact Assessments .....	28
Summary of key issues and actions taken on complaints .....	28
Complaints management.....	28
Federal court cases.....	30
Applications & appeals submitted to the Federal Court .....	30
Monitoring compliance .....	31
Other reporting requirements specific to the <i>Privacy Act</i> .....	31
Material privacy breaches .....	31
Privacy Impact Assessments .....	31
Public interest disclosures .....	33
Appendix A: <i>Access to Information Act</i> and <i>Privacy Act</i> – Delegation Order.....	34
Delegation of Authority Schedule.....	35
Appendix B: Federal Court Case summary .....	38
Avir Pharma v. Canada (Discontinued).....	38
Elanco Canada Limited v. Canada (Minister of Health) (Decided) .....	38
Gina Brown v. Health Canada .....	38
Jordan Ash v. Canada (Minister of Health).....	38
Provital Health v. Canada (Minister of Health), Preventous Collaborative Health v. Canada (Minister of Health), Copeman Healthcare v. Canada (Minister of Health).....	39

# Introduction

Health Canada is pleased to present to Parliament its consolidated annual report on the administration of Access to Information and Privacy (ATIP) services, in accordance with section 94 of the *Access to Information Act* (ATIA) and section 72 of the *Privacy Act*. The report describes activities that support compliance with these laws for the fiscal year beginning April 1, 2024 and ending March 31, 2025.

## About Health Canada

Health Canada is the federal department responsible for helping Canadians maintain and improve their health, while respecting individual choices and circumstances. Health Canada has regional offices in British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Quebec, and the Atlantic and Northern Regions.

Health Canada does not have any entities with no employees or assets (non-operational ‘paper’ subsidiaries).

For more information about Health Canada, please [visit our website](#).

## Purpose of the Acts

The ATIA gives Canadian citizens, permanent residents of Canada, and anyone present in Canada the right to access information contained in federal government records, subject to certain specific and limited exceptions. The ATIA complements, but does not replace, other means of obtaining government information.

The *Privacy Act* protects an individual's privacy by setting out provisions related to the collection, retention, accuracy, disposal, use and disclosure of personal information. It also gives individuals the right of access to information about themselves held by the federal government, with certain specific and limited exceptions.

The ATIA and *Privacy Act* enhance accountability and transparency of federal institutions, promoting an open and democratic society.

# Organizational structure

## Shared services partnership agreement

Housed within the Corporate Service Branch, the Access to Information and Privacy Services Directorate (ATIPSD) was formed in 2024-2025 and comprises two divisions: ATIP Operations Division and the Privacy Management Division. Prior to this, both divisions were part of the Corporate Policy, Planning and Services Directorate within Corporate Services Branch. This restructure was implemented to elevate the role of access to information and privacy within

Health Canada. The new directorate supports both Health Canada and the Public Health Agency of Canada under the Shared Services Partnership Agreement. Although services are provided to both institutions, only Health Canada's statistics and financial data are included in this report.

## Access to Information and Privacy Operations Division

The primary function of the ATIP Operations Division is to ensure compliance of Health Canada's program delivery with the provisions of the ATIA, the *Privacy Act*, and related policies and directives issued by the Treasury Board of Canada Secretariat. Key responsibilities include:

- Managing and responding to access to information and personal information requests
- Providing training and promoting awareness of access to information and privacy obligations
- Responding to investigations related to access to information and personal information requests

In 2024–2025, there were 73.154 full-time equivalents within the ATIP Operations Division supporting Health Canada's administration of both the ATIA and the *Privacy Act*. A breakdown of the full-time equivalents by category is provided in the table below.

## Privacy Management Division

The primary functions of the Privacy Management Division include supporting compliance of Health Canada's program delivery with the provisions of the *Privacy Act* and the privacy-related policies and directives of the Treasury Board of Canada Secretariat. Key responsibilities include:

- The development of privacy policies, procedures and practices
- The delivery of privacy training and awareness programs to staff
- Assessing and reporting on privacy breaches
- Providing review and attestation of Treasury Board Submissions and Memoranda to Cabinet as Privacy Functional Area
- Providing review and approval of section 8(2)(j) disclosures (for research) and section 8 (2)(m) disclosures (for public interest or to benefit the individual)
- Coordinating the Department's InfoSource input
- Providing privacy analysis and advice using a number of tools including Privacy Impact Assessments and Privacy Protocols

In 2024-2025, there were 15.506 full-time equivalents within the Privacy Management Division supporting compliance of Health Canada's program delivery with the provisions of the *Privacy Act* and the privacy-related policies and directives of the Treasury Board of

Canada Secretariat. A breakdown of the full-time equivalents by category is provided in the table below.

## Total full-time equivalents supporting the *Access to Information Act* and the *Privacy Act*

In 2024-2025, there were a total of 88.660 full-time equivalents supporting the administration of the ATIA and the *Privacy Act*. Of these, 62.839 full-time equivalents supported the ATIA and 25.821 FTEs supported the *Privacy Act*. The following table outlines resources by Act and division.

### Total full-time equivalents supporting the ATIA and the *Privacy Act* by Division

Type of Full-Time Equivalents	ATIA	<i>Privacy Act</i>	<i>Privacy Act</i>	Total
	ATIP Operations Division	ATIP Operations Division	Privacy Management Division	
Full-time employees	55.262	9.071	12.781	<b>77.114</b>
Part-time and casual employees	2.894	0.475	1.408	<b>4.777</b>
Regional staff	0.000	0.000	0.000	<b>0.000</b>
Consultants and agency personnel	4.683	0.769	0.266	<b>5.718</b>
Students	0.000	0.000	1.051	<b>1.051</b>
<b>Total full-time equivalents ATIA and <i>Privacy Act</i></b>	<b>62.839</b>	<b>10.315</b>	<b>15.506</b>	<b>88.660</b>

For a breakdown of the groups and/or positions responsible for meeting proactive publication requirements under Part 2 of the ATIA, see the section on proactive publication below.

## Governance

Initiatives related to access to information and privacy are governed through the ATIP Executive Leaders Committee. This committee is composed of executive-level representatives from across Health Canada who provide leadership and strategic direction on key topics and are responsible for communicating them within their respective branches.

The Executive Leaders Committee is chaired by the Executive Director, Access to Information and Privacy Services Directorate, Corporate Services Branch, who is responsible for the ATIP Operations Division and the Privacy Management Division.

ATI and privacy matters requiring a higher level of oversight can also be brought forward to Health Canada's Executive Committee for strategic direction.

## Delegation of authority

In keeping with Treasury Board of Canada Secretariat recommendations on best practices, the Delegation Order extends authorities to multiple positions including the Deputy Minister, the Corporate Services Branch's Assistant Deputy Minister, the Director General of Corporate Policy, Planning and Services Directorate, the Executive Director of ATIP Operations Division and ATIP Coordinator, and the Director of the Privacy Management Division.

As appropriate, certain administrative authorities are delegated to various levels within the ATIP Operations Division to support the effective and efficient administration of the ATIA and the *Privacy Act*. The delegation order that was in effect at the end of 2024-2025 is included in this report ([Appendix A](#)).

## Proactive publication under Part 2 of the Access to Information Act

Health Canada is a government institution that is listed in Schedule I of the *Financial Administration Act* for the purposes of Part 2 of the ATIA.

The ATIP Operations Division worked with the Health Policy Branch, Chief Financial Officer Branch, Corporate Services Branch and the Communications and Public Affairs Branch to ensure that records identified under Part 2 of the ATIA are proactively published. Health Canada leveraged existing procedures to facilitate the proactive publication of information.

Branches involved in proactive publication use trackers with deadlines to monitor the timeliness of published information. There are also quality assurance teams that regularly validate that the accuracy and completeness of information proactively published.

Below are tables that outline the types of proactive publications and the percentage that are published within legislative timelines.

