

## File identification

File resolution no. IP 222/2021, referring to the EAP Osona Sud – Alt Congost, SLP.

## Background

1. On 28/05/2021, the Catalan Data Protection Authority received a letter of complaint against the EAP Osona Sud – Alt Congost, SLP (EAP), which manages the Centelles Primary Care Center ( CAP Centelles), due to an alleged breach of the regulations on personal data protection . The complainant stated the following:

1.1 That, on 06/07/2020, she was treated in the emergency room at CAP Centelles by a dentist Dr. (...) for "a dental problem " . Regarding this, he pointed out that on that same day, from CAP Centelles, his shared clinical history (HC3) would have been accessed - specifically, the "diagnostic information", "summary clinical history" and "clinical report information" modules -, at 1:34 p.m. and at 1:35 p.m. , accesses that he considered unjustified.

The reporting person indicated that the dentist attended to her at 1:00 p.m. that day. This fact, according to him, would prove that the subsequent accesses to HC3 (at 13:34 and 13:35 hours) were improper, since they would have been carried out when she had already been attended to.

1.2 That on 07/06/2020 and 08/01/2020 he found that, from CAP Centelles, he would have been assigned a general practitioner Dr. (...) that it did not match what he had been assigned for more than twenty years at CAP Florida and that "allegedly, [Dr. (...)] between July 13 and 31, 2020, the date on which it is assigned to me, I had not worked at CAP Centelles for some time."

1.3 That on 03/12/2020, 10/01/2021 and 27/04/2021 he accessed the La Meva Salut (LMS) platform, specifically in the "Reports and results" section of his HC3, and found that, in relation to the diagnoses on 22/08/2015, 10/04/2016, 19/05/2018, 29/05/2020 and 30/05/2020 (all of them linked to attention he had received at CAP Centelles ), it contained inaccurate information regarding the professional responsible for monitoring each care process. Specifically, the name of the professional who treated her at each medical visit had been replaced by the name of the dental professional who had assisted her on 07/06/2020 Dr. (...).

1.4 That the CAP Centelles does not keep your medical history referring to the period before the month of May 2020.

1.5 That, on 30/05/2020, Dr. (...) - optional who provides service at CAP Centelles - entered two entries in his medical history at CAP Centelles (at 10:55 and 10:57), which would contain inaccurate information " given that they do not match to reality." The complainant stated, first of all, that from the literal notes made by Dr. (...) it would appear that he would have gone to CAP Centelles in person, when this was not true, since the consultation was by telephone and lasted three minutes (from 10:46 to 10:49); and, secondly, it indicated that certain information entered by this doctor , linked to the reason for the medical assistance that day, was also not true, since it

contained "completely false facts, which damage my image as a patient, and they can cause the attention I receive to not be adequate, due to the qualification given to me, of going to the Caps d'Osona for trivial illnesses (...)."

- 1.6 That his right of access, on the one hand, to the traceability of his medical history from CAP Centelles for a certain period and, on the other hand, to obtain a copy of his medical history from the "HEAD of Osona".

In order to substantiate the reported facts, he provided numerous documents, among which it is worth noting:

A. In relation to the fact reported in section 1.1, it provided:

A.1. Screenshot of the LMS platform, referring to the accesses to its HC3 on 07/06/2020, in which two entries can be seen, at 13:34 and 13:35, carried out from CAP Centelles.

A.2. Copy of your HC from CAP Centelles, in which there is an annotation made by Dr. (...) (dentist) on 07/06/2020, at 1:00 p.m.

B. In relation to the fact reported in section 1.2, he provided the document entitled "Patient File", issued by the EAP on 08/01/2020, in which it is noted that the reporting person is listed as "Type of patient: displaced" at CAP Centelles and that the doctor assigned to him is Dr. (...).

C. In relation to the fact reported in section 1.3, it provided:

On the one hand, a copy of several screenshots of the HC of CAP Centelles in relation to the care provided in said center:

C.1 Document that would be related to the visits of 22/08/2015, 10/04/2016 and 19/05/2018, in which the literal "there is no note in HC3 with the selected filter."

C.2 Visit of 05/29/2020, in which it is stated that she was treated by Dr. (...).

C.3 Visit of 30/05/2020, in which it is recorded that she was treated by Dr. (...).

On the other hand, he provided screen prints taken from the LMS, where it is observed that on the dates indicated, in relation to the episodes that are related below, the medical professional who would have attended to him would be Dr. (...) (dentist).

