

# **Decision and Reasons for Decision**

Citation: M34 and Sunshine Coast Hospital and Health Service [2023]

**QICmr 55 (5 October 2023)** 

Application Number: 316946

Applicant: M34

Respondent: Sunshine Coast Hospital and Health Service

Decision Date: 5 October 2023

Catchwords: ADMINISTRATIVE LAW - RIGHT TO INFORMATION -

DOCUMENT OF AGENCY - vaccination documents held by entity other than health service - complaint documents held by respondent agency - whether a 'document of an agency' under section 13 of the *Information Privacy Act 2009* (Qld) and section 12 of the *Right to Information Act 2009* (Qld) - whether subject to the right to be given access to documents of agency in section 40(1) of the *Information Privacy Act 2009* (Qld) - construction of terms and scope of access application for documents of agency under section 43(1) of

the Information Privacy Act 2009 (Qld)

# **REASONS FOR DECISION**

## **Summary**

- 1. The applicant applied to the Sunshine Coast Hospital and Health Service (**Health Service**) under the *Information Privacy Act 2009* (Qld) (**IP Act**) for access to her 'whole file' at the Sunshine Coast University Hospital (**Hospital**). The Health Service located 217 pages and decided to release<sup>2</sup> 212 pages in full and five pages in part.<sup>3</sup>
- 2. The applicant then applied<sup>4</sup> to the Office of the Information Commissioner (**OIC**) for external review of the decision on the basis that the Health Service had not located all the requested documents.
- 3. For the reasons set out below, I find that the documents raised by the applicant in this external review are outside the scope of her application.

<sup>&</sup>lt;sup>1</sup> Access application dated 25 July 2022.

<sup>&</sup>lt;sup>2</sup> Decision dated 12 September 2022.

<sup>&</sup>lt;sup>3</sup> Subject to the redaction of mobile telephone numbers and website login information, refused on the ground that their disclosure would be contrary to the public interest under section 67(1) of the IP Act and section 47(3)(b) of the *Right to Information Act 2009* (Qld) (**RTI Act**).

<sup>&</sup>lt;sup>4</sup> Email dated 10 October 2022.

# **Background**

- 4. During the review, it was established that the applicant did not seek review of the Health Service's decision to refuse access to the mobile telephone numbers and website login information appearing on five pages.<sup>5</sup>
- 5. The applicant made submissions to OIC which raised issues beyond OIC's external review jurisdiction, including dissatisfaction with the health care provided to her by the Health Service. Given this, the applicant was advised of the limits of OIC's jurisdiction, including that OIC cannot investigate complaints about the conduct of the Hospital or Health Service. The applicant was also advised that OIC's external review jurisdiction in this review was confined to reviewing the Health Service's decision regarding her access application, and that if she sought amendment of her personal information or wished to make a privacy complaint, these were separate processes which could not be incorporated into this review. I have considered the applicant's submissions to the extent they are relevant to the issue for determination in this review.
- 6. Significant procedural steps in this external review are set out in the Appendix.

## Reviewable decision

7. The decision under review is the Health Service's decision dated 12 September 2022.

### **Evidence considered**

- 8. The evidence, submissions, legislation and other material I have considered in reaching this decision are set out in these reasons (including the footnotes and the Appendix).
- 9. I have also had regard to the *Human Rights Act 2019* (Qld) (**HR Act**), particularly the right to seek and receive information.<sup>6</sup> I consider a decision-maker will be *'respecting, and acting compatibly with'* that right, and others prescribed in the HR Act, when applying the law prescribed in the IP Act.<sup>7</sup> I have acted in this way in making this decision, in accordance with section 58(1) of the HR Act. I also note the observations made by Bell J on the interaction between similar pieces of Victorian legislation<sup>8</sup> that *'it is perfectly compatible with the scope of that positive right in the Charter for it to be observed by reference to the scheme of, and principles in, the Freedom of Information Act'.<sup>9</sup>*

# Issue for determination

10. The applicant requested an external review as she considered that the Health Service had not located all documents within the terms of her application. The Information Commissioner's external review functions include reviewing whether agencies have taken reasonable steps to identify and locate documents applied for by applicants.<sup>10</sup>

<sup>6</sup> Section 21(2) of the HR Act.

