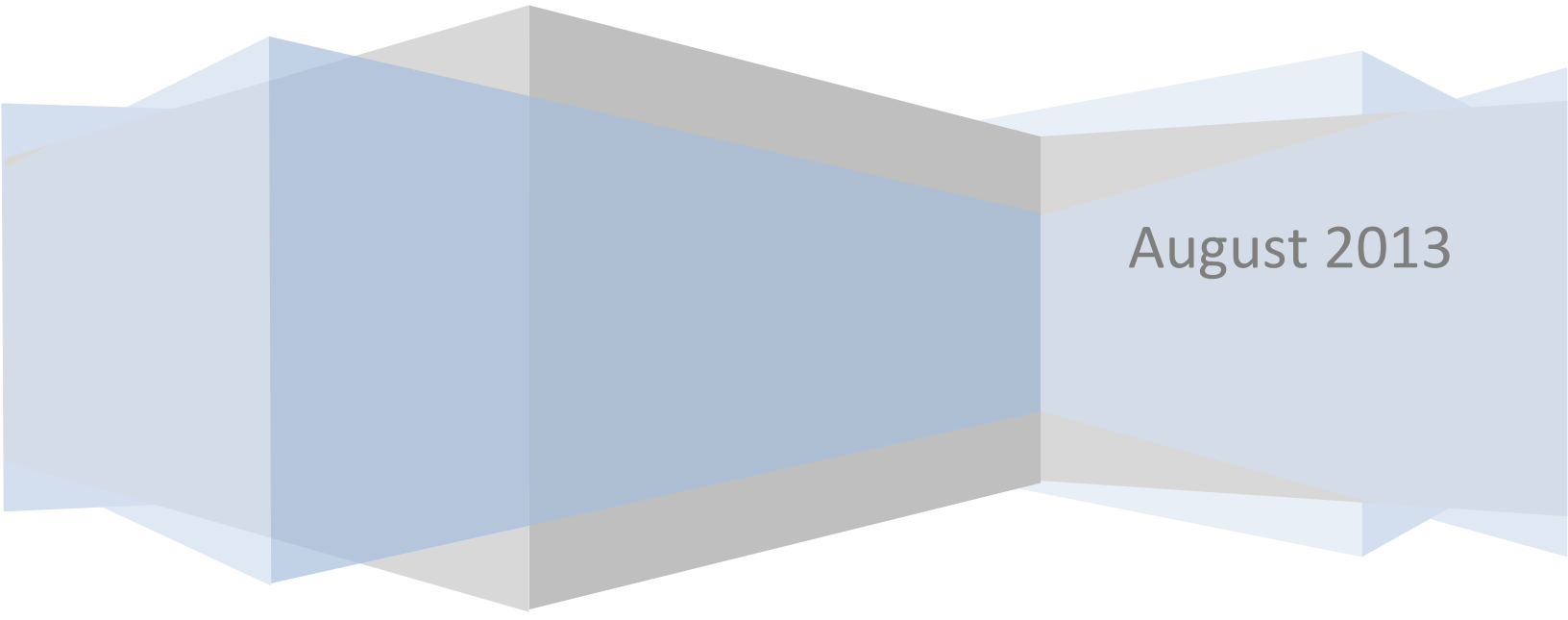
OFFICE OF THE ACCESS TO INFORMATION AND PRIVACY COMMISSIONER
Province of New Brunswick

ANNUAL REPORT

2011/2012



August 2013

August, 2013

The Honourable Dale Graham
Speaker of the Legislative Assembly
Legislative Building
PO Box 6000
Fredericton, New Brunswick
E3B 5H1

Dear Mr. Speaker,

Pursuant to section 63 of the *Right to Information and Protection of Privacy Act* and section 64 of the *Personal Health Information Privacy and Access Act*, I submit our second Annual Report.

I am pleased to report on the activities of the Office of the Access to Information and Privacy Commissioner for its first full fiscal year of operations, namely from April 1, 2011 to March 31, 2012.

Respectfully submitted,

Anne E. Bertrand, Q.C.
Access to Information and Privacy Commissioner

From the Commissioner

This is our Office's second Annual Report after a full and busy year of operation. At this time, the two pieces of legislation that we are tasked to oversee are beginning to produce the changes all those interested had hoped would be forthcoming.

