



## Decision and Reasons for Decision

---

<b>Citation:</b>	<b>W76 and Office of the Health Ombudsman [2026] QICmr 17 (5 February 2026)</b>
<b>Application Number:</b>	<b>318530</b>
<b>Applicant:</b>	<b>W76</b>
<b>Respondent:</b>	<b>Office of the Health Ombudsman</b>
<b>Decision Date:</b>	<b>5 February 2026</b>
<b>Catchwords:</b>	<b>ADMINISTRATIVE LAW - RIGHT TO INFORMATION - REFUSAL OF ACCESS - application for documents about an investigation into a complaint made by the child applicant's parent including submissions and attachments provided by the subjects of the complaint to OHO - personal information of other individuals - prejudice flow of information - whether disclosure would, on balance, be contrary to the public interest - section 67(1) of the <i>Information Privacy Act 2009</i> (Qld) and sections 47(3)(b) and 49 of the <i>Right to Information Act 2009</i> (Qld)</b>

## REASONS FOR DECISION

### Summary

1. A parent applied under the *Information Privacy Act 2009* (Qld) (**IP Act**),<sup>1</sup> on behalf of their child (**child applicant**),<sup>2</sup> to the Office of the Health Ombudsman (**OHO**) for documents relating to a complaint made by the parent to OHO about two health practitioners.<sup>3</sup> The parent requested access to submissions prepared by the health practitioners to OHO regarding their child, who has a recognised disability.
2. OHO located 370 pages and, after consulting with the health practitioners, in its initial decision<sup>4</sup> decided to give access to 144 pages, partial access to 107 pages and refuse

---

<sup>1</sup> On 1 July 2025 key parts of the *Information Privacy and Other Legislation Act 2023* (Qld) (**IPOLA Act**) came into force, effecting changes to the IP Act and *Right to Information Act 2009* (Qld) (**RTI Act**). As the applicant's application was made before this change, the IP Act and RTI Act **as in force prior to 1 July 2025** remain applicable to it. This is in accordance with transitional provisions in Chapter 8, Part 3 of the IP Act and Chapter 7, Part 9 of the RTI Act, which require that applications on foot before 1 July 2025 are to be dealt with as if the IPOLA Act had not been enacted. Accordingly, references to the IP Act and RTI Act in this decision are to those Acts **as in force prior to 1 July 2025**.

<sup>2</sup> The parent of a child made the application on the child's behalf. In accordance with section 45 of the *Information Privacy Act 2009* (Qld) (**IP Act**), an access application may be made for a child, by the child's parent. However, pursuant to schedule 5 of the IP Act, the child (and not the parent) is the applicant.

<sup>3</sup> Application dated 23 October 2024.

<sup>4</sup> Initial decision dated 22 January 2025.

access to 119 full pages.<sup>5</sup> The parent applied for internal review of OHO's initial decision.<sup>6</sup> OHO's internal review decision<sup>7</sup> affirmed the original decision.

3. The parent, on behalf of the child applicant, applied to the Office of the Information Commissioner (**OIC**) for external review of OHO's internal review decision,<sup>8</sup> particularly seeking access to annexures to the submissions provided by each health practitioner to the OHO in response to the complaint made against them (**Information in Issue**) because *'[i]t gives us great concern as to what may be written in the sections that have been withheld and the likelihood of them being incorrect, misleading, or unfairly subjective. Sadly the OT's have continued to refuse to meet or communicate with us and refuse to share any of their reports regarding [child applicant]'*.
4. For the reasons set out below, I affirm OHO's internal review decision and find that access to the Information in Issue may be refused on the ground that its disclosure would, on balance, be contrary to the public interest.
5. In making this decision, I have considered evidence, submissions, legislation and other material as set out in these reasons.<sup>9</sup> I have also had regard to the *Human Rights Act 2019* (Qld) (**HR Act**), particularly the right to seek and receive information<sup>10</sup> and the prohibition for children and persons with disabilities to be treated unfairly and in doing so, have acted in accordance with section 58(1) of the HR Act.<sup>11</sup>
6. In the circumstances of this case, the applicant seeks access to submissions provided by health practitioners concerning the child applicant, who has a recognised disability. The presence of a disability is a relevant factor in the assessment of whether disclosure of information is appropriate, particularly when the information contains sensitive health, developmental, or behavioural details. In making this decision, I have taken into account the provisions of the HR Act as mentioned in previous paragraph, and also that services to children with disabilities should be provided in a way that respects their dignity, rights, and take account of their individual needs and vulnerabilities under the *Disability Services Act 2006*.