<sup>&</sup>lt;sup>5</sup> By letter dated 25 October 2022, OIC advised the applicant that it intended to proceed on the basis that she did not seek external review of the Health Service's decision to refuse access to this information. The applicant was asked to advise OIC if she did seek such information. Subsequently, the applicant's submissions dated 30 October 2022 did not address this information. Accordingly, OIC's letter dated 2 March 2023 confirmed that 'these redactions will not be considered further in this review'.

<sup>&</sup>lt;sup>7</sup> XYZ v Victoria Police (General) [2010] VCAT 255 (16 March 2010) (XYZ) at [573]; Horrocks v Department of Justice (General) [2012] VCAT 241 (2 March 2012) at [111]. I further note that OIC's approach to the HR Act set out in this paragraph was considered and endorsed by the Queensland Civil and Administrative Tribunal in Lawrence v Queensland Police Service [2022] QCATA 134 at [23] (where Judicial Member McGill saw 'no reason to differ' from this position).

<sup>&</sup>lt;sup>8</sup> Freedom of Information Act 1982 (Vic) and the Charter of Human Rights and Responsibilities Act 2006 (Vic).

<sup>9</sup> XYZ at [573].

<sup>&</sup>lt;sup>10</sup> Section 137(2) of the IP Act.

Depending on the circumstances, it may be necessary to consider whether the documents raised by an applicant fall within the scope of their access application; and/or whether access to those documents may be refused on the ground they are nonexistent or unlocatable.11

### Relevant law

- A 'document of an agency' means a document in the possession or under the control of an agency.<sup>12</sup> The IP Act provides that an individual has a right to be given access to documents of an agency to the extent they contain the individual's personal information.<sup>13</sup> An individual who wishes to be given access to a document of an agency may apply to the agency for access to the document.<sup>14</sup> There is no right of access under the IP Act to documents that are not documents of the agency receiving the application. Given their nature, such documents are not within the scope of the application to that agency. 15
- An access application must 'give sufficient information concerning the document to enable a responsible officer of the agency or the Minister to identify the document'.16 There are sound practical reasons for the documents sought being clearly and unambiguously identified, as explained by the Information Commissioner in relation to similar considerations under the predecessor to the IP Act and RTI Act, the repealed Freedom of Information Act 1992 (Qld) (FOI Act):17

The terms in which an FOI access application is framed set the parameters for an agency's response under Part 3 of the FOI Act, and in particular set the direction of the agency's search efforts to locate all documents of the agency which fall within the terms of the FOI access request. The search for relevant documents is frequently difficult, and has to be conducted under tight time constraints. Applicants should assist the process by describing with precision the document or documents to which they seek access. Indeed the FOI Act itself makes provision in this regard with s.25(2) not only requiring that an FOI access application must be in writing, but that it must provide such information concerning the document to which access is sought as is reasonably necessary to enable a responsible officer of the agency to identify the document.

- The Information Commissioner also outlined the following principles to be followed in interpreting an access application which is framed in imprecise or ambiguous terms: 18
  - the question is not necessarily to be approached in the same manner as the interpretation of a statute or legal document
  - seeking clarification of the intended meaning of an access application is a practice to be encouraged:19 and

<sup>&</sup>lt;sup>11</sup> Section 67(1) of the IP Act and section 47(3)(e) and 52(1) of the RTI Act.

<sup>&</sup>lt;sup>12</sup> Section 12 of the RTI Act, which applies by virtue of section 13 of the IP Act. <sup>13</sup> Section 40(1)(a) of the IP Act.

<sup>&</sup>lt;sup>14</sup> Section 43(1) of the IP Act.

<sup>&</sup>lt;sup>15</sup> At times, circumstances may involve the transfer, or part transfer, of the application to another agency under section 57(2) of the IP Act; however that has not occurred here.

<sup>&</sup>lt;sup>16</sup> Section 43(2)(b) of the IP Act.

<sup>&</sup>lt;sup>17</sup> Cannon and Australian Quality Egg Farms Ltd (1994) 1 QAR 491 (Cannon) at [8]; cited in O80PCE and Department of Education and Training (Unreported, Queensland Information Commissioner, 15 February 2010) (O80PCE) at [33], Van Veenendaal and Queensland Police Service [2017] QICmr 36 (28 August 2017) at [15] and Ciric and Queensland Police Service [2018] QICmr 30 (29 June 2018) at [20].