**Applies to all Government Institutions as defined in section 3 of the Access to Information Act**

Legislative Requirement	Section of ATIA	Publication Timeline	Does the requirement apply to your institution? (Y/N)	Internal group(s) or positions(s) responsible for fulfilling requirement	% published within legislated timelines	Link to web page where published
Travel Expenses	82	Within 30 days after the end of the month of reimbursement	Y	Accounting Operations Division, Chief Financial Officer Branch	100%	<a href="#">Government Travel Expenses</a>
Hospitality Expenses	83	Within 30 days after the end of the month of reimbursement	Y	Accounting Operations Division, Chief Financial Officer Branch	100%	<a href="#">Hospitality Expenses</a>
Reports tabled in Parliament	84	Within 30 days after tabling	Y	Cabinet and Parliamentary Affairs Division, Health Policy Branch	100%	<a href="#">Open Government Portal</a>

**Applies to government entities or Departments, agencies, and other bodies subject to the Act and listed in Schedules I, I.1, or II of the Financial Administration Act**

Legislative Requirement	Section of ATIA	Publication Timeline	Does the requirement apply to your institution? (Y/N)	Internal group(s) or positions(s) responsible for fulfilling requirement	% published within legislated timelines	Link to web page where published
Contracts over \$10,000	86	Q1-3: Within 30 days after the quarter Q4: Within 60 days after the quarter	Y	Procurement and Investment Management Directorate, Chief Financial Officer Branch	100%	<a href="#">Search Government Contracts over \$10,000</a>
Grants & Contributions over \$25,000	87	Within 30 days after the quarter	Y	Accounting Operations Division, Chief Financial Officer Branch	100%	<a href="#">Grants and Contributions</a>

Legislative Requirement	Section of ATIA	Publication Timeline	Does the requirement apply to your institution? (Y/N)	Internal group(s) or positions(s) responsible for fulfilling requirement	% published within legislated timelines	Link to web page where published
Packages of briefing materials prepared for new or incoming deputy heads or equivalent	88(a)	Within 120 days after appointment	Y	Cabinet and Parliamentary Affairs Division, Health Policy Branch	100%	<a href="#">Open Government Portal</a>
Titles and reference numbers of memoranda prepared for a deputy head or equivalent, that is received by their office	88(b)	Within 30 days after the end of the month received	Y	Branch Business Division, Health Policy Branch	100%	<a href="#">Briefing Note Titles and Numbers</a>
Packages of briefing materials prepared for a deputy head or equivalent's appearance before a committee of Parliament	88(c)	Within 120 days after appearance	Y	Cabinet and Parliamentary Affairs Division, Health Policy Branch	100%	<a href="#">Open Government Portal</a>

**Applies to government institutions that are departments named in Schedule I to the *Financial Administration Act* or portions of the core public administration named in Schedule IV to that Act (i.e. government institutions for which Treasury Board is the employer)**

<b>Legislative Requirement</b>	<b>Section of ATIA</b>	<b>Publication Timeline</b>	<b>Does the requirement apply to your institution? (Y/N)</b>	<b>Internal group(s) or positions(s) responsible for fulfilling requirement</b>	<b>% published within legislated timelines</b>	<b>Link to web page where published</b>
Reclassification of positions	85	Within 30 days after the quarter	Y	Classification Policy Centre, Corporate Services Branch	100%	<a href="#">Position Reclassification</a>

**Applies to Ministers' Offices (therefore apply to any institution that performs proactive publication on behalf of a Minister's Office)**

<b>Legislative Requirement</b>	<b>Section of ATIA</b>	<b>Publication Timeline</b>	<b>Does the requirement apply to your institution? (Y/N)</b>	<b>Internal group(s) or positions(s) responsible for fulfilling requirement</b>	<b>% published within legislated timelines</b>	<b>Link to web page where published</b>
Packages of briefing materials prepared by a government institution for new or incoming ministers	74(a)	Within 120 days after appointment	Y	Cabinet and Parliamentary Affairs Division, Health Policy Branch	100%	<a href="#">Open Government Portal</a>
Titles and reference numbers of memoranda prepared by a government institution for the minister, that is received by their office	74(b)	Within 30 days after the end of the month received	Y	Branch Business Division, Health Policy Branch	100%	<a href="#">Briefing Note Titles and Numbers</a>
Package of question period notes prepared by a government institution for the minister and in	74(c)	Within 30 days after last sitting day of the House of Common in June and December	Y	Cabinet and Parliamentary Affairs Division, Health Policy Branch	100%	<a href="#">Question Period Notes</a>

Legislative Requirement	Section of ATIA	Publication Timeline	Does the requirement apply to your institution? (Y/N)	Internal group(s) or positions(s) responsible for fulfilling requirement	% published within legislated timelines	Link to web page where published
use on the last sitting day of the House of Commons in June and December						
Packages of briefing materials prepared by a government institution for a minister's appearance before a committee of Parliament	74(d)	Within 120 days after appearance	Y	Cabinet and Parliamentary Affairs Division, Health Policy Branch	100%	<a href="#">Open Government Portal</a>
Travel Expenses	75	Within 30 days after the end of the month of reimbursement	Y	Accounting Operations Division, Chief Financial Officer Branch	100%	<a href="#">Government Travel Expenses</a>
Hospitality Expenses	76	Within 30 days after the end of the month of reimbursement	Y	Accounting Operations Division, Chief Financial Officer Branch	100%	<a href="#">Hospitality Expenses</a>
Contracts over \$10,000	77	Q1-3: Within 30 days after the quarter Q4: Within 60 days after the quarter	Y	Procurement and Investment Management Directorate, Chief Financial Officer Branch	100%	<a href="#">Search Government Contracts over \$10,000</a>
Ministers' Offices Expenses on behalf of all institutions.	78	Within 120 days after the fiscal year	Y	Note: This consolidated report is currently published by TBS		<a href="#">Expenditures of Ministers' Offices   Open Government - Government of Canada</a>

## Performance for 2024-2025

In 2024-2025, Health Canada received 3,972 requests (Access to Information, Access Informal and Privacy) and closed 4,111. When compared to the previous fiscal year, Health Canada received 13.6% more requests and closed 9.8% more.

Type of request	Received	Closed
Access to Information	1,681	1,852
Access Informal	2,013	1,955
Privacy	278	304
<b>Total</b>	<b>3,972</b>	<b>4,111</b>

The following section of the report includes an interpretation and explanation of the data contained in Health Canada's Statistical Report, which summarizes Access to Information and Privacy-related activities for the period between April 1, 2024 and March 31, 2025. This data can be found in the [Open Government Portal: Access to Information and Privacy Statistics](#).

### Data quality

It should be noted that minor data variances may occur from year to year, including in previously reported figures, such as the number of outstanding requests carried forward into the current fiscal year, material privacy breaches, or completed Privacy Impact Assessments. These variances arise due to a number of factors, including re-opened access to information requests at the request of the Office of the Information Commissioner during complaint resolution, or occasional human error during data entry. While every effort is made to ensure accuracy and integrity of data, minor discrepancies may occasionally occur.

### Access to Information Act

#### Access informal requests

Requests can be made for records previously released under the ATIA, which are referred to as access informal requests. Summaries of previously released access to information requests are posted monthly on the [Open Government](#) website where the public can make a request for copies of these records. This forms part of the Government of Canada's commitment to openness and transparency.

Health Canada received 2,013 access informal requests and closed 1,955 in 2024-2025. A total of 114 requests were carried over to the next reporting period.

## Access to information requests received and completed

In 2024-2025, a total of 1,681 access to information requests were received and 1,852 were completed, with 582,975 pages reviewed. More requests were closed than received, reducing Health Canada’s accumulated inventory of requests.