### Information in Issue

7. The specific Information in Issue in this review appears in attachments and annexures to the submissions obtained from the health practitioners by the OHO and includes:
  - correspondence and communications between the health practitioners and other individuals that comprises the personal information of the child applicant and other individuals (**Intertwined Information**)
  - occupational therapy assessments prepared by the health practitioners (**OT Assessments**); and
  - incidental references to other individuals<sup>12</sup> and contact details such as email/residential addresses and telephone numbers (**Third Party Information**).

---

<sup>5</sup> Full access to 16 pages and 99 part pages initially deferred, were released to the applicant with the internal Review decision.

<sup>6</sup> Internal review application dated 10 February 2025.

<sup>7</sup> Dated 10 March 2025. This is the reviewable decision in this external review.

<sup>8</sup> External review application dated 26 March 2025.

<sup>9</sup> Including footnotes.

<sup>10</sup> Section 21 of the HR Act.

<sup>11</sup> OIC's approach to the HR Act set out in this paragraph has been considered and endorsed by the Queensland Civil and Administrative Tribunal in *Lawrence v Queensland Police Service* [2022] QCATA 134 at [23].

<sup>12</sup> Including basic contact details of the health practitioners, school staff, OHO and AHPRA staff.

## Relevant law

8. Under the IP Act, an individual has a right to be given access to documents in the possession or under the control of an agency to the extent they contain their personal information.<sup>13</sup> While the legislation is to be administered with a pro-disclosure bias,<sup>14</sup> the right of access is subject to certain limitations, including grounds for refusing access, as set out in the IP Act and RTI Act.<sup>15</sup> Relevantly, access to information may be refused where its disclosure would, on balance, be contrary to the public interest.<sup>16</sup>
9. The term *public interest* refers to considerations affecting the good order and functioning of the community and government affairs for the well-being of citizens. This means that in general, a public interest consideration is one which is common to all members of, or a substantial segment of, the community, as distinct from matters that concern purely private or personal interests.<sup>17</sup>
10. The RTI Act explains the steps that the decision-maker must take in deciding the public interest<sup>18</sup> and identifies factors in Schedule 4 that may be relevant to deciding the balance of the public interest. I have considered all these factors, together with other relevant information in reaching my decision, and discuss relevant factors below.

## Submissions

11. The parent's submissions discuss a range of issues associated with their negative experience with the healthcare providers and other educational entities due to lack of communication and information regarding support required for the child applicant. The parent considers that the child applicant has been treated unfairly and that the health practitioner's assessments have been discriminatory and submits:<sup>19</sup>
  - the Information in Issue has not been accessible. Without seeing the OT Assessments, they have no way of knowing whether the assessments are incorrect, misleading, or unfairly subjective
  - the need for parental access to information to ensure accuracy of professional assessments
  - concerns about the conduct and administration of the two health practitioners. Disclosure of the requested information could assist inquiry into the conduct of the health practitioners
  - the OT Assessments are not private information as were created in a professional capacity. Health practitioners are bound by professional obligations to provide information
  - the RTI framework exists precisely so complainants can scrutinise the material used to reach a conclusion particularly where professional reports shape a child's safety, mobility, and education
  - there is no evidence that releasing redacted professional annexures to a complainant reduces cooperation; and
  - a complaint has been made with the Human Rights Commission and that court proceedings are currently on foot.<sup>20</sup>

---

<sup>13</sup> Section 40 of the IP Act.

<sup>14</sup> Section 64 of the IP Act.

<sup>15</sup> Section 67(1) of the IP Act and section 47 of the RTI Act. Those grounds are however, to be interpreted narrowly: see section 67(2) of the IP Act.

<sup>16</sup> Sections 47(3)(b) and 49 of the RTI Act.

<sup>17</sup> However, there are some recognised public interest considerations that may apply for the benefit of an individual.

<sup>18</sup> Section 49(3) of the RTI Act.

<sup>19</sup> External review applicant dated 26 March 2025 and submissions dated 2 December 2025.

<sup>20</sup> Internal review application dated 10 February 2025 and external review application dated 26 March 2025.