18 Cannon at [10]; Lonsdale and James Cook University [2015] QICmr 34 (Lonsdale) at [10]; see also Robbins and Brisbane

North Regional Health Authority (1994) 2 QAR 30 at [16], Fennelly and Redland City Council (Unreported, Queensland Information Commissioner, 21 August 2012) at [21] and O80PCE at [35].

<sup>19</sup> It should be noted that section 53 of the IP Act specifies a process by which the agency must give the applicant the opportunity to make their application compliant (section 25A of the repealed FOI Act set out a similar process). This process applies if an applicant purports to make an access application, but the application does not comply with all relevant application requirements (including the requirement in section 43(2)(b) of the IP Act about giving sufficient information concerning the documents sought).

- it can rarely be appropriate to apply legal construction techniques to the words of an access application in preference to consulting with the author of the words to clarify the author's intended meaning and agree upon more precise wording for the terms of the access application.
- 15. Although outlined in the context of the repealed FOI Act, these principles remain relevant and are consistent with the object<sup>20</sup> and pro-disclosure bias<sup>21</sup> of the IP Act.<sup>22</sup> If, having applied these principles, a document does not contain any information that is relevant to the terms of the access application, it is outside the scope of the access application and cannot be considered as part of the application under the IP Act.<sup>23</sup>
- 16. Where a document *is* a document of the agency receiving the application and *does* fall within the scope of that application, the applicant has a right to be given access, except in circumstances where it would not be in the public interest to deal with the application,<sup>24</sup> and subject to certain grounds on which access may be refused,<sup>25</sup> including the ground that the document is nonexistent or unlocatable.<sup>26</sup>
- 17. A document is *nonexistent* if there are reasonable grounds to be satisfied it does not exist.<sup>27</sup> To be satisfied that a document does not exist, the Information Commissioner has previously had regard to various key factors including the agency's record-keeping practices and procedures (including, but not limited to, its information management approaches).<sup>28</sup> However, the Information Commissioner may also take into account the searches and inquiries conducted by an agency in determining whether a document is nonexistent. Here, the key question is whether those searches and inquiries amount to 'all reasonable steps'.<sup>29</sup> What constitutes reasonable steps will vary from case to case, as the search and inquiry process an agency will be required to undertake will depend on which of the key factors are most relevant in the particular circumstances. Such steps may include inquiries and searches of all relevant locations identified after consideration of relevant key factors.<sup>30</sup>

# **Applicant's submissions**

- 18. The entire wording of the applicant's access application to the Health Service is:31
  - a. Subject matter

My whole file

- Covid vaccination clinic
- Emergency Dept
- Immunology
- Cardiology
- Hospital Admin
- Everything you have

<sup>&</sup>lt;sup>20</sup> Section 3(1)(b) of the IP Act.

<sup>&</sup>lt;sup>21</sup> Section 64(1) of the IP Act.

<sup>&</sup>lt;sup>22</sup> Lindeberg and Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts [2023] QICmr 34 (30 June 2023) at [19].

<sup>&</sup>lt;sup>23</sup> Dubois and Rockhampton Regional Council [2017] QICmr 49 (6 October 2017) at [12].

<sup>&</sup>lt;sup>24</sup> Sections 58, 59, 60 and 62 of the IP Act.

<sup>&</sup>lt;sup>25</sup> Section 67(1) of the IP Act and section 47(3) of the RTI Act.

<sup>&</sup>lt;sup>26</sup> Sections 47(3)(e) and 52(1) of the RTI Act.

<sup>&</sup>lt;sup>27</sup> Section 52(1)(a) of the RTI Act. For example, a document has never been created.

<sup>&</sup>lt;sup>28</sup> Pryor and Logan City Council (Unreported, Queensland Information Commissioner, 8 July 2010) (**Pryor**) at [19], which adopted the Information Commissioner's comments in *PDE* and *University of Queensland* (Unreported, Queensland Information Commissioner, 9 February 2009) (**PDE**) at [37]-[38]. PDE addresses the application of section 28A of the repealed FOI Act. Section 52 of the RTI Act is drafted in substantially the same terms as the provision considered in *PDE* and, therefore, the Information Commissioner's findings in *PDE* are relevant.