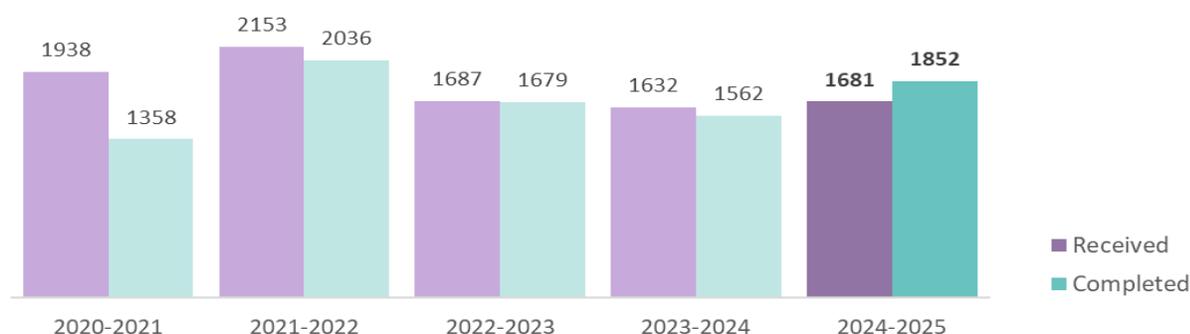


Figure 1: Access to information requests received and completed each fiscal year from 2020-2021 to 2024-2025.

### Key statistics by fiscal year

Fiscal year	Number of requests received	Number of requests outstanding from previous fiscal years	Total caseload	Number of requests closed	Number of pages reviewed for closed files
2020-2021	1,938	1,221	3,159	1,358	225,307
2021-2022	2,153	1,801	3,954	2,036	364,151
2022-2023	1,687	1,913	3,600	1,679	385,225
2023-2024	1,632	1,916	3,548	1,562	454,024
2024-2025	1,681	1,983	3,664	1,852	582,975

## Caseload, carry forward and outstanding active access to information requests

During 2024-2025, Health Canada managed a total of 3,664 active access to information requests. Of these active requests, 740 were outstanding from 2023-2024 and 1,243 were outstanding from previous years.

Health Canada closed 1,852 access to information requests and carried forward 1,812 to the 2025-2026 fiscal year. Of the 1,812 that are carried forward, 299 are within legislated timelines while 1,513 are beyond legislated timelines.

In 2024-2025, Health Canada managed 3% more active access requests than the previous fiscal year and reviewed 28.4% more pages. During the same period, Health Canada carried forward 9% fewer requests into the next fiscal year. This improvement is the result of an inventory reduction plan launched in the Spring of 2024, which focused on closing older files. A target was set to close 25% of the accumulated inventory received prior to April 1, 2023 (316

files), and this goal was surpassed, with 36% of the files being closed. Health Canada will continue to implement this strategy.

## Processing times for access to information requests

In 2024-2025, Health Canada closed a total of 1,852 access to information requests. Below is the breakdown of the time taken to process these requests:

- 161 were closed within 0 to 15 days
- 384 were closed within 16 to 30 days
- 109 were closed within 31 to 60 days
- 351 were closed within 61 to 120 days
- 164 were closed within 121 to 180 days
- 166 were closed within 181 to 365 days
- 517 took more than 365 days

Of the 1,852 requests that Health Canada closed in 2024-2025, 820 requests (44%) were closed within legislated timelines (30 days plus applicable extension) while 1,032 (56%) were closed past the legislated timelines.

The breakdown of the time taken to process the 1,032 requests closed past legislated timelines (including any extensions taken) is as follows:

- 108 were closed 1 to 15 days past legislated timelines
- 78 were closed 16 to 30 days past legislated timelines
- 97 were closed 31 to 60 days past legislated timelines
- 140 were closed 61 to 120 days past legislated timelines
- 57 were closed 121 to 180 days past legislated timelines
- 85 were closed 181 to 365 days past legislated timelines
- 467 were closed more than 365 days past legislated timelines

Requests are closed past the legislated timelines for a number of reasons:

- 534 were closed past the legislated timelines due to 'interference with operations/workload'
- 71 were closed past the legislated timelines due to 'external consultations'
- 7 were closed past the legislated timelines due to 'internal consultations'
- 420 were closed past the legislated timelines for reasons 'other' than those specified above

## Requests carried over to the next reporting period by reporting period received

In 2024-2025, 1,812 requests were carried over to the next reporting period. Below is a table outlining the number of access to information requests carried over to the next reporting period, broken down by the reporting period the request was received, and by whether the request was within legislated timelines.

### Requests carried over to the next reporting period by reporting period received

Reporting period requests carried over were received	Requests carried over that are within legislated timelines	Requests carried over that are beyond legislated timelines	Total
Received in 2024-2025	259	385	644
Received in 2023-2024	18	348	366
Received in 2022-2023	8	250	258
Received in 2021-2022	15	266	281
Received in 2020-2021	3	145	148
Received in 2019-2020	3	71	74
Received in 2018-2019	1	18	19
Received in 2017-2018	0	19	19
Received in 2016-2017	0	3	3
<b>Total</b>	307	1,505	1,812

## Source of requests under the *Access to Information Act*

The majority of Health Canada's access to information requests come from private businesses, mostly in the health sector (pharmaceutical, medical devices, natural health products, etc.), requesting records related to their competitors and their own products.

A total of 60.7% of requests were submitted by private businesses, 14.7% from the public, 10.5% from the media, 2.8% from organizations, and 1.8% from academia. Additionally, 9.3% declined to identify which category they associate with.

### Proportion of requests among sources

Source	Number of requests	Proportion of requests*	Change from 2023-2024
Business (Private Sector)	1,020	60.7%	+9%
Public	248	14.7%	-0.7%
Media	177	10.5%	+0.3%
Decline to Identify	157	9.3%	-2.4%
Organizations (e.g. political party, association, union)	48	2.8%	-4.7%
Academia	31	1.8%	-1.6
<b>Total</b>	<b>1,681</b>	<b>99.8%</b>	<b>N/A</b>

\*Numbers may not add up to 100% due to rounding.

### Extensions

The majority of extensions invoked under the ATIA, 882 (81%), were due to consultation with other parties, such as third parties and other government departments. The remaining 210 extensions (19%) were taken because processing the requests would have interfered with operations due to the large volume of records involved.

Completing consultations with other government organizations and third parties is a necessary step in the process, enabling Health Canada to release as much information as possible. Over the last several years, Health Canada has made more information available to the public, continuously reassessing the balance between its commitment to openness and transparency, with the need to safeguard confidential business information.

### Consultations completed from other institutions

In addition to processing its own requests, Health Canada also completes consultations received from other institutions and organizations.

In 2024-2025, Health Canada managed 150 consultations from other Government of Canada institutions (135 received in the 2024-2025 fiscal year and 15 received in 2023-2024). Health Canada also managed 41 consultations from other organizations (39 received in the 2024-2025 fiscal year and two received in 2023-2024).

Health Canada closed 177 consultations, reviewing 12,060 pages of records. A total of 11 consultations were carried over to 2025-2026 within negotiated timelines, while three were carried over beyond negotiated timelines.

Health Canada received fewer consultations (-12%) from other Government of Canada institutions and other organizations when compared to the previous fiscal year and closed

fewer consultation requests (-17%). In most cases, Health Canada consented to full disclosure of the records.

## Disposition of completed requests

Of the access to information requests completed in 2024-2025, 79% had records that were either disclosed in part (70% of requests) or all disclosed (9% of requests). A total of 11% of access to information requests were abandoned, while no records existed for 8% of requests. The breakdown of the remaining ‘other’ completed files is as follows:

- 0.7% request transferred
- 0.54% all exempted
- 0.27% all excluded
- 0.16% neither confirmed nor denied
- 0.05% decline to act with the approval of the Information Commissioner

\*Numbers may not add up to 100% due to rounding.

