Horizontal Audit of Information Management at Health Canada and Public Health Agency of Canada

Final Report – April 2025

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List of acronyms

ADM	Assistant Deputy Minister
DTB	Digital Transformation Branch
HC	Health Canada
IBV	information of business value
IM	information management
IT	information technology
PHAC	Public Health Agency of Canada
SACR	SharePoint as Corporate Repository
TBS	Treasury Board Secretariat

Executive summary

Engagement objective

The objective of this audit was to determine whether Health Canada (“HC” or “the Department”) and Public Health Agency of Canada (”PHAC” or “the Agency”) have implemented an effective information management control framework that includes, but is not limited to accountability, roles, responsibilities, policy framework, monitoring, and reporting to mitigate information management (IM) risks.

Engagement scope

This audit included assessments of IM frameworks, including its governance structures, controls and tools, and IM resources within HC and PHAC. The audit covered fiscal years 2022-2023 and 2023-2024.

The scope did not include the following:

- The assessment of ATIP requests and litigation readiness, as these processes are complex in nature and are being considered for inclusion as part of the Risk-Based Audit Plan.

- The assessment of technologies to efficiently and effectively store and protect information, as this aspect was deemed a lower risk and is being considered for potential future audit coverage as part of the Risk-Based Audit Plan.

What we found

The audit found that Health Canada and the Public Health Agency of Canada generally adhere to the TBS requirements and policies on information management. The roles and responsibilities of employees are clearly defined, and the Digital Transformation Branch (DTB) is making efforts to improve its information architecture. However, the audit found that the following areas could be improved:

- With the exception of performance metrics on the implementation of SharePoint as a Corporate Repository (SACR), there was no formal monitoring or reporting of compliance with IM policy requirements across the Department and Agency.

- The 2023 to 2025 IM Plan is still in draft format, and DTB needs to either update the plan, or develop another way to reflect current IM plans and activities for the Department and Agency. DTB should also add specific mechanisms to measure progress of deliverables.

- There are currently two mandatory IM training courses available: Fundamentals of Information Management and Introduction to SACR. The Fundamentals of Information Management course is only completed upon initial hiring at the Department or Agency. While there are additional IM courses available, they are only recommended, and none of them are mandatory for IM advisors or employees.

Introduction

Information is central to Health Canada (HC) and the Public Health Agency of Canada (PHAC) as the Department and Agency generate, gather, analyze, and share vast amounts of data every day. Proper information management promotes better decision making, enhances service delivery, and fosters greater transparency and accountability. To manage information properly, the Department and Agency also adhere to policies and guidelines to facilitate best practices. Each HC and PHAC employee is responsible for the organization's information and records, which means everyone must ensure that the information is accurate, reliable, and properly protected.

Within HC and PHAC, the Digital Transformation Branch (DTB) provides essential IM and IT services to branches, as well as supporting the digital modernization and transformation of health programs and services for Canadians. DTB also issues policy and directives for IM within the Department and Agency to supplement the Treasury Board Secretariat's (TBS) policies, guidelines, and directives for IM. DTB is also working on implementing their deliverables of their IM Strategy, which include the full implementation of SharePoint as a Corporate Repository (SACR). Some other key elements of DTB's IM Strategy include the implementation of sensitivity labelling, the implementation of storage capping on personal OneDrive accounts, and setting legacy repositories to 'read-only.'

The objective of this audit was to determine whether the Department and Agency had implemented an effective information management control framework that includes, but is not limited to, accountability, roles, responsibilities, policy framework, monitoring, and reporting to mitigate information management (IM) risks.

In addition, the audit served to determine whether both the Department and Agency have operational and technical controls in place throughout their respective organization, including recordkeeping, tools, and monitoring of IM requirements, including, but not limited to, awareness, accountability, information quality, and training activities to mitigate IM-related risks.

The audit covered the fiscal years 2022-2023 and 2023-2024 and included assessments of the IM governance structures that relate to controls, tools, and IM resources at HC and PHAC.

Criterion 1 – Governance and oversight

Context

DTB issues policy and direction for IM within the Department and the Agency and provides the tools for information management. However, information of business value is generated and managed within each branch. As part of the SACR implementation project, DTB is establishing a corporate repository for the entire Department and Agency to use, but multiple corporate repositories, including GCdocs and shared drives currently exist and are in use.The goal of the SACR implementation project is for employees to only use SACR, rather than other repositories, as a means to contribute to the quality of IM processes, like retention and disposition, in the future.