## Findings

### **Irrelevant factors**

12. I have not taken any irrelevant public interest factors into account in making this decision.

### **Factors favouring disclosure**

13. The RTI Act recognises that public interest factors favouring disclosure will arise where the information is the applicant's personal information<sup>21</sup> and also if disclosing the information could reasonably be expected to:

- promote open discussion of public affairs and enhance the Government accountability<sup>22</sup>
- reveal the reason for a government decision and any background or contextual information that informed the decision<sup>23</sup>
- reveal that information was incorrect, out of date, misleading, gratuitous, unfairly subjective or irrelevant;<sup>24</sup> and
- allow or assist with inquiry into possible deficiencies in the conduct or administration of an agency or official.<sup>25</sup>

14. Given the OHO investigation relates to allegations and complaints made by the parent about the health practitioners and their involvement with the child applicant, the Information in Issue contains the child applicant's personal information. I afford significant weight to this factor favouring disclosure.

15. I am satisfied transparency and accountability in agency operations and decision making extends to investigations conducted by OHO when determining what action to take following complaints made by members of the public. I accept that disclosure of the Information in Issue would provide the child applicant with a more comprehensive understanding of the background/contextual information that was available to OHO, and the Australian Health Practitioners Registration Agency (AHPRA),<sup>26</sup> in making decisions in connection with their complaints, and some further details about the decision making process.

16. In considering the weight to be attributed to these factors, it is relevant that OHO granted the child applicant access to considerable information in response to the access application, including substantial information from the health practitioners' submissions. In relation to the information released by OHO, the parent indicated that *[w]e are grateful to have received the information that you released to us. It has helped shed some light on where the things appear to have gone awry with the OT's that led to our complaint with AHPRA. We have found multiple discrepancies between what the OT's have reported in these documents and what we know to have occurred'*.<sup>27</sup>

17. The parent submits that *'the RTI framework exists precisely so complainants can scrutinise the material used to reach a conclusion particularly where professional reports shape a child's safety, mobility, and education'*. While I acknowledge that obtaining access to the Information in Issue could give the parent a more comprehensive

<sup>21</sup> Schedule 4, part 2, item 7 of the RTI Act.

<sup>22</sup> Schedule 4, part 2, Item 1 of the RTI Act.

<sup>23</sup> Schedule 4, part 2, item 11 of the RTI Act.

<sup>24</sup> Schedule 4, part 2, item 12 of the RTI Act.

<sup>25</sup> Schedule 4, part 2, item 5 of the RTI Act.

<sup>26</sup> OHO receives all complaints about health practitioners in Queensland, but in dealing with a complaint, OHO has the discretion to refer certain complaints to AHPRA to manage.

<sup>27</sup> Email correspondence dated 26 March 2025.

understanding of the reasons provided by the health practitioners to the educational entity regarding their recommended approach, the public interest in accountability and transparency do not extend to affording complainants a right to reinvestigate OHO's investigations. Given that the Information in Issue reveals only information provided by third parties to OHO, rather than steps taken by OHO regarding such information and that considerable information, including a summary of the health practitioners recommendations regarding the child applicant has already been released, I am satisfied that disclosure of the Information in Issue is not likely to further advance, to any significant degree, the accountability and transparency factors. In considering the weight to be attributed to these factors, it is relevant that:

- OHO has assessed the evidence available throughout its investigation (including the health provider's submissions and supporting information), has addressed the parent's complaints and has provided with outcome advice and reasons for its decision in relation to each complaint raised; and
- OHO's notification also identified another complaint avenue which was open to the parent if dissatisfied with OHO's decision.

