PRIVACY IMPACT ASSESSMENT

AI scribe in consultations

Example Clinic

Person in charge of the protection of personal information
Camille Example, Executive Director

Project
AI scribe in consultations

Project type
Adoption of an artificial intelligence tool

Date
September 24, 2026

Version
1

High
Depth of the assessment

5
Findings
3 gaps, 2 to confirm

1
Priority risks
high severity and likelihood

1
Vendors outside Québec

6
Measures

1 Purpose and scope

The physicians at Example Clinic wish to adopt an artificial intelligence scribe for use during consultations. The tool listens to the consultation, transcribes it and proposes a clinical note. The physician then reviews, corrects and files the note in the electronic medical record. The scribe is a cloud service provided by an American vendor. Example Clinic is undertaking the project for two reasons: to produce the clinical note for each consultation, and to reduce the time physicians spend on data entry. The information is not intended to be used for any other purpose.

This assessment covers the personal information the scribe handles. For patients, this means the audio recording of the consultation, the transcript and the clinical note, all of which are health information. For staff, it means the name and identifier of the physicians who use the tool. The project could involve between 100 and 10,000 persons. The assessment follows the information from its collection during the consultation, through its processing by the scribe vendor, to its filing in the electronic medical record. It does not examine the general operation of the electronic medical record beyond receiving and keeping the note. The tool does not make decisions about patients: the physician reviews and approves every note before it is filed.

Under the fourth paragraph of section 3.3 of the LPRPSP, the assessment is proportionate to the sensitivity of the information, the purposes of its use, its quantity, its distribution and the medium on which it is stored. On those factors, this assessment is carried out at a high level of detail.

- LPRPSP: Act respecting the protection of personal information in the private sector (CQLR, c. P-39.1).
- LRSSS: Act respecting health and social services information (CQLR, c. R-22.1).

2 Personal information concerned

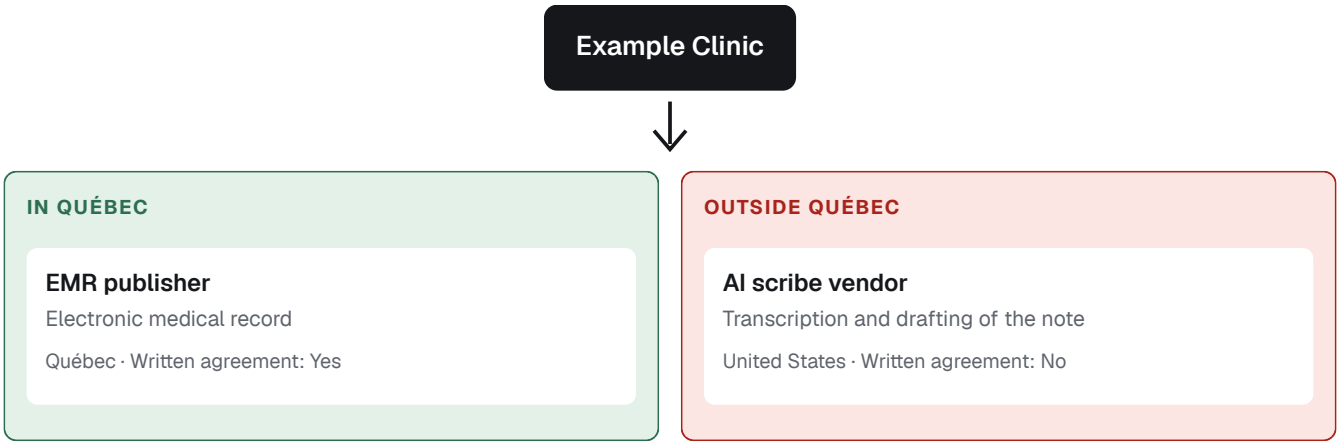
Information	Nature	Persons concerned
Audio recording of the consultation	Health	Patients
Transcript and clinical note	Health	Patients
Name and identifier of the physicians	Employment	Staff

Factor (s. 3.3)	Finding
Sensitivity	high
Purpose	Write the clinical note for the consultation; Reduce the time physicians spend on data entry
Quantity	100 to 10,000 persons
Distribution	At least one processing outside Québec
Medium	Cloud

3 Data flows

The information is collected from patients during the consultation, when the scribe records the conversation between the patient and the physician. At present, patients are not informed that the tool is being used. The audio recording is sent to the scribe vendor's cloud service, which processes it in the United States. The vendor transcribes it and drafts a proposed clinical note. The name and identifier of the physicians who use the tool are also part of the processing. No written agreement with the vendor has been signed yet. The vendor's documentation states that the audio recording is deleted after transcription, but no contract confirms this. How long the vendor keeps the transcript and the draft note remains to be confirmed.

The proposed note comes back to the physician, who reviews it, corrects it and files it in the electronic medical record. The record is provided by a publisher in Québec, and Example Clinic has a written agreement with that publisher. Within Example Clinic, access to the information is limited to the staff who need it. Whether access to the information is logged remains to be confirmed. No retention period has been defined yet for the information the project handles, and this remains to be confirmed.



Processing	Vendor	Location	In Québec	Written agreement
Transcription and drafting of the note	AI scribe vendor	United States	No	No
Electronic medical record	EMR publisher	Québec	Yes	Yes

4 Findings and risks

Findings

Gap — LPRPSP, ss. 17 and 18.3

No written agreement with AI scribe vendor, outside Québec

Section 17 requires that a communication outside Québec be the subject of a written agreement that takes the results of the assessment into account. Section 18.3 requires that the mandate or contract be in writing and specify the protection measures the vendor must take.