What we expected to find

We expected to find an established governance structure that effectively supports and oversees the IM program and its requirements at the Department and Agency. We also expected to find that roles, responsibilities, and accountabilities related to IM were understood by all Department and Agency employees.

Why it matters

Well-defined roles, responsibilities and accountabilities are key for ensuring smooth operations, effective data management, legal compliance, and overall organizational success. When clearly outlined, aspects like effective collaboration among team members is present, compliance is maintained, performance measurement is easier to conduct, standardization is a simplified process which fosters consistency, and risks can be identified and mitigated effectively.

In turn, those established roles, responsibilities, and accountabilities add to proper governance structures that support management oversight. Effective oversight helps maintain a balance between control and flexibility, fostering an environment where information management contributes to overall success.

Key findings

Governance

The Partnership Information Management Working Group (PIMWG) and Director General Information Management Committee (DGIMC) have been created to discuss IM related issues. They were created to promote collaboration and information sharing across the Department and Agency. We found that both committees have their own mandates and approved terms of reference and maintained records of decisions. The PIMWG has a mandate rooted in IM initiatives and the IM guidelines provided by TBS, as demonstrated by the committee's Records of Decision. The DGIMC mandate focuses on digital transformation, in addition to IM initiatives.

Roles and responsibilities

We reviewed the current IM policies, directives, and guidelines that are applicable and available to all employees in the Department and Agency, as well as all accessible IM-related training taken, and courses and training completed by employees. Interviews were also conducted to determine whether employees and key senior managers understood their roles and responsibilities surrounding IM and if those roles and responsibilities were monitored.

Due to DTB’s role as a shared service provider, there was overlap across HC and PHAC in terms of roles, responsibilities, accountabilities, compliance, and management and protection of information. Key policies and guidelines are listed on MySource. However, during the period under examination, there were no accessible listings of job descriptions of key IM positions, nor any evidence that those positions are current, approved or signed off on either.

DTB provides IM support to branches via a hybrid model. Some IM advisors report to DTB, while others report to the branches they are supporting. Reporting lines for IM were clearly defined within DTB, but this was not the case outside of DTB. For example, we found that there was limited visibility of how DTB ensures consistency in IM advice across advisors that do not report administratively to them.

Training and monitoring

DTB provides tools and training for IM, with training being currently focused on SACR onboarding and implementation. With the various corporate repositories currently in existence, there is no formal monitoring process allowing DTB to ensure that HC and PHAC employees are demonstrating an understanding of their roles and responsibilities.

Recommendations

Recommendation #1 (Medium priority)

The ADM of the Digital Transformation Branch should ensure that an Information Management plan or strategy is formalized, updated, and published so that information of business value is properly stored and accessible to adhere to TBS requirements.

Criterion 2 – Compliance and monitoring

Context

The IM policies, directives, and guidelines in place for the Department and Agency underscore the importance and necessity of compliance for information management practices such as safeguarding, retention, disposition, and integrity. The *Policy on Service and Digital* highlights consequences of non-compliance for individuals and institutions through the *Framework for the Management of Compliance*. Departments and agencies are expected to address IM weaknesses and improve them via an instituted process of monitoring and compliance, using proper IM practices and tools.

What we expected to find

We expected to find that there are monitoring mechanisms in place to effectively detect, remediate, and report on instances of non-compliance, and that IM practices at HC and PHAC are aligned with policy and legislative compliance requirements.

Why it matters

Aligning information management practices with policy and legislative compliance requirements is essential for ensuring that an organization can effectively manage and protect its information, as well as promoting efficiency, accountability, and transparency. Proactive monitoring and prompt reporting of policy non-compliance allow the Department and Agency to address issues before they escalate, ensuring a secure, efficient, and legally compliant information management environment.

Key findings

IM practices and monitoring

We found that, at the time of the audit, the 2023 to 2025 IM Plan was still in draft form and needed to be updated to reflect the Department and Agency's current IM plans and activities. We also found that the draft plan does not include proposed mechanisms or measurements of IM deliverables.

We found that SACR onboarding and implementation has been ongoing across all branches at the Department and Agency, with its progress being monitored and reported on regularly at the DG IM Committee meetings.