Under the ***Right to Information and Protection of Privacy Act***, there has been a noticeable shift in attitudes towards disclosure of information regarding the affairs of public bodies generally, and positive signs of proactive disclosure on a regular basis. These trends recognize the needs of an interested public eager to learn more about issues that affect daily lives throughout New Brunswick. To encourage these changes, we have continued with our approach to resolve complaints by educating the parties on the proper application of the rules, and this has proven effective. At this date, we have been able to resolve access to information complaints with must success, meaning that 85 percent of public bodies satisfied their obligations to disclose the information the public was entitled to receive as a result. All involved gained insights in the process of access to information, i.e., what the legislation signifies and how best to assist those who seek information. We hope that these beneficial experiences will lead to fewer complaints in the future through greater understanding and proper application of the rules.

Our process to resolve complaints informally in this fashion calls for a great deal of deliberations, interpretations and discussions, and this proved to be very demanding of our time, causing serious delays in completing our investigative work. Access complaints filed with our Office only made up a small portion of the overall files we received in 2011-2012. We also dealt with inquiries of all sorts, from how to request information to jurisdictional questions as to who is subject to the legislation, and we received requests to investigate concerns regarding privacy and provide comments for proposed legislation.

More importantly, we also carried out a robust public awareness campaign to inform all those interested on the new and important reforms this statute has brought to the Province. A small staff could not compete with the amount of effort required to render a service of such a high standard and we were fortunate to have been able to increase our staff from four to five in towards the end of that year. While the work we do in relation to that statute is manifest, it is only part of the story.

We also see to the proper administration of the ***Personal Health Information Privacy and Access Act***. This law was designed to ensure the protection of personal health information by all those individuals, groups and organizations in the health care sector that use it in their work, while also providing individuals the right to access and receive a copy of one's health records. From nursing homes to dentists, health clinics to information technology companies providing services to doctors, and nurses to massage therapists, the list of "custodians" required to follow this legislation sometimes appeared endless. While the public was acutely aware of the new rules regarding the privacy of their personal health information and challenged those who failed to protect it, we found that custodians were less informed.

We therefore focused on making this new legislation more familiar to health care providers by offering, at every possible opportunity, a comprehensive half-day presentation on the statute, its features, its principles and its requirements. The "health legislation" presentation, as it is referred to, has received the praises it rightfully deserves from those who now benefit from it as a useful resource thanks to the very good work of my team who designed it.

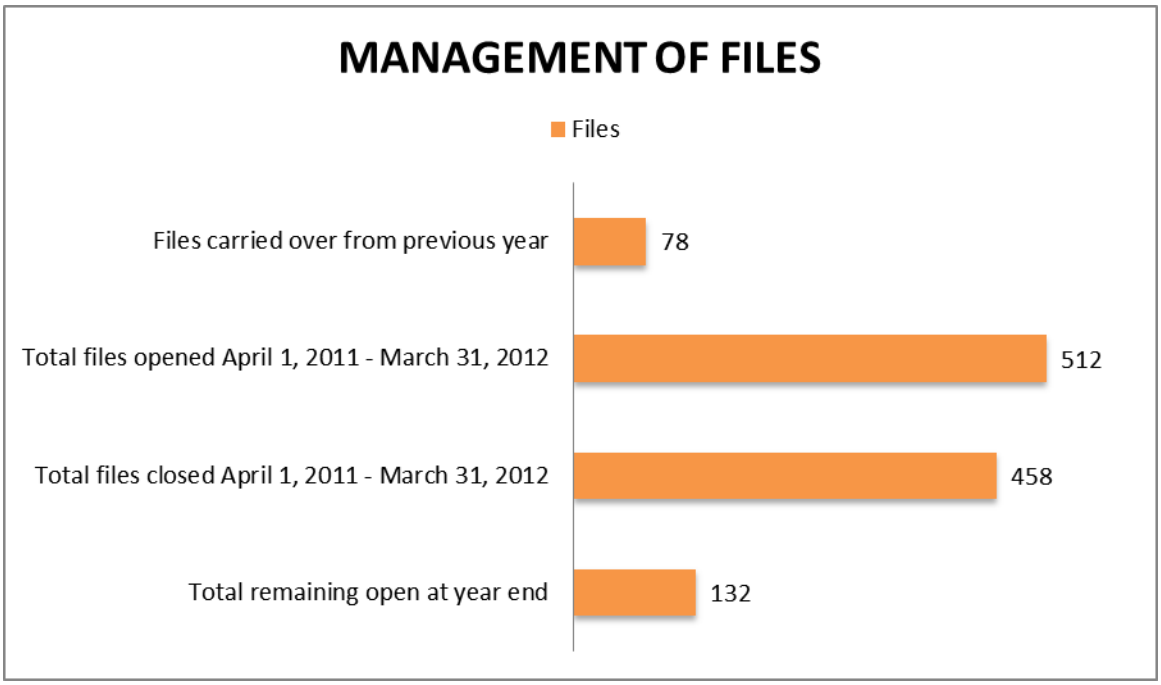
We observed the growth awareness of this legislation as more and more "custodians" contacted our Office with inquiries about the application of this statute. These inquiries ranged from issues of disclosure and consent to what to do when closing a medical practice and more. We were pleased to offer guidance to all parties interested in ensuring compliance with the legislation.