Answer: no

To confirm — LPRPSP, ss. 23 and 3.2

No retention period defined

Section 23 requires destroying or anonymising information once the purposes of its collection are achieved, and section 3.2 requires policies governing its retention and destruction.

Answer: does not know

Gap — LPRPSP, s. 8

Persons concerned not informed

Section 8 requires informing the person concerned, when the information is collected, of the purposes, the means and their rights, and where applicable of the third parties it is communicated to and of the possibility that it be communicated outside Québec.

Answer: no

Gap — LRSSS, s. 107

Register of technological products not published

Section 107 of the LRSSS requires entering every technological product or service used in a register, and publishing that register on the body's website.

Answer: no

To confirm

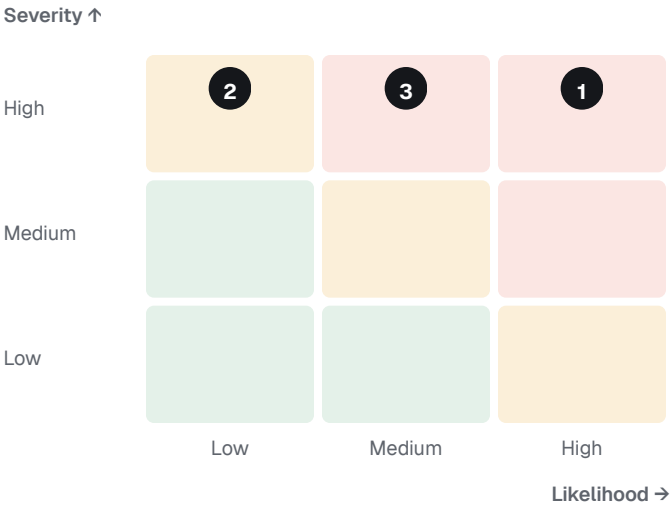
LRSSS, s. 103

Access to information not logged

Section 103 of the LRSSS requires logging every access to and use of the information by staff and professionals, and every communication of it.

Answer: does not know

Risks



1. Information processed outside Québec without adequate protection
2. Unauthorised access to the information
3. Retention longer than necessary

#	Risk	Severity	Likelihood	Sections
1	Information processed outside Québec without adequate protection	high	high	LPRPSP, s. 17
2	Unauthorised access to the information	high	low	LPRPSP, ss. 20 and 10
3	Retention longer than necessary	high	medium	LPRPSP, s. 23

5 Communication outside Québec

AI scribe vendor (Transcription and drafting of the note), United States

Factor (s. 17)	Finding
1. Sensitivity of the information	high
2. Purposes of its use	Transcription and drafting of the note. Write the clinical note for the consultation; Reduce the time physicians spend on data entry
3. Protection measures, including contractual ones	Written agreement: No
4. Legal framework of the State	The United States has no general federal privacy law. Protection varies by state and by sector, and government access regimes are broader than in Québec. These points describe the legal framework; they do not conclude that it is adequate.

The organisation's conclusion (to complete): section 17 allows the communication if the assessment establishes that the information would receive adequate protection, and requires a written agreement.

6 Measures adopted

The measures below follow from the characteristics of the project. For each one, the organisation states whether it is in place or planned, and who is responsible.

	In place	Planned	Responsible
Determine the purposes before collecting, and collect only the information necessary for them. LPRPSP, ss. 4 and 5	☐	☐	
Take reasonable security measures given the sensitivity, purposes, quantity, distribution and medium of the information. LPRPSP, s. 10	☐	☐	
Obtain the consent of the person having parental authority or the tutor before collecting information from a minor under 14, unless the collection is clearly for the minor's benefit. LPRPSP, s. 4.1	☐	☐	

	In place	Planned	Responsible
Sign a written agreement with each vendor outside Québec that takes the results of this assessment into account. LPRPSP, s. 17	☐	☐	
Inform the persons concerned, at collection, that their information may be communicated outside Québec. LPRPSP, s. 8	☐	☐	
Set out the procedure for confidentiality incidents, and record each incident in the incident register. LPRPSP, ss. 3.5 and 3.8	☐	☐	

7 Conclusion

The assessment identified five findings. There is no written agreement with the scribe vendor, which processes the information outside Québec. No retention period has been defined. Patients are not informed that the tool is used. The register of technological products has not been published. Whether access to the information is logged remains unknown. The main risk is that health information will be processed outside Québec without adequate protection, which was rated high in both severity and likelihood. The assessment also identified a risk of retention longer than necessary, rated high in severity and medium in likelihood. Finally, it identified a risk of unauthorised access, rated high in severity and low in likelihood.

Several points remain to be confirmed. These include the retention period for the information, whether access is logged, and whether the vendor actually deletes the audio recording, as its documentation states but no signed contract yet guarantees. Example Clinic adopts the six measures set out in this document to address these findings and risks.

This document was drafted from the organisation's answers. It applies the cited provisions to those answers and does not constitute legal advice. The organisation adopts it under the responsibility of its person in charge of the protection of personal information.

Adoption

The organisation adopts this assessment and the measures it sets out.

Name: Camille Example

Title: Executive Director

Date: _____

Signature: _____

Appendix: the organisation's answers

Question	Answer
Project type	Adoption of an artificial intelligence tool
Purposes	Write the clinical note for the consultation; Reduce the time physicians spend on data entry
Use for a new purpose	No
Quantity	100 to 10,000 persons
Medium	Cloud
Retention period defined	Does not know
Access limited to staff who need it	Yes
Decision based exclusively on automated processing	No
Human review of the decision	Yes
Identification, location or profiling technology	No
Product offered to the public with privacy settings	No
Collection from minors under 14	Yes
Persons concerned informed	No
Communication in a structured format possible	Yes
Person in charge consulted from the start	Yes