DTB created a draft IM Risk Profile for 2024. We noted that while the draft profile lists five IM risk areas and a list of risk factors and consequences, it does not describe those risks, nor their consequences in detail, and does not include any indication of risk mitigation activities. The draft IM Risk Profile is not linked to any of the activities of the draft IM Plan, which does not allow for tracking of mitigation activities or changes in risk factors and consequences.

The responsibility for the classification, storage, and disposal of information of business value (IBV) rests with the end user, meaning the employee. We found that there is a lack of formal monitoring mechanisms, for ensuring the proper classification, storage, and disposal of IBV, regardless of if monitoring is conducted by DTB or any other branches within the Department and Agency. Currently, monitoring is ad hoc and manual. We noted that the current hybrid model, with some branches operating independently creates challenges in standardization for both the Department and Agency, all which affects management.

Recommendations

Recommendation #2 (High priority)

The ADM of the Digital Transformation Branch (DTB) should ensure that an IM Plan and an IM Strategy include mechanisms to measure IM deliverables. Additionally, a formal monitoring process should be implemented to ensure that classification, categorization, storage, and disposal of IBV is done effectively and correctly.

Criterion 3 – IM process and controls

Context

The Department and Agency follow a hybrid model, using physical and digital means to manage retention and disposal of information. Digital tools, such as cloud storage, and automated systems have been implemented in order to streamline IM processes, enhance efficiency, and create a controlled environment for the information that is stored. IM processes and controls are intended to ensure that information is stored securely, are accessible when needed, and compliant with relevant policies, directives, and guidelines.

What we expected to find

We expected to find that the organization has effective controls and processes in place related to information management that are also in compliance with the policies, guidelines and directives on recordkeeping, classification, retention, disposition, and safeguarding of information.

Why it matters

Properly designed and implemented IM controls and processes ensure that all employees know how to manage their information accurately and correctly through the recordkeeping methodology set by DTB and TBS. These controls and processes also help to mitigate risks associated with IM and establishes compliance with IM policies, directives, and guidelines.

Key findings

We found that the policies, guidelines and directives on recordkeeping, classification, retention, disposition, and safeguarding are regularly updated by DTB and are readily available on the Intranet for HC and PHAC employees. There are also training courses available on those IM topics. Furthermore, a document classification architecture is used across branches for other repositories like GCdocs and regulatory databases. DTB is also making efforts to improve and facilitate recordkeeping tools by maintaining the Information Architecture (IA) Master List, by having a solid IM community support system and by adding new features into the corporate repository for employees to use.

However, we found that employees within HC and PHAC use OneDrive and other personal drives, and email, for storing information of business value (IBV), and as a result, the Department and Agency are experiencing challenges in relation to the disposition

schedules, the adherence to which is a key element of proper information management. In addition, many of the IM training courses available are not mandatory, even for IM Advisors. The current IM training is more focused on SACR, as branches are onboarded to that system.

Recommendations

Recommendation #3 (Medium priority)

The ADM of the Digital Transformation Branch should ensure that IM training courses are made mandatory for all employees in IM Advisor roles and tracked for all other employees at the Department and Agency.

Conclusion

The audit found that Health Canada and the Public Health Agency of Canada generally adhere to the TBS requirements and policies on Information management. The roles and responsibilities of employees are clearly defined, and the Digital Transformation Branch (DTB) is making efforts to improve their information architecture. However, the audit found that the following areas could be improved:

- With the exception of performance metrics on the implementation of SharePoint as a Corporate Repository (SACR), there was no formal monitoring or reporting of compliance to with IM policy requirements across the Department and Agency.

- The 2023 to 2025 IM Plan is still in draft format, and DTB needs to either update the plan, or develop another way to reflect current IM plans and activities for the Department and Agency. DTB should also add specific mechanisms to measure progress of deliverables.

IM Fundamentals course is only completed upon initial hiring at the Department or Agency. There are other training courses available for employees to better understand roles and responsibilities (IM for Employees, IM for Managers, IM for IM Specialists), however these training courses are not mandatory, even for IM advisors.