Beyond the education component of this statute, we fielded many inquiries regarding unauthorized access to health records, sharing of private information without consent, and privacy breaches of all types. To assist health care providers and our Office in the investigation of privacy breaches, we developed a user-friendly approach to quickly discern what led to the breach incident, provide guidance on how best to contain it and notify those affected by the breach, and finally, to see that corrective measures are put in place to prevent future recurrences. Our recommendations have been received with the clear and beneficial intent in which they were formulated: practical advice and workable tips on respecting individuals' right to privacy and protecting their personal information at all times.

We enjoy serving the public and providing the necessary guidance and advice to public bodies and health care providers to ensure the successful implementation of these invaluable legislative schemes, and we continue to measure the progress of these new laws in tangible ways: i.e., by gauging the cooperation of public bodies and health care providers who are eager to adopt practices that respect New Brunswickers' rights of access and privacy, and whether the Commissioner's recommendations are followed. It has been an arduous but very successful first 19 months, and my staff and I look forward with optimism that next year's challenges will bring about the desired achievements.

Anne E. Bertrand, Q.C.

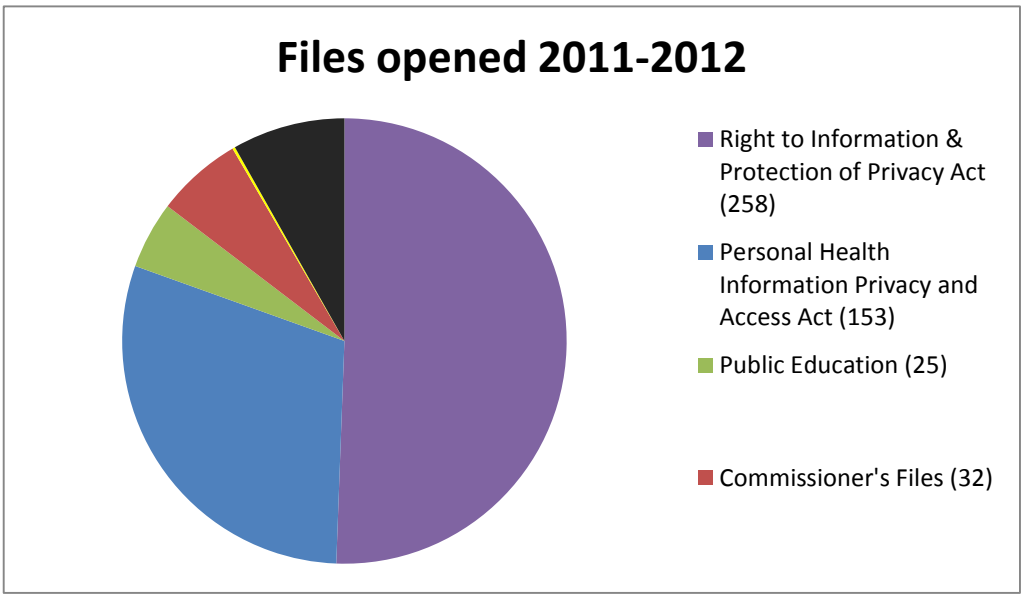
STATISTICS



After the first seven months of operations ending on March 31, 2011, we had 78 files to remaining to be completed. We saw a tremendous interest in from the public as evidenced by the increasing number of matters submitted to our Office in the 12 months that followed. Between April 1, 2011 and March 31, 2012, approximately 4 more files were opened each month than during each month in the previous year.