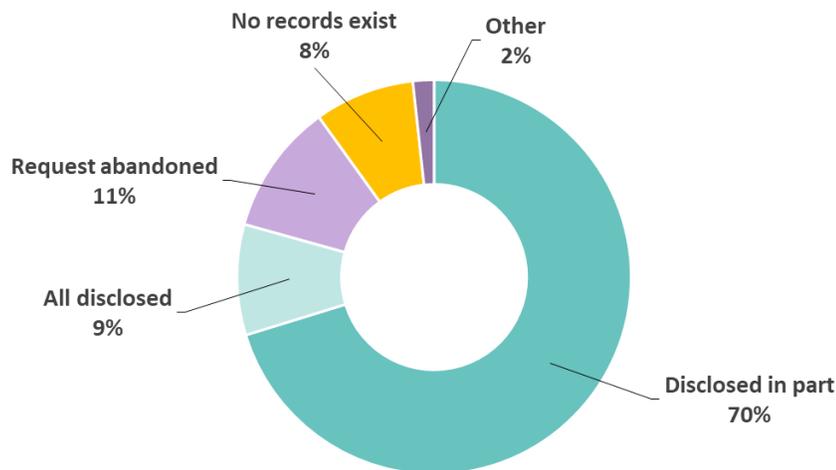


Figure 2: Disposition of completed access to information requests.

## Exemptions invoked

Sections 13 to 24 of the ATIA provide specific legislated exemptions intended to protect information from disclosure, while section 26 provides a temporary exemption relating to information that will soon be published. In some instances, records may have multiple exemptions applied to them to appropriately safeguard information.

The majority (1,290) of exemptions applied were for section 19(1), a mandatory exemption that safeguards personal information. The application of section 20 (to protect third-party information) in 520 requests often required consultation to ensure that only proprietary and

commercially sensitive information is protected. Section 21 (the protection of information related to government operations) was applied to 209 requests.

## **Exclusions cited**

The ATIA does not apply to published material, material available to the public for purchase, or for public reference (section 68), nor does it apply to confidences of the Privy Council (section 69). Records containing proposed exclusions under section 69 require consultation with the Department of Justice and, in some cases, the Privy Council Office.

In 2024-2025, 18 requests contained exclusions for publicly available material and 77 requests had records pursuant to confidences of the Privy Council.

## **Translations**

Two translations were required to respond to requests in 2024-2025.

## **Format of information released**

Of the requests where records were fully or partially disclosed, 1,404 were released as electronic copies, 44 in paper format, six as a data set, and one in video format. Health Canada releases records in the format preferred by the requestor and promotes the use of the Government of Canada's ATIP Online Request Service platform for timely and secure access to the records.

## ***Privacy Act***

### **Informal requests**

No informal requests were made in 2024-2025.

### **Privacy requests received and completed**

In 2024-2025, 278 privacy requests were received and 304 were completed with 30,177 pages reviewed. More requests were closed than received, reducing Health Canada's accumulated inventory of requests.

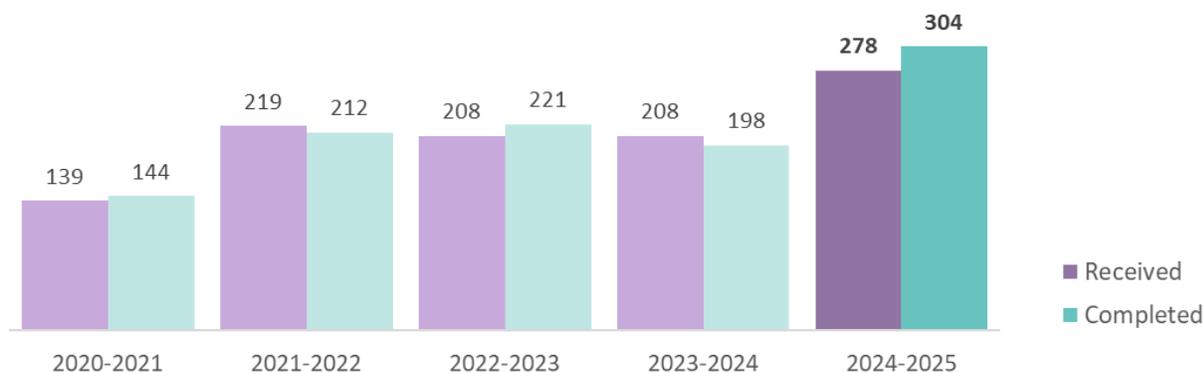


Figure 3: Privacy requests received and completed each fiscal year from 2020-2021 to 2024-2025.

### Key statistics by fiscal year

Fiscal Year	Number of requests received	Number of requests outstanding from previous fiscal years	Total caseload	Number of requests closed	Number of pages reviewed for closed files
2020-2021	139	54	193	144	9,630
2021-2022	219	56	268	212	15,762
2022-2023	208	56	264	221	16,173
2023-2024	208	43	251	198	17,628
2024-2025	278	53	331	304	30,177

### Caseload and carry forward and outstanding active requests

In 2024-2025, Health Canada managed 331 active privacy requests. Of this, 278 were privacy requests received in 2024-2025 while 53 were outstanding requests from previous reporting periods.

A total of 304 privacy requests were closed and 27 privacy requests were carried forward to the 2025-2026 fiscal year. Of the 27 privacy requests carried forward to 2025-2026, 17 were carried forward within legislated timelines while 10 were carried over beyond the legislated timelines.

Many of the requests received were from cannabis licence holders under the *Cannabis Act*, and from public servants requesting medical records, as the Public Service Occupational Health Program is operated by Health Canada. In addition, requests were received from current and former Health Canada employees who want to obtain their work file.

### Processing time for requests

In 2024-2025 Health Canada closed a total of 304 privacy requests. Below is a breakdown of the time taken to process these requests:

- 187 were closed within 0 to 15 days

- 65 were closed within 16 to 30 days
- 15 were closed within 31 to 60 days
- 6 were closed within 61 to 120 days
- 4 were closed within 121 to 180 days
- 11 were closed within 181 to 365 days
- 16 took more than 365 days

Of the 304 requests that Health Canada closed in 2024-2025, 257 (85%) privacy requests were closed within legislated timelines (30 days plus applicable extensions) while 47 (15%) were closed beyond legislated timelines.

The breakdown of the time taken to process the 47 requests closed past legislated timelines (including any extensions taken) is as follows:

- 4 were closed 1 to 15 days past legislated timelines
- 7 were closed 16 to 30 days past legislated timelines
- 4 were closed 31 to 60 days past legislated timelines
- 3 were closed 61 to 120 days past legislated timelines
- 5 were closed 121 to 180 days past legislated timelines
- 10 were closed 181 to 365 days past legislated timelines
- 14 were closed more than 365 days past legislated timelines

Requests are closed past the legislated timelines for a number of reasons:

- 20 were closed past the legislated timelines due to 'interference with operations/workload'
- 1 was closed past the legislated timelines due to 'external consultations'
- 26 were closed past the legislated timelines for reasons 'other' than those specified above

In accordance with the Treasury Board of Canada Secretariat Directive on Personal Information Requests and Correction of Personal Information, Health Canada continues to notify requesters in writing of anticipated delays.

## Requests carried over to the next reporting period by reporting period received

In 2024-2025, 27 requests were carried over to the next reporting period. Below is a table outlining the number of privacy requests carried over to the next reporting period, broken down by the reporting period the request was received, and by whether it was within legislated timelines.