18. For these reasons, in the circumstances of this review, I find that the accountability and transparency factors warrant moderate weight.
19. The parent submits that some of the Information in Issue may be incorrect and contested the accuracy of the OT Assessments. Given the nature of the Information in Issue and the context in which it appears, particularly in the circumstances how such information was provided to the OHO – that is, as annexures of a submission prepared by the subject officers – it comprises, by its very nature, the supporting evidence to the opinions and versions of events expressed by relevant individuals in their submissions. This inherent subjectivity does not mean that the Information in Issue is necessarily incorrect or unfairly subjective.<sup>28</sup> Whilst the parent may be dissatisfied with the OHO's investigation process and outcome, having reviewed the Information in Issue *itself*, there is no evidence before me to establish that such information is incorrect or misleading in nature.
20. In the circumstances of this case, the health practitioners, as private health service employees, were engaged by an educational entity to provide an assessment regarding the transfer process involved for the child applicant to attend school and to make recommendations of any changes required. The health practitioners provided their assessment that the then current practice was not suitable for the school environment and did not align with standard practices regarding a particular process involving the child. The parent did not agree with the health practitioner's approach which resulted in a complaint made to the OHO. In their submissions to OHO, the health practitioners provided their explanations as to why the parent's preferred method did not align with standard practices and such information has been released to the applicant.<sup>29</sup> OHO has completed their investigation and, whilst the parent may not agree with such assessment or recommendations, the OHO outcome of the investigation did not find any performance issues in the health provider's actions.
21. For these reasons, I do not consider that disclosure of the Information in Issue could reasonably be expected to reveal that it is incorrect, out of date, misleading, gratuitous, unfairly subjective or irrelevant. Accordingly, I afford this factor favouring disclosure low to no weight.

<sup>28</sup> *Marshall and Department of Police* (Unreported, Queensland Information Commissioner, 25 February 2011) (**Marshall**) at [15]-[20].

<sup>29</sup> E.g. submissions from health practitioner to OHO dated 23 September 2024 part access to pages 4 to 8.

22. While the parent has a legitimate interest in accessing information to support the child's care, this must be balanced against the impact of disclosure given the nature of the Information in Issue and the context in which it appears— particularly in the circumstances how such information was provided to the OHO.
23. The parent has raised concerns about the conduct and administration of the two health practitioners and submits that disclosure of the requested information could assist inquiry into the conduct of the health practitioners. I have carefully considered the Information in Issue, together with the information which has been released by the OHO and, in the circumstances, there is nothing before me to suggest that disclosure of information could reasonably be expected to allow or assist with inquiry into any inappropriate conduct on the part of OHO or the health practitioners. I also note, in any event, that the parent may raise any concerns they may have about deficiencies in the conduct of relevant staff with relevant integrity bodies without accessing the Information in Issue. For these reasons, I afford this factor favouring disclosure low to no weight.
24. I have carefully considered the remaining factors favouring disclosure listed in schedule 4, part 2, of the RTI, and factors favouring disclosure more generally, given the factors listed in schedule 4 are not exhaustive. For example, when information is the personal information of a child and the applicant is their parent, it is possible that a factor regarding the child applicant's best interests<sup>30</sup> may apply. However, in this matter the applicant is the child, on whose behalf the parent is acting, not the parent themselves – and accordingly this factor does not apply. I have also considered whether a factor which is *not* listed in schedule 4, part 2 – about disclosure to a child represented by the parent advancing the child's best interests – may apply. I acknowledge that the applicant's parent would consider this to be so, but must conclude there is insufficient probative material before me to support such a finding.
25. I can identify no other public interest considerations in favour of disclosure of the information in issue.

### ***Factors favouring nondisclosure***

26. The RTI Act recognises nondisclosure factors will arise where disclosing information could reasonably be expected to:
  - prejudice the protection of an individual's right to privacy<sup>31</sup>
  - cause a public interest harm if it would disclose personal information of a person, whether living or dead<sup>32</sup>
  - prejudice the fair treatment of individuals and the information is about unsubstantiated allegations of misconduct or unlawful, negligent or improper conduct<sup>33</sup>
  - prejudice the flow of information to law enforcement or regulatory agencies;<sup>34</sup> and
  - prejudice an agency's ability to obtain confidential information.<sup>35</sup>
27. On carefully reviewing the Information in Issue, I note that it comprises information received, obtained and prepared for the OHO Investigation. It is highly sensitive in nature, being information provided by and/or about private individuals (including their

---

<sup>30</sup> Schedule 4, part 2 item 8 of the RTI Act.

<sup>31</sup> Schedule 4, part 3, item 3 of the RTI Act.

<sup>32</sup> Schedule 4, part 4, item 6(1) of the RTI Act.

<sup>33</sup> Schedule 4, part 3, item 6 of the RTI Act.

<sup>34</sup> Schedule 4, part 3, item 13 of the RTI Act.

<sup>35</sup> Schedule 4, part 3, item 16 of the RTI Act.

observations, timelines and recollections of events) in relation to matters considered in the OHO Investigation.