On average, we were able to close 11 files more each month between April 1, 2011 and March 31, 2012 than we closed each month during the first seven months of our mandate.

Below is a breakdown of the files we opened during 2011/2012 and interesting statistics on our management of these files.



Public Awareness File *is opened when our Office carries out a specific project to raise awareness of the law or a particular aspect of the law. This past year, we distributed materials to municipalities and schools in relation to Data Privacy Day.*

Referrals files *are those cases where individuals or organizations seek assistance for a particular matter that does not form part of our mandate. With a view to assist, we find the proper office before redirecting the case.*

Commissioner's files are opened by the Commissioner's own initiative to look into a particular issue or ongoing concern that has come to our attention. These files are often opened as a result of an issue raised during the course of a complaint investigation or general inquiry that we consider necessary to examine, research, discuss, and address. Our goal is to ensure compliance with the law and to provide general guidance to public bodies, custodians, and the general public at every opportunity.

For instance, a Commissioner's file is opened to address the issue of disclosure of personal information or personal health information to law enforcement officials for the benefit of all those dealing with such an issue as part of their work.

Statistics on Commissioner's Files

Commissioner's Files	Carried over from previous year	Opened 2011-2012	Closed 2011-2012	Remaining at year end
Right to Information and Protection of Privacy Act	2	9	4	7
Personal Health Information Privacy and Access Act	6	12	4	14
General concern	0	11	5	6
TOTAL	**8**	**32**	**13**	**27**

Other file types at Commissioner's Office

Access complaints:
Complaints filed by individuals or groups who are not satisfied with the outcome after a request to obtain information from the records held by a public body or health care provider has been submitted.

Best practices:
Developed to guide public bodies and health care providers in their application of a particular rule or set of rules under the *Right to Information and Protection of Privacy Act* or the *Personal Health Information Privacy and Access Act.*

Comment on proposed legislation or programs:
The Commissioner provides input and comments when new legislation or program is considered and that may impact the public's access to information or the protection of sensitive or confidential information under the *Right to Information and Protection of Privacy Act* or the *Personal Health Information Privacy and Access Act.*

Court Inquiry for verification:
An individual has a choice to refer an unsatisfactory request for information outcome to the Court of Queen's Bench or file a complaint with our Office; therefore, to avoid duplication of process, Courts verify with our Office whether the same matter was filed with us.

General Inquiries:
Inquiries from members of the public, health care providers, law firms, media, and various groups about the two statutes we oversee. Questions range from as simple as how to make a request for access to information to a particular public body or how to file a complaint under either piece of legislation, to more complex inquiries regarding the interpretation of a particular provision, questions concerning our jurisdiction, the applicability of the legislation to certain organizations or unusual situations and so on.

Interpretation Bulletins:
In some cases, a rule or set of rules under either the *Right to Information and Protection of Privacy Act* or the *Personal Health Information Privacy and Access Act* may be ambiguous. We conduct research to arrive at our interpretation in order to assist public bodies and health care providers in the proper application of these rules.

Media inquiries and interviews:
Media requests for us to comment on privacy or access to information matters or issues of concern to the public being reported in the news, or for the Commissioner to comment on our Reports of Findings published pursuant to investigations under the *Right to Information and Protection of Privacy Act* or the *Personal Health Information Privacy and Access Act.*

Privacy breach notifications:
This type of file is opened whenever health care providers or public bodies alert our Office that a breach of privacy has occurred within their organization.

Privacy complaints:
Filed by an individual or group concerned that personal health information may have been collected, used, disclosed, stored or destroyed in contravention of the *Personal Health Information Privacy and Access Act.*

Privacy concerns:
Filed by an individual or group concerned that a privacy incident has taken place or that a government policy or practice may be in contravention of the *Right to Information and Protection of Privacy Act.*

Privacy Impact Assessments:
According to the *Personal Health Information Privacy and Access Act,* health care providers that are also public bodies must carry out an assessment to describe how a proposed administrative practice or information system to handle personal health information will protect it at all times. Privacy impact assessments can be submitted to the Commissioner for review.

Public Advisories:
Organizations sometimes notify our Office of a matter that impacts the privacy of New Brunswickers. We assist in alerting the public that a privacy breach incident has taken place, particularly in cases where notification of all those possibly affected may not be difficult.