### Requests carried over to the next reporting period by reporting period received

Reporting period requests carried over were received	Requests carried over that are within legislated timelines	Requests carried over that are beyond legislated timelines	Total
Received in 2024-2025	17	6	23
Received in 2023-2024	0	0	0
Received in 2022-2023	0	2	2
Received in 2021-2022	0	1	1
Received in 2020-2021	0	1	1
<b>Total</b>	17	10	27

## Extensions

Nine extensions were taken in 2024-2025. Five were taken due to a large number of pages, and four extensions were taken as further review was required to determine exemptions. Under the *Privacy Act*, 30 days is the longest extension that can be taken.

## Consultations completed from other institutions

Health Canada received five consultations from other Government of Canada institutions in 2024-2025. Four were closed during the reporting period and one was carried over to the next fiscal year within negotiated timelines.

## Disposition of completed requests

Approximately 35% of the privacy requests completed in 2024-2025 had records that were either disclosed in part (29% of requests) or all disclosed (6% of requests). No records existed for 20% of the requests. A high percentage (45%) of requests were abandoned as requesters were seeking medical records held by provinces and territories. The breakdown of the remaining files is as follows:

\*Numbers may not add up to 100% due to rounding.

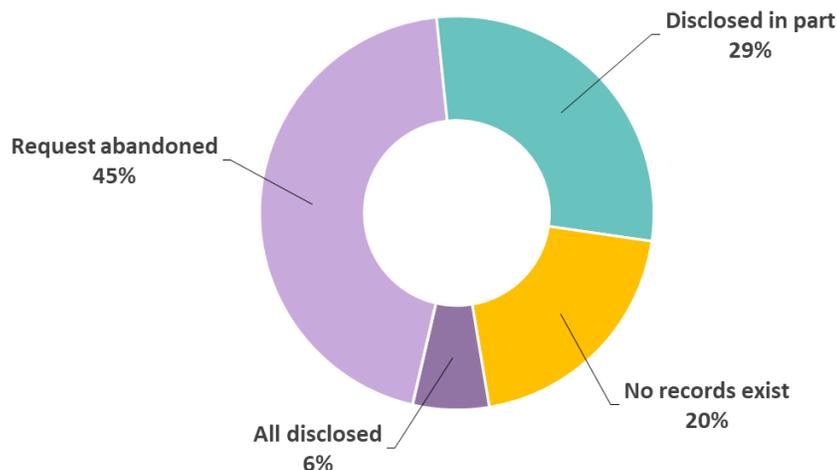


Figure 4: Disposition of completed privacy requests for 2024-2025.

### Exemptions invoked

Of the 94 exemptions applied in response to privacy requests in 2024-2025, 85 (90%) were to protect the personal information of individuals other than the requester, eight (9%) exemptions were related to investigations, and one exemption (1%) was invoked as the disclosure of which could reasonably be expected to threaten the safety of an individual(s).

### Exclusions cited

No exclusions were applied to privacy request releases made in 2024-2025.

### Translations

No translations were required to respond to requests in 2024-2025.

### Format of information released

Of the requests where records were fully or partially disclosed, 100 were released as electronic copies, six in paper format, and one in video format.

### Privacy Management Division workload

During 2024-2025, the Privacy Management Division received a total of 1,342 requests, including 795 for privacy advisory services from Health Canada program clients, and 547 requests for policy analysis and reporting. In the previous fiscal year, the Privacy Management Division received a total of 913 requests. The significant increase in the number of files received can be attributed to the large volume of new privacy work to support the implementation of the Canadian Dental Care Plan (268 requests received). This included the completion of Privacy Impact Assessments and ensuring compliance with the *Privacy Act* and other related policies and directives.

Health Canada is committed to properly handling personal information under its control and ensuring that privacy requirements and risks are considered when new initiatives are developed and deployed.

In 2024-2025, the Privacy Management Division supported this commitment by providing advice to programs on the collection, use, and disclosure of personal information, and by assessing privacy risks for new initiatives, projects, and research activities. As the volume and complexity of files continue to grow—particularly in areas such as artificial intelligence, Open Government publishing, and Cloud services—the Division has conducted increasingly in-depth privacy analyses to address emerging challenges.

## **Costs for administering the *Access to Information Act***

Health Canada spent a total of \$6,441,211 on access to information functions in 2024-2025. Of this total, salaries and overtime costs represent \$5,138,002 and goods and services costs were \$1,303,209. Most of the goods and services costs (\$1,110,643) were used to retain temporary resources to support the processing of outstanding active access requests. Other goods and services costs totalled \$192,566.

## **Costs for Administering the *Privacy Act***

Health Canada spent a total of \$2,857,432 on privacy functions in 2024-2025. Of this total, salaries and overtime costs were \$2,498,636. Temporary resources for privacy services accounted for \$244,647 and other goods and services costs totalled \$114,149.

## **Training and awareness**

An overview of access to information and privacy obligations is included in the New Employee Onboarding E-Module, which is mandatory for all new employees to complete in their first month at Health Canada. This ensures that all new employees are made aware of their legal obligations, and directs them to additional resources and training to further their learning. Additional information about training and awareness can be found below.

### **Access to information training**

The online ATIP Fundamentals course, offered by the Canada School of Public Service, is available to all staff and is recommended as a foundation for all employees. A total of 794 Health Canada employees completed this course in 2024-2025.

Health Canada also offers training specific to the department and its processes. This includes a one-hour course, ATIP for Branch Single Window Contacts, which is offered to all

new Single Windows. The facilitated course, Introduction to ATIP Requests at Health Canada is available to all employees, and was completed by 344 employees in 2024-2025.

Training is promoted at all Single Window working group meetings, at the ATIP Executive Leaders Committee and the Health Canada Executive Committee, through Broadcast News messages, and on Health Canada's intranet site.

## **Access to information awareness**

In 2024-2025, communications were sent to all employees promoting access to information training and emphasizing its importance. Additionally, information was provided to all employees addressing common questions, such as how to conduct record searches and what types of records need to be provided. The goal is to foster a culture of openness and transparency while also promoting the timely provision of high-quality records.

In 2024, Canada celebrated Right to Know Week from September 23rd to 29th. Health Canada kicked off the event with a message from the Assistant Deputy Minister of the Corporate Services Branch, highlighting openness and transparency as essential to good governance and democracy, and raising awareness about the public's right to access information held by the government and other public institutions.

During Right to Know Week, Health Canada promoted the online ATIP courses offered by the Canada School of Public Service and shared resources on how to respond to ATIP requests and manage information.

## **Privacy training**

During 2024-2025, the Privacy Management Division delivered several tailored privacy training and awareness sessions to 270 employees across various groups within Health Canada.

The Privacy Management Division's online privacy training is available to all Health Canada employees. Approximately, 2,747 Health Canada employees completed the training in 2024-2025.

## **Privacy awareness**

Health Canada commemorated Data Privacy Week in 2024-2025 with a learning event, organized by the Privacy Management Division, featuring speakers from the Treasury Board Secretariat of Canada and the Office of the Privacy Commissioner of Canada. The speakers shared important insights on key privacy topics such as privacy considerations when using artificial intelligence, the need for strong safeguards to protect personal information, and the responsibility to report privacy breaches.

To promote privacy responsibilities during Privacy Awareness Week, Health Canada shared several privacy resources with its employees, such as guidance on when to include privacy

notices, how to navigate privacy risk assessments and best practices for protecting personal information in contracts.

Throughout the year, regular communications are sent to all employees on privacy-related matters, with the aim of building a culture of strong privacy awareness within the Department.

## **Policies, guidelines, procedures and initiatives**

### **Betterment Solutions Working Group**

The ATIP Operations Division's Betterment Solutions Working group continued to meet regularly throughout 2024-2025 to foster a culture of innovation by promoting employee-led improvements. At this working group, ATIP Analysts and support staff from a variety of levels identify and prioritize operational issues, in an effort to find and implement solutions. The working group also provides horizontal input in response to policy consultations from Treasury Board Secretariat.