<sup>29</sup> As set out in *PDE* at [49].

<sup>30</sup> As set out in PDE at [38].

<sup>&</sup>lt;sup>31</sup> Access application dated 25 July 2022 which specifically listed the Hospital as the 'agency'. The plain text on the left summarises the text in the application form, while the text in italics on the right hand sets out the applicant's request.

b. Type of documents Everything

c. Time period / date range All time since [the Hospital] opened to now.

. .

e. Where the documents Who would know with the corrupt state of your hospital

may be located — Im sure you can find them. [sic]

19. The applicant initially expressed her concern about 'missing' documents as follows:32

There are letters missing from Hospital administration, along with the direction from [the then Minister for Health] Yvette Dath's office that the hospital responds to my concerns of having my records changed etc.

20. On external review, OIC asked the applicant to provide any further information she had about these documents and invited her to provide a list of any other documents that, in her view, should have been located.<sup>33</sup> In response, the applicant made submissions regarding two letters she had received from the Health Service (**Letters**)<sup>34</sup> and concluded:<sup>35</sup>

So, Yes. I request files from Patient Liaison, Administration, office of [A/Chief Executive of the Health Service], Office of [Clinical Director – Medical Services Group of the Health Service], the covid clinic that is a part of the hospital and the public health unit.

- 21. It is my understanding that, in summary, the applicant considers that the Health Service has failed to locate two categories of documents requested by her:
  - Vaccination Documents that is, documents held by the COVID-19 vaccination clinic at the Hospital attended by the applicant; and
  - Complaint Documents that is, documents held by "Patient Liaison, Administration, office of [A/Chief Executive of the Health Service], [and] Office of [Clinical Director Medical Services Group of the Health Service] relating to the applicant's concerns and complaints.
- 22. Taking into account the Health Service's submissions, as set out below, I advised the applicant of my view that the Vaccination Documents and Complaint Documents raised by her were outside the scope of her application or, alternatively, could be refused on the ground they were nonexistent or unlocatable.<sup>36</sup> I also noted that it was open to her to make a fresh access application seeking Complaint Documents from areas of the Health Service other than the Hospital, and to contact another entity to access her Vaccination Documents.<sup>37</sup> In response, the applicant advised she now had enough information and would make a further application but nevertheless she also stated 'I want this firmly, solidly recorded FORMALLY, so I can take further action. Seal it in writing that the hospital say they don't have records they have already claimed they have'.<sup>38</sup>
- 23. Accordingly, I will address the Vaccination Documents and Complaint Documents in turn.

<sup>32</sup> Email to the Health Service dated 23 September 2022, following receipt of its decision dated 12 September 2022.

<sup>33</sup> Letter dated 25 October 2022.

<sup>&</sup>lt;sup>34</sup> Letter dated 5 May 2022 from the Clinical Director – Medical Services Group of the Health Service to the applicant; and letter dated 28 June 2022 from the A/Chief Executive of the Health Service to the applicant.

<sup>&</sup>lt;sup>35</sup> Applicant's email dated 30 October 2022.

<sup>&</sup>lt;sup>36</sup> Letter dated 2 March 2023 and email dated 4 September 2023.

<sup>&</sup>lt;sup>37</sup> On March 2023, the Vaccine Operation Centre (as suggested in the Health Service's decision dated 12 September 2022); and then on 4 September 2023, the Department of Health's Health Contact Centre.

<sup>&</sup>lt;sup>38</sup> Applicant email dated 26 March 2023.

#### **Vaccination Documents**

- 24. The applicant considers that the Health Service should have located Vaccination Documents in response to her application. In support of her view that 'they do have information from the vaccine clinic', she submitted that the contents of one of the Letters, 39 which responds to her concerns about her treatment following the administration of a COVID-19 vaccination, indicates 'they do have information from the vaccine clinic, even though they have refused to provide it, stating they do not have it'.40
- 25. In response to the absence of Vaccination Documents, the Health Service stated as follows in its decision:<sup>41</sup>

I note on your application you requested your information from the 'Covid Vaccination Clinic'. Unfortunately, the [Health Service] are not the data custodians for this documentation. To access this information, I have been advised you will need to contact the Vaccine Operations Centre (VOC). Their contact phone number is [...].