Public Education:
The Commissioner's Office is tasked with an important public education mandate both under the *Right to Information and Protection of Privacy Act* or the *Personal Health Information Privacy and Access Act* and to promote these laws to all those required to follow them. This role is carried out through a multitude of presentations made to the public, public bodies, health care providers, educational bodies, and to private sector groups.

Request to disregard:
A public body can apply to the Commissioner for approval to disregard an access to information request it has received under the *Right to Information and Protection of Privacy Act* in certain cases.

Time Extension:
A public body can apply to the Commissioner for additional time to provide a response to an access to information request under the *Right to Information and Protection of Privacy Act.*

Right to Information and Protection of Privacy Act

	Files carried over from previous year	Files Opened 2011-2012	Files Closed 2011-2012	Files remaining open at year end	Average number of days to conclude
General Inquiries	8	176	174	10	15.8
Access Complaints	12	26	22	16	114.8
Privacy Concerns	7	14	10	9	115.8
Breach Notifications	3	3	4	2	163.3
Time Extension	1	5	6	0	24.5
Comments on Proposed Legislation or Program	0	6	4	2	50.8

Under this *Act,* on average we saw an increase of 3 files each month between April 1, 2011 and March 31, 2012 than for each month last year.

Access complaints remained steady as in the previous first seven months of operations at an average of 2.2 complaints filed per month, while we received slighter fewer privacy concerns and privacy breach notifications during that period.

Personal Health Information Privacy and Access Act

	Files carried over from previous year	Files Opened 2011-2012	Files Closed 2011-2012	Files remaining open at year end	Average number of days to conclude
General Inquiries	15	85	89	11	32.8
Access Complaints	5	7	8	4	67
Privacy Complaints	1	26	21	6	126.4
Privacy Breach Notifications	9	28	19	18	119.1
Privacy Impact Assessments	0	1	1	0	76

Overall under this *Act,* the same number of files was opened each month between April 1, 2011 and March 31, 2012 as each month last year.

We did observe an increase in complaints filed by the public for breach of privacy as well as an increase in self-reporting of privacy breaches by health care providers from an average of 1.4 to 2.3 cases per month.

Below is additional information on Files undertaken during the past year.

Right to Information and Protection of Privacy Act	Files Opened 2011-2012
Request to Disregard	1
Best Practices	3
Interpretation Bulletins	2
Court Inquiry	3
Media Inquiries and interviews	16
Public Advisories	4

Personal Health Information Privacy and Access Act	Files Opened 2011-2012
Best Practices	3
Media Inquiries and interviews	1
Public Advisories	2

PUBLIC EDUCATION	Files Opened 2011-2012
Right to Information and Protection of Privacy Act	4
Personal Health Information Privacy and Access Act	13
Both Acts in same session	8

TRENDS

Right to Information AND Informal Resolution of Complaints

A major part of our work in our second year of operation was to continue our efforts to resolve access complaints informally whenever possible. When we receive a complaint, we take any steps we consider appropriate to resolve it informally to the satisfaction of both the applicant and the public body in a manner that is consistent with the purposes of the ***Right to Information and Protection of Privacy Act***, In cases where we cannot informally resolve, we proceed with a formal investigation that results in a written report of our findings with recommendations to the public body as are appropriate in the circumstances.

Our Office approaches informal resolution of complaints as an opportunity to work collaboratively with both the applicant and the public body to ensure that everyone understands their respective rights and obligations under the ***Act***. Our goal is to help both parties arrive at a better understanding of what information the applicant is entitled to receive and what information the public body can or must protect from disclosure.

INFORMAL PROCESS FOR COMPLAINT INVESTIGATIONS

STEPS in the INFORMAL PROCESS

1. We review the complaint to ensure that we understand what information the applicant is seeking and what the public body provided in response. The next step is to meet with the public body to discuss the context/background and how it approached processing the request and we ensure that the public body searched adequately for all the relevant information. We review the relevant records.

2. We then formulate our preliminary findings which we provide in writing to the public body. If we find the public body met all of its obligations in granting access to the information the applicant was entitled to, we inform the applicant of our reasons and invite the applicant's input with a view to successfully resolve the matter. If the applicant is not satisfied, we review the matter once again to ensure all issues have been addressed and we either conclude the matter with a report of findings without recommendation or cease to investigate.