### **ATIP Operations Division's Professional Development Program**

The ATIP Operations Division's Professional Development Program was launched in January 2017. This program allows employees to progress based on performance, without the need of a competitive hiring process. In 2024-2025, 45 analysts were enrolled in the program and 13 advanced in level. The Professional Development Program helps increase ATIP capacity within the Government of Canada.

### **Indigenous Reconciliation**

In February 2024, the Treasury Board Secretariat issued an Implementation Notice waiving the \$5 application fee in support of Indigenous Reconciliation. Health Canada updated its process and waived the fee for three requests.

### **Operation Glasswing**

Health Canada has advanced stage 1 of a project to explore user-centred designs to provide stakeholders access to adverse drug reaction information through the Canada Vigilance Program that would reduce reliance on access to information requests to obtain this information. Throughout stage 1 consultations were conducted with regulated parties and industry stakeholders to explore potential solutions.

### **Request processing software solution project**

In 2024-2025, Health Canada began the process of acquiring a new access to information and privacy request processing software solution. The new software solution will provide an integrated platform to manage the full life cycle of an access to information or personal

information request and will streamline activities, resulting in a more efficient and effective process. Full implementation is expected in 2025-2026.

## **New case management system**

In 2024-2025, the Privacy Management Division advanced the development of a new case management system to manage privacy requests to enhance operational efficiency, as well as to improve data integrity and service delivery. The new system is scheduled to deploy in 2025-2026, and is designed to streamline workflows, improve the user experience, and support better decision-making through automated analytics and reporting capabilities.

## **New privacy breach management and reporting process**

In 2024-2025, the Privacy Management Division implemented a new, streamlined privacy breach management and reporting process. This updated process improves briefing to senior management by providing each branch head with access to an automated, real-time, breach dashboard for Health Canada. These reports enable senior leaders to identify and monitor privacy breach trends within their respective branches, which improves informed oversight and decision-making.

## **Transparency requirements for sharing personal information with third parties**

In October 2022, the Treasury Board of Canada Secretariat announced new transparency requirements for federal institutions when sharing personal information with third parties through written agreements. To meet these requirements, Health Canada must identify all parties involved in these agreements in InfoSource and publish summaries of the agreements on its Canada.ca Access to Information and Privacy webpage.

The Privacy Management Division is leading a project to meet this new requirement. Health Canada published summaries of the relevant agreements in June 2025.

## **Standard on Privacy Impact Assessment**

In October 2024, the Treasury Board of Canada Secretariat introduced new requirements affecting Privacy Impact Assessments, Privacy Protocols, and Personal Information Banks. Any program that requires a Personal Information Bank, but does not currently have one registered, must complete a Privacy Impact Assessment or Privacy Protocol and register a Personal Information Bank by October 10, 2025. In 2024-25 the Privacy Management Division led an initiative to identify any programs that require a Personal Information Bank and, in 2025-2026, the Division will work with program officials to complete a Privacy Impact Assessment or Privacy Protocol where required to bring Health Canada into compliance.

To support these changes, the Privacy Management Division is also developing new resources, processes and awareness campaigns to ensure employees understand their responsibilities related to privacy assessments.

## **Canadian Dental Care Plan Privacy Task Force**

In response to the Privacy Management Division's increasing workload associated with the rapid implementation and sensitivity of the Canadian Dental Care Plan, the Division established a dedicated team to support the effective management and oversight of privacy activities for the program. Known as the Canadian Dental Care Plan Privacy Task Force, the team provides specialized privacy services to ensure the Canadian Dental Care Plan's compliance with all privacy requirements.

## **Concept for artificial intelligence supported Privacy Impact Assessments**

In 2024-2025, the Privacy Management Division explored how artificial intelligence could be used to improve the efficiency, consistency, and quality of Privacy Impact Assessments. The goal was to reduce manual effort, support early identification of privacy risks, and enhance the timeliness of privacy compliance activities. In 2025-2026, the Privacy Management Division will continue advancing this initiative to manage the growing volume and complexity of Privacy Impact Assessment while maintaining compliance and accountability.

## **Summary of key issues and actions taken on complaints**

### **Complaints management**

Individuals and organizations who believe federal institutions have not respected their rights under the ATIA may ask the Office of the Information Commissioner to investigate within 60 days of receiving a response from a federal institution or if they have not received a response within the legislated timeline.

Individuals and organizations who think their personal information has been mishandled have the right to file a complaint to the Privacy Commissioner of Canada.

### **Complaints to the Information Commissioner of Canada**

In 2024-2025, 142 complaints under the ATIA were filed with the Office of the Information Commissioner for Health Canada's requests, representing a 67% increase from the 2023-2024 fiscal year. In total, 99 were discontinued. A small number of requesters submitted multiple requests and subsequent complaints, making up a large percentage of the total complaints received this year.

Health Canada received 44 final investigation reports from the Office of the Information Commissioner. Of these, 30 contained orders issued by the Information Commissioner.

Areas of complaint include deemed refusals due to late responses, time extensions taken, and the application of exemptions, particularly those related to personal information and third-party information.

Health Canada cooperates with the Office of the Information Commissioner during investigations by providing details on the way a file was or is being processed, providing evidence of the search that was undertaken, explaining key considerations in applying exemptions, conducting new searches, providing rationales, disclosing additional records etc. Health Canada reviews the outcomes of the Office of the Information Commissioner investigations, follows up on recommendations or orders, and where appropriate, incorporates lessons learned into business processes.

### Outstanding number of access to information complaints

There are 62 open complaints with the Information Commissioner of Canada. The following table lists the number of open complaints with the Information Commissioner of Canada by year.

#### Number of open complaints with the Information Commissioner of Canada that are outstanding from previous reporting periods

Fiscal year active complaints were received by Health Canada	Number of active complaints
Received in 2024-2025	52
Received in 2023-2024	6
Received in 2022-2023	3
Received in 2021-2022	1
<b>Total</b>	<b>62</b>

Health Canada communicates and collaborates with the Information Commissioner of Canada to ensure the effective handling and resolution of complaints.

### Complaints to the Privacy Commissioner of Canada

In 2024-2025, Health Canada received six complaints under the *Privacy Act* related to the handling of personal information. Three of these six complaints were related to the unauthorized disclosures of personal information and were resolved using the Office of the Privacy Commissioner of Canada's early resolution process. Three of the complaints were related to the processing of personal information requests and have been resolved.

Three representations were provided under Section 33 of the *Privacy Act*. Zero letters of findings were received under Section 35 from the Office of the Privacy Commissioner relating to complaints received in the previous year.

Health Canada cooperate with the Office of the Privacy Commissioner during investigations by providing details on the way a file was or is being processed, providing rationales, etc. Health Canada reviews the outcomes of the investigations, and where appropriate, incorporates lessons learned into business processes.

## Outstanding number of privacy complaints

The following table lists the number of open complaints with the Privacy Commissioner of Canada by year.

### Number of open complaints with the Privacy Commissioner of Canada that are outstanding from previous reporting periods

Fiscal year open complaints were received by Health Canada	Number of open complaints
Received in 2023-2024	1
Received in 2022-2023	0
Received in 2021-2022	0
Received in 2020-2021	2
<b>Total</b>	<b>3</b>

Health Canada communicates and collaborates with the Office of the Privacy Commissioner to ensure the effective handling and resolution of complaints.

## Federal court cases

### Applications & appeals submitted to the Federal Court

#### *Access to Information Act*

In 2024–2025, two new applications were made and a total of four court cases were active during the year. These cases are summarized in [Appendix B](#).

#### *Privacy Act*

One application was made to the Federal Court during the 2024–2025 fiscal year. This case is summarized in [Appendix B](#).