26. Then, the Health Service provided the following explanation during the external review:<sup>42</sup>

As part of processing the application, our office conducted searches of the [Hospital] following clinical record databases:

- Electronic Medical Record (EMR)
  - No records were located
- Integrated Electronic Medical Record (ieMR)
  - o 221 pages were downloaded with 12 blank pages deleted
- [Health Service] Xero (Medical Imaging)
  - All medical imaging was produced in ieMR
- Electronic Discharge Summary (EDS)
  - No records were located
- Fluency for Transcription (Medical Typist Correspondence Letters)
  - o 8 pages were added to the ieMR
- Consumer Integrated Mental Health and Addiction (CIMHA)
  - No records were located.

After reviewing the downloaded documents, it was found that no documents in relation to 'Covid Vaccination Clinic' had been located. Enquiries and further searches and investigations were made throughout the [Health Service] and it was discovered that whilst there were vaccination clinics run on the [Hospital] campus, these services were run separately at a state-wide level. The [Health Service] are not the data custodians of this information, and accordingly we were advised that this information was held by the Vaccine Operation Centre (VOC). This information was provided to [the applicant] in the decision notice along with the VOC's contact details...

27. Given the role of the Vaccine Operation Centre, 43 it appeared unlikely that it would hold Vaccination Documents. Further, given the Health Service's explanation to OIC that it was not the custodian of Vaccination Documents because the COVID-19 vaccination clinics were run separately at a state-wide level, it appeared likely that the Department of Health may hold the relevant records.44 I therefore made enquiries with the Department of Health in this regard.45 In response, the Department of Health advised

<sup>39</sup> Letter dated 5 May 2022 from the Clinical Director – Medical Services Group of the Health Service to the applicant.

<sup>&</sup>lt;sup>40</sup> Applicant's email dated 30 October 2022.

<sup>&</sup>lt;sup>41</sup> Dated 12 September 2022.

<sup>&</sup>lt;sup>42</sup> By letter dated 28 October 2022.

<sup>&</sup>lt;sup>43</sup> Stated at https://www.health.gov.au/our-work/covid-19-vaccine-operations#about-the-vaccine-operations-centre.

<sup>&</sup>lt;sup>44</sup> Section 8 of the *Hospital and Health Board Act* 2011(Qld) states that Queensland's public sector health system is comprised of various Hospital and Health Services (ie statutory bodies which are the principal providers) and the Department of Health.

<sup>&</sup>lt;sup>45</sup> Email to Queensland Health dated 2 August 2023.

that [a]ssuming the applicant has a vaccination record in the Queensland COVID-19 Vaccination Management Solution (QCVMS), the [Department of Health's] Health Contact Centre (HCC) have access and formal delegated responsibility to retrieve information upon request'. 46 I conveyed this advice to both the Health Service and the applicant. 47 The Health Service did not respond. The applicant's response, which included the following, appears to acknowledge that the Vaccination Documents are held by the Department of Health: 48

The vaccination records... are missing because no one reported me swelling up at the clinic. According to [the Clinical Director – Medical Services Group of the Health Service], no one saw anything, yet on the very day it happened i put the events into writing to numerous people and **it's also on record at 13 Health.** 

[sic, my emphasis]

28. Given the explanation regarding the Department of Health's Health Contact Centre along with the extent of the Health Service's searches, I am satisfied that the Vaccination Documents are documents of the Department of Health. They are nonexistent as documents of the Health Service for the purpose of access applications under the IP Act, in that they are not in the possession or control of the Hospital, nor the Health Service more broadly. Accordingly, I find that the Vaccination Documents are outside the scope of the application to the Health Service.

# **Complaint Documents**

- 29. The applicant considers that the Health Service should have located Complaint Documents in response to her application. In this regard, she pointed to the fact that one of the Letters provided by her<sup>49</sup> 'states that I have had communication from patient liaison "several times" I would like to know what this is and be provided with the documentation please'.<sup>50</sup>
- 30. In response to the absence of Complaint Documents, the Health Service:51
  - advised that it had consulted with the applicant to give her an opportunity to make her application compliant – however this related to providing evidence of her identity,<sup>52</sup> not giving sufficient information concerning the requested documents to enable the Health Service to identify them<sup>53</sup>
  - stated that –

On the 8 August 2022, certified ID was received from [the applicant] by this office and her application became compliant on same date. She was sent an acknowledgement letter on the 9 August 2022 ...