3. If we find the public body did not meet all of its obligations in responding properly and/or granting access to all of the information the applicant is entitled to receive, we provide our reasoning to the public body for its consideration. If the public body agrees with our reasoning, the public body is invited to prepare a "revised response", which is

basically a second chance for the public body to provide a full and complete response to the applicant's request as a means of informally resolving the matter. Our Office reviews the revised response to ensure it is a full and frank response to the request, and then the public body sends it directly to the applicant. At that time, we ask the applicant for feedback as to whether the revised response is a satisfactory resolution of the complaint. If it is, the matter is successfully resolved. If the applicant is not satisfied, we consider any feedback the applicant provides and make a determination as to whether to continue with the informal resolution process. We review the entire matter once again to ensure all issues have been addressed and conclude with a formal report of findings without recommendation or cease to investigate where we find all issues were addressed.

… a "revised response", basically a second chance for the public body to provide a full and complete response to the applicant's request as means of informally resolving the matter.

The informal process is our **default approach to all access complaint investigations**, meaning that we only initiate a formal investigation with a formal report of our findings when we are not able to affect a satisfactory informal resolution of the complaint or there are circumstances that do not permit us to

2011/2012
Experience to date:

We are receiving good cooperation from both applicants and public bodies with this approach.

Public bodies appreciate the opportunity to engage in discussions about their roles and functions and to hear our input on the application of the Act as part of our review process.

Applicants have also provided us with positive feedback when they receive the information they were seeking and/or better explanations as to why they could not access the withheld information.

MAKING A CASE FOR THE DUTY TO ASSIST

The Act places a positive duty on public bodies to "make every reasonable effort to assist an applicant, without delay, fully and in an open and accurate manner."

Simply put, applicants are those who request information, and when applicants request information, they should expect to be well served:

- by receiving a call or an email about their request,
    - this ensures everyone is clear on what specific information is sought;
- by receiving a full and frank response,
    - after an adequate search for all relevant records has been undertaken, and
- by receiving the requested information, with few and limited exceptions that are accompanied by meaningful explanations as to why the exceptions apply in that case, and finally,
- by receiving the response in a timely fashion.

A most notable development over the past year was the Province's decision to **abolish all fees** associated with access to information requests, making New Brunswick the only jurisdiction in Canada to not charge fees to applicants for the processing of their request for information.

«Requesting information from a town, school or government, should be considered a beneficial thing and a worthwhile experience for both members of the public and public bodies alike. Requesting information signifies the public is curious and interested about the functions of government and when that need to understand is satisfied through full and frank responses, the government allows itself the opportunity to substantiate its decisions and give them meaning, resulting in a better informed public, improved discussions and a healthier democracy», Commissioner Anne Bertrand.

What about exceptions to disclosure of requested information?

One of the new aspects of the *Act* is that it contains both MANDATORY and DISCRETIONARY exceptions to disclosure of requested information (sections 17 to 33). These exceptions can be used to withhold information in certain circumstances but the process to be followed in applying each exception is different.

Discretionary exceptions signify that the information may not need to be withheld in all cases and whether to protect it from release will depend on the circumstances.

Examples

These exceptions relate to advice to government ministers, information that could be harmful to public health or safety if released, that concerna private sector company's financial interests, or information that is privileged and the privilege has not been waived. The fact that information may fall within one of these categories is not sufficient to refuse access to this information--a public body has the discretion to either grant or refuse access to the information, meaning that the public body has to consider all of the relevant factors at play in order to make an informed decision as to whether the requested information can and should be released.

Mandatory

Few exceptions are mandatory and they relate to information that is highly confidential and sensitive.

Examples

Cabinet confidences, confidential information of other governments, personnel investigations, personal information that cannot be revealed without consent or without unreasonably invading that person's privacy, and private sector confidential financial and business information.

Public bodies have no choice but to protect such information.

Disclosure continues to be the default position: a public body must provide reasons why it has decided that it cannot release the information in the circumstances.

Adapting the use of discretionary exceptions to disclosure: ADVICE OR RECOMMENDATIONS

Several of our investigations of access complaints involved requesting records that contained advice or recommendations given to a minister of a public body. Advice and recommendations are considered in the Act as a discretionary exception to disclosure, meaning that a public body must decide whether it can disclose the information in light of all relevant circumstances.

Not realizing the subtle but significant difference between mandatory and discretionary exceptions to disclosure, many public bodies were unknowingly treating discretionary exceptions, including the advice to public bodies exception, as an automatic decision to refuse to release the information requested.