Management Response and Action Plan

Recommendations	Management Response and Planned Management Action	Deliverables	Expected Completion Date	Responsibility
Recommendation 1 The ADM of the Digital Transformation Branch should ensure that an **Information Management plan or strategy is formalized, updated, and published** so that information of business value is properly stored and accessible to adhere to TBS requirements.	Management agrees with this recommendation.			
	▪ Publish **IM Strategy** – 2025-2030	▪ **IM Strategy published on mySource.**	**Q1 (2025-26)**	DTB
Recommendation 2 a) The ADM of the Digital Transformation Branch should ensure that an IM Plan and an IM Strategy include **mechanisms to measure IM deliverables**. b) Additionally, a formal **monitoring** process should be implemented **to ensure** that classification, categorization, storage, and disposal of **IBV is done effectively** and correctly.	Management agrees with this recommendation.			
	a) Create an **'IM Prioritization Map'** as mechanism to measure and align IM Program components and deliverables against the 5-year timeline of the IM Strategy. b) Develop a **monitoring SOP** for key IM requirements, in line with IM standards, policies, and behaviours for responsible management of IBV at HC and PHAC.	**a) Append IM Prioritization Map to the published IM Strategy as mechanism to track priorities and related deliverable for the** IM Program. **b) Reporting requirements inform IM KPIs** which align to enterprise standardization rules and demonstrate effective management of IBV at HC and PHAC.	**a) Q1 (2025-26)** b) **Q2 (2025-26) Define** Reporting Requirements. **Q4 (2025-26)** Operationalize Reporting Requirements.	DTB
Recommendation 3 The ADM of the Digital Transformation Branch should ensure that **IM training courses** are made **mandatory for all employees in IM Advisor roles** and **tracked for all other employees** at the Department and Agency.	Management agrees with this recommendation.			
	▪ Add the **IM Specialist course** to list of **mandatory** training requirements for the IM Program at HC and PHAC.	▪ Statistics are tracked and used to report on status of **mandatory IM Training requirements** at HC and PHAC.	**Q3 (2025-26)**	DTB

Appendix A

Audit objective

The objective of this audit was to determine whether Health Canada (“HC” or “the Department”) and Public Health Agency of Canada (”PHAC” or “the Agency”) have implemented an effective information management control framework which includes but is not limited to accountability, roles, responsibilities, policy framework, monitoring and reporting to mitigate Information management (IM) risks.

Audit scope

This audit included assessments of IM frameworks, including its governance structures, controls and tools, and IM resources within HC and PHAC. The audit covered fiscal years 2022-23 and 2023-24.

Audit approach

The audit was conducted in accordance with the Government of Canada's *Policy on Internal Audit*, which requires examining sufficient and relevant evidence, and obtaining sufficient information and explanations to provide a reasonable level of assurance in support of the audit conclusion.

The audit included, but was not limited to:

- Document review and analysis.
- Interviews and walkthroughs with HC and PHAC stakeholders, IM team members and employees.
- Review processes, procedures, and tasks related to IM decision making, IM information quality, and classification, naming conventions, employee trainings and IM-related team members.
- Testing through sampling based on document review, interviews, and walkthroughs.

Statement of conformance

The Office of Audit and Evaluation conducted this audit engagement in compliance with the 2017 International Standards for the Professional Practice of Internal Auditing. The audit was also supported by an internal Quality Assurance and Improvement Program, thereby ensuring that the audit team collected sufficient and relevant evidence to address the audit criteria and to support audit conclusions.

Audit criteria

1. IM program and roles, responsibilities, and accountabilities are clearly defined and understood by management, as well as employees, and are supported by governance and senior management oversight.

2. Compliance and monitoring of the IM program are present and aligned with legislative and related policies.

3. IM processes and controls are implemented and working effectively as designed.

Appendix B – Recommendation ratings

Recommendations are ranked to assist management in prioritizing their response to audit findings. These ratings are intended to assist with resource allocation to address identified weaknesses and help improve internal controls and operating efficiency. Please note that ratings are for guidance purposes only. Management must evaluate ratings provided by OAE based on their own experience and risk tolerance.

Recommendations are ranked according to the following definitions:

- **High priority**: Item should be given immediate attention due to the existence of either a significant control weakness, such as control not existing, or not being adequately designed, or not operating effectively, or a significant operational improvement opportunity.

- **Medium priority**: This is a control weakness or operational improvement that should be addressed in the near term.

- **Low priority**: This is a non-critical recommendation that could be addressed to either strengthen internal controls or enhance efficiency, normally with minimal cost and effort. Individual ratings should not be considered in isolation and their effect on other objectives should be considered.