## Monitoring compliance

ATIP Operations Division generates weekly, monthly and semi-annual reports for senior management in order to monitor performance within Health Canada. These reports outline the incoming volume of requests, the number of closed requests, and the timeliness of the retrieval of records. The data is broken down by request type for each branch. Each branch has an ATIP Single Window contact who tracks request tasking internally to ensure regular follow-ups on outstanding taskings. Additionally, the ATIP Operations Division encourages branches to identify common request types and explore alternative methods for disclosing such information.

The Privacy Management Division produces monthly reports to senior management on privacy breaches. The Privacy Management Division supports compliance by periodically reviewing its privacy policies, procedures and practices.

The Privacy Management Division assists programs with ensuring that all information sharing agreements, information sharing arrangements, and contracts involving personal information include the appropriate privacy protections and respect the requirements of the Directive on Privacy Practices, including embedding the right of access. This includes reviewing draft agreements, providing departmental guidance, and making available to the public summaries of agreements involving personal information disclosures by Health Canada.

Health Canada has embedded standard requirements to support the right of access to information in contracts, information sharing agreements and information sharing arrangements.

## Other reporting requirements specific to the *Privacy Act*

### Material privacy breaches

During 2024-2025, Health Canada reported zero material privacy breach to the Office of the Privacy Commissioner and the Treasury Board Secretariat.

In Health Canada's 2023-2024 annual report on the *Access to Information Act* and *Privacy Act*, it was reported that one material privacy breach occurred, when there were two.

### Privacy Impact Assessments

During 2024-2025, four Privacy Impact Assessments were completed in accordance with the Treasury Board Directive on Privacy Practices. Information on Health Canada's Privacy Impact Assessments are found on the Department's [website](#).

### **Canadian Dental Care Program Phase 3**

This Privacy Impact Assessment assessed the activities related to Stage 3 of the Canadian Dental Care Program including: member enrolment, provider participation, claims processing, and the contact centre operations. The Privacy Impact Assessment identified mitigation actions in several areas, including the following: updating the program's Personal Information Bank, establishing retention and disposal schedules and disclosure procedures and assessing safeguards of systems. The summary of this Privacy Impact Assessment is awaiting publication.

### **Canadian Dental Care Program Claims Verification Program**

The Canadian Dental Care Program Claims Verification Program aims to reduce the risk of financial loss which could result from Canadian Dental Care Program providers engaging in inappropriate claiming activities or otherwise submitting Canadian Dental Care Program claims that do not comply with Canadian Dental Care Program Claims Processing and Payment Terms (Billing Agreement). This program plays a critical role in ensuring accountability and the proper use of public funds. The Privacy Impact Assessment identified mitigation actions in several areas, including the following: updating the program's Personal Information Bank, updating procedures and policies to include privacy considerations, and assessing safeguards of systems. The summary of this Privacy Impact Assessment is awaiting publication.

### **Equitable Access to Language Training Program**

Health Canada offers the Equitable Access to Language Training Program to indeterminate employees who have self-identified as members of employment equity groups, including persons with disabilities, Indigenous peoples, and visible minorities. The program provides language training opportunities to support career development and advancement. The Privacy Impact Assessment identified key mitigation measures, including updating the program's consent form and retention and disposal schedules for personal information. A summary of the Equitable Access to Language Training Program Privacy Impact Assessment can be found [here](#).

### **Workplace Presence Management Tool**

In response to the Direction on Prescribed Presence in the Workplace, Health Canada implemented the Workplace Presence Management Tool to support compliance. Managers used the tool to record employees' daily work locations. The tool operated as a stand-alone system that aggregated data at the branch level to provide senior management with comprehensive reporting on workplace attendance. The Privacy Impact Assessment identified key mitigation measures, including updating the tool's privacy notice, seeking an Interim Authority to Operate, and confirming appropriate retention and disposal schedules for personal information. A summary of the Workplace Presence Management Tool Privacy Impact Assessment can be found [here](#).

In Health Canada's 2023-2024 annual report on the *Access to Information Act* and *Privacy Act*, four new Privacy Impact Assessments were reported, when there were actually five new Privacy Impact Assessments and one modified assessment completed.

## **Public interest disclosures**

During 2024-2025, there were no disclosures made under section 8(2)(m) of the *Privacy Act* and no section 8(5) written notifications were provided to the Office of the Privacy Commissioner of Canada.

## **Appendix A: Access to *Information Act* and *Privacy Act* – Delegation Order**

I, the Minister of Health, pursuant to section 95 of the *Access to Information Act* and section 73 of the *Privacy Act*, hereby delegate the persons holding the positions set out in the Delegation of Authority Schedule attached hereto, or the persons occupying on an acting basis those positions, to exercise the powers, duties and functions of the Minister as head of Health Canada, under the provisions of the Act and related regulations set out in the schedule opposite each position. This delegation supersedes all previous delegation orders.

Original signed by:

The Honourable Jean-Yves Duclos

Minister of Health

Date: May 24, 2023

# Delegation of Authority Schedule

## Access to Information Act

### Part 1 and 3

Provision	Description	DM	Assoc. DM	ADM CSB	DG PPMS D	Executive Dir, ATIP Ops Dir, ATIP Ops	
	All powers, duties and functions under the <i>Access to Information Act</i> , R.S.C. 1985, c. A-1 (prior to and following June 21, 2019) and related regulations (prior to and following June 21, 2019)	Full authority					

Provision	Description	Dir, PMD	Deputy Dir / Manager, ATIP Ops	Team Leader/ Senior Advisor	Senior Analyst	Analyst
4(2.1)	Responsibility of government institutions	No	Yes	Yes	Yes	Yes
6.1(1)	Reasons for declining to act on request	No	Yes	No	No	No
6.1(1.3), (1.4), (2)	Notice – suspension, end of suspension	No	Yes	Yes	Yes	No
7	Notice when access requested	No	Yes	Yes	Yes	Yes
8(1)	Transfer of request	No	Yes	Yes	No	No
9(1)	Extension of time limits	No	Yes	Yes	No	No
9(2)	Notice of extension to Information Commissioner	No	Yes	Yes	Yes	Yes
10	Where access is refused	No	Yes	Yes	No	No
11(2)	Application Fee Waiver	No	Yes	Yes	No	No
12(2)(b)	Language of access	No	Yes	Yes	No	No
12(3)(b)	Access to record in alternative format	No	Yes	Yes	No	No
<b>Exemption Provisions of the Access to Information Act</b>						
13	Information obtained in confidence	No	Yes	No	No	No
14	Federal-provincial affairs	No	Yes	No	No	No
15	International affairs and defence	No	Yes	No	No	No
16	Law enforcement and investigations	No	Yes	Yes	No	No
16.5	<i>Public Servants Disclosure Protection Act</i>	No	Yes	No	No	No
17	Safety of individuals	No	Yes	No	No	No
18	Economic interests of Canada	No	Yes	No	No	No
18.1	Economic interest of certain government institutions	No	Yes	No	No	No
19	Personal information	No	Yes	Yes	No	No
20	Third-party information	No	Yes	Yes	No	No
21	Advice, etc.	No	Yes	No	No	No
22	Testing procedures, tests and audits	No	Yes	No	No	No
22.1	Internal Audits	No	Yes	No	No	No
23	Protected information – solicitors, advocates and notaries	No	Yes	Yes	No	No
23.1	Protected information – patents and trade-marks	No	Yes	Yes	No	No
24	Statutory prohibitions against disclosure	No	Yes	Yes	No	No
<b>Other Provisions of the Access to Information Act</b>						
25	Severability	No	Yes	Yes	No	No
26	Refusal of access if information to be published	No	Yes	No	No	No
27(1), (4)	Notice to third parties	No	Yes	Yes	Yes	No
28(1)(b),	Representations of third-party and decision	No	Yes	Yes	No	No