We found that these actions were based on earlier practices requiring sensitive information to be protected at all times and therefore not to be made available to the public. The *Act* brought in different rules and reforms that called for a new way of doing and a new way of thinking; in short, a cultural shift that required old practices to be revisited and a predisposition for more disclosure.

…public bodies were unknowingly treating discretionary exceptions… as an automatic decision to refuse to release the information requested…based on earlier practices.

Certain kinds of documents were routinely being withheld without adequate consideration of whether the records contained different kinds of information, not all of which ought to have been protected to that degree. Therefore, we encouraged public bodies to adopt the new rules and agree to modify their approach to one acknowledging that just because a document contained advice or recommendations did not alone necessarily mean the entire record could be withheld.

The Act brought in different rules and reforms that called for a new way of doing and a new way of thinking; in short, a cultural shift that required old practices to be revisited and a predisposition for more disclosure.

We promoted a shift towards considering the record as a whole with a view to disclose as much requested information found in it as possible, including where advice that had already been acted upon no longer needed to be kept confidential and could also be lawfully disclosed.

This approach held true in cases where access was sought for briefing notes. We found that factual and background information otherwise publicly known or publicly available such as media articles and published reports could be released even where some of the advice and recommendations could be properly protected and withheld at the time of the requests.

Good progress was made on this issue as public bodies recognized the distinction and agreed to withhold only the information which warranted protection as per the new rules of the *Act*.

★★★★★★★★★★

While the *Act* does not make it mandatory for public bodies to notify our Office when privacy breaches are discovered, we were pleased to be notified and to be asked to offer our assistance and guidance.

We took this as a good sign that public bodies have considered the real benefits of our independent role in providing this assistance.

★★★★★★★★★★

Personal Health Information Privacy and Access Act

Our work in year two under the health legislation largely focused on continuing our efforts to guide and assist custodians in understanding their obligations and duties under the Act. Mandatory breach reporting – New Brunswick's personal health information protection legislation was the first jurisdiction in Canada to require that "custodians" to notify the Commissioner's Office as well as those affected by the breach of a privacy breach. We asked for everyone's participation in such effort by proactively notifying our Office of all types of breaches, notwithstanding their nature and size. This allowed us to gauge the effectiveness of practices put in place to protect the health care information belonging to New Brunswickers, and to provide guidance on how they could be improved. What we discovered were breaches of privacy largely due to inattention and human error as opposed to people satisfying their curiosity by intentionally actions to look at individuals' personal health information.

A custodian is a person, group, company or organization, in the public or private sector that handles personal health information in order to work in the health care industry.

Our investigations revealed that many errors took place when handling sensitive information stored on electronic and portable devices. Again, providing guidance on the use of these devices proved useful.

USES of technology and **implications for privacy**

Advances in technology present exciting and innovative opportunities for improving the delivery of health care services. Technological innovations, however, also continue to raise questions about the implications surrounding privacy. The more complex the technology, the more difficult it can be to understand how it will handle sensitive personal health information stored, accessed and disposed of. This fact makes it challenging to determine the appropriate safeguards to ensure the integrity and security of the personal health information. More and more personal health information is being created, processed and stored in electronic format, causing new challenges and concerns.

> Laptops, iPads, Blackberries, external drives and USB keys are convenient and useful ways to perform tasks away from the office. The portability of these kinds of technologies also means these devices are more susceptible to loss or theft.

In our increasingly mobile society, electronic devices and removable digital media are user-friendly, convenient, and cheap for storing, accessing and transporting a wealth of data, including personal health information, making it possible to work from practically anywhere.

From April 2011 to March 2012, our Office was notified of a number of cases where mobile devices such as laptops and USB keys were either stolen or lost. USB key used as a back-up by a doctor's office went missing and it contained personal health information of hundreds of patients.

Laptops and computer equipment containing personal health information stolen from clinics also housed thousands of patient records. We did not take issue with the use of such convenient devices; rather, we questioned the lack of attention to their handling especially when the information was completely unprotected by passwords and encryption.

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The Province's move to transition from paper-based medical records and patient charts to electronic health and medical records presents enormous and beneficial possibilities to ensure health care providers have immediate access to accurate and up-to-date patient information. We do note that the immediacy of accessibility to this information will also present privacy challenges.