28. Further, I am able to confirm that, where the Information in Issue is the personal information of the child applicant, as well as other individuals (Intertwined Information), the personal information of the applicant is intertwined with the personal information of other individuals in a way that it is not possible to separate the child applicant's personal information from the personal information of those other individuals. In these circumstances, I consider that releasing the child applicant's personal information would necessarily disclose the personal information of other individuals and could reasonably be expected to prejudice the protection of those individuals' right to privacy and cause a public interest harm.
29. Similarly, in relation to the Third Party Information, I consider that the extent of the harm in disclosing this information under the IP Act is very significant, due to the nature of the information and the impact this would have on those individuals' privacy.
30. Accordingly, in relation to the Intertwined Information and the Third Party Information, I afford the privacy factor and the harm factor substantial weight.
31. In relation to the OT Assessments, I accept that they were prepared by the health practitioners within their professional capacity. However, I also note that they were provided to the OHO in the context of investigating complaints about their professional conduct. Those complaints were ultimately unsubstantiated. When OHO informed the parent of its decision about the complaints, OHO also provided an overview of AHPRA's investigation decision. In both matters, OHO decided to take no further action against the health providers.
32. The RTI recognises that if disclosing information could reasonably be expected to prejudice the fair treatment of individuals as the information is about unsubstantiated allegations of misconduct or unlawful, negligent or improper conduct, a public interest factor favouring nondisclosure arises.<sup>36</sup> Given the nature of the Information in Issue and OHO's findings in relation to the allegations, I consider this public interest factor weighs strongly against disclosure as the Information in Issue relates to unsubstantiated allegations and has the potential to adversely affect the reputation of the subject individuals if disclosed.
33. In the circumstances of this case, I note that considerable information from the health providers' submissions has already been released to the child applicant including their reasons and explanations as to why in their view, the parent's proposed transfer process did not align with standard manual handling practices and therefore, the parent has had the opportunity to scrutinise and discuss a summary of the evidence taken into account by OHO.
34. Provided disclosure under the RTI Act does not impose any limitations on its further reproduction, disclosure of the Information in Issue, particularly as it relates to unsubstantiated allegations, '*could reasonable be expected to*' cause reputational damage and adversely affect the current and future employment of the health practitioners. I consider that the public interest weighs strongly against disclosing information relating to unsubstantiated allegations as to do so may result in the unfair treatment of the individuals about whom the complaint was made. For these reasons, I afford this factor significant weight.

---

<sup>36</sup> Schedule 4, part 3, item 6 of the RTI Act.

35. The parent submits *'the allegations were not substantiated because OHO reviewed documents I am not allowed to see... I cannot see those documents because the allegations were not substantiated. This reasoning undermines transparency and procedural fairness.'*<sup>37</sup> While I understand the reasons why the parent wishes to access the Information in Issue, the procedural fairness component of natural justice does not require an agency to give each party to a complaint equal transparency. Rather, it is about giving the accused party/subject of a complaint reasonably sufficient information to respond to allegations. In this case, the parent was the complainant, not the subject of the complaint. As such, the procedural fairness has been granted by releasing a summary of the submissions, recommendations and outcomes of OHO and AHPRA investigations, which the child applicant has already received from OHO.
36. The parent submits that *'[t]he "future supply of information" argument is speculative and over-relied upon... The RTI Act requires more than speculation. The Queensland Civil and Administrative Tribunal has repeatedly held that: There must be real and substantial grounds, not hypothetical concerns Agencies with statutory powers cannot rely on vague fears that professionals may be "less forthcoming".'*<sup>38</sup>
37. The words *'could reasonably be expected to'* require a decision-maker to make a judgment about whether something is reasonable, as distinct from something that is irrational, absurd or ridiculous; to distinguish between an expectation that is reasonably based, and the expectation of an occurrence that is merely a possibility, speculative, conjectural or hypothetical.<sup>39</sup>
38. The issue to consider is whether it is reasonable to expect that disclosure of the Information in Issue will prejudice an agency's future ability to obtain confidential information of this type from sources generally.
39. In the circumstances of this case, the OT Assessments were prepared by private-sector health professionals engaged by a private educational entity and provided to the OHO for investigation purposes. These reports are confidential professional communications containing the OT's opinions and recommendations provided to OHO as supporting documents in response to a complaint. Accordingly, it is reasonable to expect that disclosure of the Information in Issue under the IP Act may result in health service staff being reluctant to provide further information to OHO. This would negatively impact the OHO's investigative processes.
40. The information before OIC suggests that the OT Assessments were provided in a cooperative manner, rather than compelled. I consider it is reasonable to expect that disclosure of information of the type that is in issue would prejudice OHO's future ability to obtain confidential information. This would, in turn, have a negative impact on the ability of OHO to collect information that may assist in effectively investigating complaints. Given that the issue in this case concerned the performance of health practitioners and the manner in which such information appears within the Information in Issue, I afford this factor significant weight.
41. If disclosing information could reasonably be expected to prejudice the flow of information to law enforcement or regulatory agencies, a public interest factor favouring nondisclosure arises.<sup>40</sup>