Provision	Description	Dir, PMD	Deputy Dir / Manager, ATIP Ops	Team Leader/ Senior Advisor	Senior Analyst	Analyst
33	Notice to Information Commissioner of notices to third parties	No	Yes	Yes	Yes	No
35(2)(b)	Right to make representations	No	No	No	No	No
37(1)(c)	Notice of actions to implement recommendations of	No	No	No	No	No
37(4)	Access to be given to complainant	No	Yes	No	No	No
41(2)	Review by Federal Court – government institution	No	No	No	No	No
43(2)	Service or notice of application to Federal Court for review	No	Yes	Yes	No	No
44(2)	Notice to person who requested record	No	Yes	Yes	No	No
52(2)(b), 52(3)	Special rules for hearings	No	No	No	No	No
94	Annual report – government institutions	No	No	No	No	No
96(3)	Notice of Provision of services related to access to information	No	No	No	No	No
96(5)	Spending authority	No	No	No	No	No
<b>Access to Information Regulations</b>						
6(1)	Transfer of request	No	Yes	No	No	No
8	Method of access	No	Yes	No	No	No
8.1	Limitations in respect of format	No	Yes	No	No	No

### *Privacy Act*

Description	DM	Assoc. DM	ADM CSB	DG PPMSD
All powers, duties and functions under the Act and Regulations	Full authority			

Description	Executive Dir, ATIP Ops Dir, ATIP Ops	Dir, PMD
All powers, duties and functions under the Act and Regulations, with noted exceptions	Full authority except Sections 8(2)(j), 8(2)(m), 8(5), 9(1), 9(4), 10	Full authority except Sections 14-28 inclusively

Provision	Description	Deputy Dir / Manager ATIP Ops	Team Leader / Senior Advisor	Senior Analyst	Analyst
8(2)(j)	Disclosure for research or statistical purposes	No	No	No	No
8(2)(m)	Disclosure in the public interest or in the interest of the	No	No	No	No
8(4)	Copies of requests under paragraph 8(2)(e)	No	No	No	No
8(5)	Notice of disclosure under paragraph 8(2)(m)	No	No	No	No
9(1)	Record of disclosures to be retained	No	No	No	No

Provision	Description	Deputy Dir / Manager ATIP Ops	Team Leader / Senior Advisor	Senior Analyst	Analyst
9(4)	Consistent uses	No	No	No	No
10	Personal information to be included in personal information	No	No	No	No
14(a)	Notice where access requested	Yes	Yes	Yes	No
14(b)	Giving access to the record	Yes	Yes	No	No
15	Extension of time limits	Yes	Yes	Yes	No
16	Where access is refused	Yes	Yes	No	No
17(2)(b)	Language of access	Yes	Yes	No	No
17(3)(b)	Access in an alternative format	Yes	Yes	No	No
18(2)	Exempt banks	Yes	No	No	No
19	Information obtained in confidence	Yes	No	No	No
20	Federal-provincial affairs	Yes	No	No	No
21	International affairs and defence	Yes	No	No	No
22	Law enforcement and investigations	Yes	No	No	No
22.3	<i>Public Servants Disclosure Protection Act</i>	Yes	No	No	No
23	Security clearances	Yes	No	No	No
24	Individuals sentenced for an offence	Yes	No	No	No
25	Safety of individuals	Yes	No	No	No
26	Information about another individual	Yes	Yes	No	No
27	Protected information – solicitors, advocates and notaries	Yes	Yes	No	No
27.1	Protected information – patents and trade-marks	Yes	Yes	No	No
28	Medical records	Yes	No	No	No
33(2)	Right to make representations	No	No	No	No
35(1)(b)	Notice of actions to implement recommendations of	Yes	No	No	No
35(4)	Access to be given to complainant	Yes	No	No	No
36(3)(b)	Notice of actions to implement recommendations of	Yes	No	No	No
51(2)(b),(3)	Special rules for hearings	No	No	No	No
72	Annual report to Parliament	No	No	No	No
73.1(3)	Notice of Provision of services related to privacy	No	No	No	No
73.1(5)	Spending authority	No	No	No	No
<b>Privacy Regulations</b>					
7	Retention of personal information requested under paragraph	No	No	No	No
9	Examination of information	Yes	Yes	Yes	Yes
11(2),11(4)	Notification concerning corrections	Yes	Yes	Yes	Yes
13(1)	Disclosure of personal information relating to physical or mental	Yes	Yes	No	No
14	Examination in presence of medical practitioner or psychologist	Yes	Yes	No	No

**Legend**

Yes	Delegated
No	No Delegation

# Appendix B: Federal Court Case summary

## Avir Pharma v. Canada (Discontinued)

In September 2024 Avir Pharma filed an application to the Federal Court for review of the federal Minister of Health's decision to release certain records relating to an adverse reaction report in response to a request under the *Access to Information Act*.

Avir discontinued the application in October 2024.

## Elanco Canada Limited v. Canada (Minister of Health) (Decided)

Elanco sought review of a decision by the Minister of Health, to disclose information related to Fortekor Flavour Tabs, that Elanco considered to be confidential. On November 19, 2019, the Federal Court found the Minister of Health's decision to disclose the records was invalid and costs were awarded against Canada. Canada appealed the decision, and the Federal Court of Appeal has set aside the original judgement, which it found was worded too broadly, contrary to section 25 of the *Access to Information Act*.

The matter was remitted back to the Federal Court for review. On July 31, 2024, the judge's decision was released, which included a partially redacted version of the records for release. This case is now closed.

## Gina Brown v. Health Canada

On February 7, 2024, Ms. Brown filed a Statement of Claim with the Federal Court, alleging that Health Canada was negligent with the handling and processing of her request made under the *Privacy Act*. Prior to the claim, the Privacy Commissioner of Canada investigated a complaint that the file was not closed on time and determined the matter to be well-founded but conditionally resolved, as Health Canada agreed to complete processing of the records by a satisfactory date.

The case is ongoing.

## Jordan Ash v. Canada (Minister of Health)

On April 23, 2024, Mr. Ash filed an application to the Federal Court for review of Health Canada's response to an ATI request to obtain information on all death reports associated with COVID-19 vaccines.

Prior to the application, the Information Commissioner of Canada investigated a complaint and found that Health Canada had conducted a reasonable search in response to the request. The Final Report advised the requester to submit a request to the Public Health Agency of Canada for additional reports that may be held by that institution.

The applicant is seeking court direction for Health Canada to obtain copies of all death reports held by the Public Health Agency of Canada and provide them in response to the

original ATI request, as well as a finding that a ‘reasonable search’ for records should include records held by other institutions. The case is ongoing.

## **Provital Health v. Canada (Minister of Health), Preventous Collaborative Health v. Canada (Minister of Health), Copeman Healthcare v. Canada (Minister of Health)**

In January 2019, three private medical clinics (the Applicants) filed individual applications to the Federal Court for review of the federal Minister of Health’s decision to release part of their audit reports to a requester under the *Access to Information Act*. Health Canada obtained the audit reports from Alberta Health, which did not request that the audit reports be kept confidential. The audit reports relate to the annual enrollment and membership fees charged by the Applicants.

Following an appeal, the Federal Court granted the Applicants’ request for certain documents held by Health Canada under Rule 317 of the Federal Court Rules. In April 2021, Canada appealed this decision and on September 6, 2022 the Federal Court of Appeal decided that the applicants could not receive the requested documents from Health Canada as they were not relevant to the issues raised on the s.44 application. Further procedural motions filed by the applicants to obtain the records have been denied by the courts.

The hearing of the section 44 applications related to the Minister of Health’s decision to release part of their audit reports to the requester took place on May 7, 2024. On July 31, 2024, the Federal Court issued its judgment dismissing the Section 44 Applications and ordering the Audit Reports at issue be disclosed in full, except for the personal information pursuant s. 19(1) ATIA.

On September 9, 2024, the Applicants served the Notice of Appeal of the decision dated July 31, 2024. The appeal is ongoing.