Over the course of the period from 2011 to 2012, we were advised of various cases where family members checked up on other family members' treatments and prognoses, employees examined records of their friends, family members, neighbours, and colleagues, as well as cases where employees looked into their former spouses' records or that of their new partner.

In none of these cases were these individuals accessing the information to carry out their work – they were "snooping" and they were committing a breach of privacy.

Custodians are responsible for ensuring that their employees and agents, as well as themselves, are knowledgeable about the duties and obligations to protect their patients' personal health information at all times.

STEPS CUSTODIANS can take to avoid unauthorized access include:

- having employees and agents review and sign confidentiality oaths
- wherever possible, limit access to personal health information to those who need it to perform their duties
- educating staff on the difference between being able to access records (having the *authority* to access) rather than having the *permission* to do so at any time
- conducting random audits of electronic databases to monitor user activity, and letting employees and agents know of this practice to discourage snooping

Helpful tips:

protect all mobile devices and removable media with passwords and encrypted hard drives to prevent access to the information if lost or stolen

download the least amount of information necessary to perform task required

remove the information from portable devices when no longer necessary

secure mobile devices when not in use with locks or locked storage areas

CASES OBSERVED - Misdirected communications containing personal health information

- faxes sent to wrong fax number
- emails sent to unintended recipients or by clicking on the *Reply All* and sending to entire mailing list
- records sent by mail to the wrong person with same name
- health care appointment scheduling details left on wrong voice mail recording

Best tips for protection and security of the information at any time:

THINK

BEFORE YOU SPEAK

CONSIDER

BEFORE YOU WRITE

PAUSE

BEFORE YOU CLICK

Substantially Similar Designation for New Brunswick's legislation

An event of significance this year was the Exemption Order issued on November 17, 2011, entitled the *Personal Health Information Custodians in New Brunswick* that declared New Brunswick's *Personal Health Information Privacy and Access Act* to be substantially similar to Part 1 of the federal legislation known as the *Personal Information Protection and Electronic Documents Act ("PIPEDA").* *PIPEDA* establishes rules for the collection, use and disclosure of personal information by private sector organizations or those which are specifically identified, such as federal works or undertakings. This included when there was payment for services or for medications, or any other transactions deemed to be commercial by nature. The New Brunswick *Personal Health Information Privacy and Access Act* deals with all aspects where health care data is used and the *Act* captures commercial transactions by health care organizations in the private sector.

For the first time, private sector health custodians are subject to provincial privacy legislation and oversight by the Commissioner's Office

Knowing that this could lead to a duplication of legislation, Industry Canada published criteria for provincial privacy legislation to be considered substantially similar. To meet this consideration, provincial legislation must:

- Provide privacy protection that is consistent with and equivalent to that in *PIPEDA*;
- Incorporate the 10 principles in the National Standard of Canada entitled Model Code for the Protection of Personal Information, as found in Schedule 1 of *PIPEDA*;
- Provide for an independent and effective oversight and redress mechanism with powers to investigate; and
- Restrict the collection, use and disclosure of personal information to purposes that are appropriate or legitimate.

New Brunswick became the fifth province to obtain the designation after Ontario, Quebec, Alberta, and British Columbia. As a result, custodians in New Brunswick are only subject to the *Personal Health Information Privacy and Access Act*. *PIPEDA* will continue to apply to the collection, use and disclosure of personal information during commercial activity outside the province and to the collection, use and disclosure of personal health information by those not captured under the *Personal Health Information Privacy and Access Act*.

Fiscal Year ending March 31, 2012

Office of the Access to Information and Privacy Commissioner
Province of New Brunswick - Legislative Assembly

EMPLOYEE SALARY & BENEFITS	391 546
OFFICE RENT, TRAVEL & OTHER SERVICES	109 849
MATERIALS & SUPPLIES	9 880
FURNITURE & EQUIPMENT	4 717
TOTAL EXPENDITURES	515 992

The April 2011 to March 2012 TEAM

The Office of the Access to Information and Privacy Commissioner continued to benefit from the valued work of a team of the following dedicated individuals:

Legal Counsel and Investigators	Kara Patterson Diane Haché Forestell
Intake Officer	Norah Kennedy
Portfolio Officer	Ben McNamara (from June 2011)
Administrative Assistant	Lucrèce Nussbaum (from Nov 2011)

Have questions or concerns?
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