As [the applicant's] application was considered to be a standard request for medical records, and as the departments and documents listed on her application would form part of a person's medical record, the acknowledgement letter that was sent to [the applicant] on the 9 August 2022 outlined her scope to be:

'Medical Records - Sunshine Coast University Hospital'.

<sup>&</sup>lt;sup>46</sup> Email from Queensland Health dated 25 August 2023.

<sup>&</sup>lt;sup>47</sup> Emails dated 4 September 2023.

<sup>&</sup>lt;sup>48</sup> Email dated 12 September 2023.

<sup>&</sup>lt;sup>49</sup> Letter dated 28 June 2022 from the A/Chief Executive of the Health Service to the applicant.

<sup>&</sup>lt;sup>50</sup> Applicant's email dated 30 October 2022.

<sup>&</sup>lt;sup>51</sup> By letter dated 28 October 2022 and telephone call on 30 November 2022.

<sup>&</sup>lt;sup>52</sup> Section 43(3) of the IP Act.

<sup>&</sup>lt;sup>53</sup> Section 43(2)(b) of the IP Act.

Throughout these communications with [the applicant], there has been no indication that she was requesting specific [Complaint Documents].

### also submitted –

It is not standard practice for our office to search outside the above health information systems unless the applicant specifically asks for documentation other than medical records. Without being able to verbally contact [the applicant] to discuss the scope of her application, her reference to 'Hospital Admin' was interpreted by this office to be administrative documentation held within her medical record. For example, registration sheets, Patient Electoral Forms (PEF) filed in our various health information systems.

- confirmed that it confined its searches to medical records not only because of the types of documents listed by the applicant in the access application, but also because the applicant stated that she was applying for documents of the Hospital specifically, rather than the Health Service as a whole.
- 31. I note that the application requested documents from the Hospital (that is, one of a number of hospitals and services provided by the Health Service) rather than the Health Service as a whole. However, I also note that complaints regarding the Hospital (along with the other hospitals and services provided by the Health Service<sup>54</sup>) are dealt with by the Health Service as a whole not by the Hospital. This is evident on the face of the Letters received by the applicant and provided to OIC,<sup>55</sup> which are consistent with the Health Service's submissions in this matter and a recent organisational chart.<sup>56</sup>
- 32. I further note that the subject matter identified in the application largely specified different types of the Hospital's medical records (that is, 'Covid vaccination clinic', 'Emergency Dept', 'Immunology', and 'Cardiology'). Within this context, the request for 'Hospital admin' (my emphasis) appears to refer request the Hospital's administrative documents within these medical records. While the opening comment and final dot point regarding the subject matter of the applicant's application are broad ('My whole file' and 'Everything you have') are broad and general, they cannot, in my opinion, reasonably be interpreted as expanding the scope of the access application beyond specified categories of documents at an identified location (ie medical records held by the Hospital) to include a new, unspecified category of documents (ie Complaint Documents held by the Health Service as a whole).
- 33. I recognise that an individual unfamiliar with the governance structures and processes of agencies such as the Health Service, relative to parts of it such as the Hospital, may consider the distinction between the two to be overly technical. However, in the particular circumstances of this review, there is nothing before me to suggest that, when the Hospital consulted the applicant to obtain evidence of her identity, it should have also consulted her about the terms of her request. Rather, the applicant's request appeared to contain sufficient information regarding the documents sought for the Health Service to identify them. I am unable to identify any ambiguity or imprecision on the face of the application to alert the Health Service that the applicant's specification of the Hospital, rather than the Health Service, was inadvertent; or, importantly, that she had omitted to mention Complaints Documents in her description of the documents sought by her. I do not consider that the inclusion of broad, general phrases such as 'My whole file' and 'Everything you have', alongside specified types of medical records, can reasonably be

<sup>56</sup> At page 21 of the Annual Report at footnote 54 above.