---

<sup>37</sup> Submissions dated 2 December 2025.

<sup>38</sup> Submissions dated 2 December 2025.

<sup>39</sup> *Attorney-General's Department v Cockcroft* (1986) 64 ALR 97 at 106; *Murphy and Treasury Department* (1995) 2 QAR 744 at paragraph 44, citing *Re B and Brisbane North Regional Health Authority* (1994) 1 QAR 279 at paragraph 160 (**B and BNRHA**).

<sup>40</sup> Schedule 4, part 3, item 13 of the RTI Act.

42. It is generally recognised that there is very strong public interest in protecting the free flow of information to law enforcement and regulatory agencies.<sup>41</sup> Further, efficient and effective use of public resources is facilitated by OHO being able to seek and obtain information from members of the community, whether they are complainants, witnesses, or the subjects of complaint. Routinely disclosing these types of information would tend to discourage persons from coming forward with relevant information or providing information at OHO's request. In the circumstances of this review, I am satisfied that this is the case in terms of the individuals who provided further information in the ensuing OHO Investigation. If this occurred, I consider it reasonable to expect that this would, in turn, detrimentally effect OHO's ability to effectively discharge its functions.
43. Most of the Information in Issue includes, references and reflects information which was obtained from the health providers. For similar reasons as the precedent factor, it is reasonable to expect that these individuals provided information confidentially to OHO in order to respond to the complaints made against them. I do not consider that these individuals would have contemplated that their provided attachments to their submissions would be disclosed under the IP Act. I therefore afford this factor favouring nondisclosure very significant weight.

### ***Balancing the public interest***

44. For the reasons set out above, I consider that the accountability and transparency factors favouring disclosure of the Information in Issue warrant moderate weight. I also consider that significant weight favouring disclosure should be afforded to those parts of the Information in Issue that comprise the child applicant's personal information. In terms of the remaining factors favouring disclosure, I consider that these should be given no to low weight.
45. On the other hand, in relation to the Intertwined Information and the Third Party Information, I consider that the personal information and privacy factors should be afforded substantial weight. In relation to the OT assessments, I consider that the factor about fair treatment, relating to prejudice to the flow of information to regulatory agencies and prejudice OHO's ability to obtain confidential information warrant very significant weight as well.
46. While I recognise that the parent has a legitimate interest in accessing information about the child applicant, on balance, I am satisfied that, in the circumstances of this review, the factors favouring nondisclosure warrant greater weight, and outweigh the factors favouring disclosure.

### **DECISION**

47. For the reasons set out above, I affirm the reviewable decision<sup>42</sup> and find that disclosure of the Information in Issue would, on balance, be contrary to the public interest<sup>43</sup> and access can be refused on that basis.<sup>44</sup>

---

<sup>41</sup> See for example: *P6Y4SX and Queensland Police Service* [2015] QICmr 25 (11 September 2015), *P6Y4SX and Department of Police* (Unreported, Queensland Information Commissioner, 31 January 2012), *SW5Z7D and Queensland Police Service* [2016] QICmr 1 (15 January 2016) and *Marshall*.

<sup>42</sup> Under section 123(1)(a) of the IP Act.

<sup>43</sup> Under section 49 of the RTI Act.

<sup>44</sup> Under section 67(1) of the IP Act and section 47(3)(b) of the RTI Act.

48. I have made this decision under section 123 of the IP Act as a delegate of the Information Commissioner, under section 139 of the IP Act.



---

**K Zaidiza**  
**Manager, Right to Information**

**Date: 5 February 2026**