<sup>&</sup>lt;sup>54</sup> See Sunshine Coast Hospital and Health Service, *Annual Report 2021-22* available at <a href="https://www.sunshinecoast.health.gld.gov.au/">https://www.sunshinecoast.health.gld.gov.au/</a> data/assets/pdf file/0021/103926/schhs-annual-report-2022.pdf at pages 9-10.

<sup>&</sup>lt;sup>55</sup> Noting that the Letters were sent by officers of the Health Service (namely the A/Chief Executive and Clinical Director – Medical Services Group) and sent using letterhead which referred to the Health Service rather than the Hospital.

construed as obligating the Health Service to clarify whether the applicant's request was intended to cover any further specific types of records such as Complaints Documents.

- 34. Accordingly, I consider that the applicant's direction of her request to the Hospital, and her description of the documents sought, set the parameters for the Health Service's response and the direction of its search efforts.<sup>57</sup> I therefore conclude that the terms of the application confined its scope to the applicant's medical records at the Hospital, and find that the Health Service did not fail to locate the Complaints Documents; rather, they are outside the scope of the application.
- 35. As a final observation, I note that the Health Service's searches of the Hospital's medical records to locate responsive documents may not have alerted the Health Service to the existence of the Complaint Documents in any event. The two Letters provided by the applicant indicate that her concerns related to the Hospital's treatment of her following the administration of a COVID-19 vaccination. Given this, it is reasonable to assume that, if the applicant's complaints were recorded anywhere prior to being lodged with the Health Service's Patient Liaison Officer, they would be recorded in the Vaccination Documents that is documents which, as set out above, I am satisfied are held by the Department of Health, rather than the Health Service.

#### **DECISION**

- 36. For the reasons set out above, I vary the Health Service's decision and find that:
  - Vaccination Documents are not documents of the Health Service, and are therefore outside the scope of the application to the Health Service;<sup>58</sup> and
  - Complaints Documents are outside the scope of the application, as the terms of the application confined its scope to the applicant's medical records at the Hospital.<sup>59</sup>
- 37. I have made this decision as a delegate of the Information Commissioner, under section 139 of the IP Act.

A Rickard A/Right to Information Commissioner

Date: 5 October 2023

<sup>59</sup> Section 43(1) of the IP Act.

<sup>&</sup>lt;sup>57</sup> Cannon at [8], cited in O80PCE at [33] and Lonsdale at [9].

<sup>&</sup>lt;sup>58</sup> Section 12 of the RTI Act, which applies by virtue of section 13 of the IP Act, and section 43(1) of the IP Act.

# **APPENDIX**

# Significant procedural steps

Date	Event
10 October 2022	OIC received an email from the applicant seeking external review.
14 October 2022	OIC requested preliminary documents from the Health Service.
19 October 2022	OIC received preliminary documents from the Health Service.
25 October 2022	OIC advised the applicant and the Health Service that the application for external review had been accepted.
	OIC requested submissions and search records from the Health Service.
28 October 2022	OIC received the requested submissions and search records from the Health Service.
30 October 2022	The applicant made written submissions to OIC.
30 November 2022	The Health Service made verbal submissions to OIC.
2 March 2023	OIC conveyed a preliminary view to the applicant.
14 March 2023	The applicant requested an extension of time to consider OIC's preliminary view and made verbal submissions to OIC.
16 March 2023	OIC granted the applicant an extension of time.
19 March 2023	The applicant made written submissions to OIC.
24 March 2023	OIC wrote to the applicant to clarify the issue for determination and to outline the next steps.
26 March 2023	The applicant made further written submissions and requested OIC make a formal decision to finalise the review.
2 August 2023	OIC wrote to the Department of Health and asked it to provide information relevant to the view.
25 August 2023	The Department of Health provided a response to OIC.
4 September 2023	OIC wrote to the applicant to provide her with a summary of OIC's view and provide a final opportunity to make submissions.  OIC also wrote to the Heath Service to advise it of the Department
40 Comtourb or 0000	of Health's response and give it an opportunity to respond.
12 September 2023	The applicant made further written submissions.
13 September 2023	OIC wrote to the applicant to explain that seeking amendment of documents or making a privacy complaint required her to commence separate processes.
14 September 2023	The applicant made further written submissions.