"Sprained / twisted / sprained ankle" 08/22/2015 Dr. (...)

"Generalized abdominal pain / spasms" 04/10/2016 Dr. (...)

"Acute upper respiratory tract infection 05/19/2018. Dr. (...)

"Diseases of the teeth and gums" 05/29/2020 Dr. (...)

"Absence of illness" 30/05/2020 Dr. (...)

D. In relation to the fact reported in section 1.4, he provided the document specified in section C.1 above.

E. In relation to the fact reported in section 1.5, it provided:

E.1. Copy of the HC of CAP Centelles, which contains the annotations that the doctor (Dr. ...) had entered on 05/30/2020, at 10:55 and 10:57 hours. Specifically, that the person making the complaint goes there because of a "stomach ache", who has been "visited on several occasions in the ucies [emergency rooms] in the heads of his area, of ozone, Hgclinic, of emergencies for common pathology. After a conflict with the administration, he goes to the police. DISEASE-FREE CONSULTATION."

E.2. Several phone records linked to a phone number (which the complainant claims is hers), showing an outgoing phone call to no. ... (which would correspond to CAP Centelles), carried out on 30/05/2020 at 10:46 and which would last three minutes.

F. In relation to the fact reported in section 1.6, he provided various documentation related to the exercise of his right of access.

Regarding the complaint referred to in section 1.6, the Authority initiated two procedures for the protection of rights, in accordance with article 16 of Law 32/2010, of October 1 of the Authority Catalan Data Protection Authority. On the one hand, procedure no. 58A/2021, referring to the Catalan Health Institute (ICS); and, on the other hand, procedure no. 58B/2021, referring to the entity reported here. Both ended with separate resolutions of the Director of the Authority, dated 03/11/2021.

2. The Authority opened a preliminary information phase (no. IP 222/2021), in accordance with the provisions of article 7 of Decree 278/1993, of November 9, on the sanctioning procedure applied to areas of competence of the Generalitat, and article 55.2 of Law 39/2015, of October 1, on the common administrative procedure of public administrations (LPAC), to determine whether the facts related to the points of 1.1 in 1.5 of the previous section were capable of motivating the initiation of a sanctioning procedure.
3. In this information phase, on 07/22/2021 the reported entity was required to comply with the following:
  - 3.1. Bring a copy of the reporting person's HC3 access log dated 07/06/2020 and justify each of the accesses.
  - 3.2. Report on the reasons why, during the months of July and August 2020, the complainant was assigned a general practitioner Dr. (...) different from what Florida would have assigned to the CAP; optional which, moreover, would not provide services to CAP Centelles.
  - 3.3. Report on whether the CAP Centelles keeps the medical history of the reporting person, referring to the period before the month of May 2020.
  - 3.4. Point out the reason why the CAP Centelles modified the information from the HC3 of the reporting person, linking the assistance provided to the CAP Centelles on 22/08/2015, 10/04/2016, 19/05/2018, 29/05/2020 and 30/05/2020 with a single doctor Dr. (...), dentist. This information would not coincide with that contained in the HC of CAP Centelles.

- 3.5. To pronounce on the accuracy of the information referred to the clinical episode dated 05/30/2020, visit made by Dr. (...).
4. On 06/09/2021, the reported entity responded to the aforementioned request through a letter in which it stated the following:
- 4.1 That the dental professional who treated the complainant, on 07/06/2020 Dr. (...), accessed his HC3 on the same day of the visit. Specifically, he consulted the summary of his clinical history and clinical reports at 1:34 p.m., and the diagnoses at 1:35 p.m.
- That the accesses "were justified by the fact that an antibiotic was prescribed in the dental procedure presented by the patient who, it should be remembered, was assisted at the CAP Centelles as urgent care (not scheduled) for a patient assigned to another ABS (CAP Florida and, therefore, treated as a displaced user, with the pretense that the dentist prescribed an antibiotic through the public system - Amoxicillin - that had been prescribed by his private dentist."
- 4.2. That "as a displaced user of another ABS - CAP Florida - does not have a doctor assigned to our Centelles ABS Primary Care Center. (...) Regarding the assignment to the complainant as a family doctor to Dr. (...) (July – August 2020) state that this health professional provides services as a continuing care doctor in some on-call services in that summer of 2020 and that, as previously certified in the report of traceability, there is no record of access or assignment in the health care of this doctor to *Mrs.* [complainant]."
- 4.3. That "the objective clinical history and the notes that make up the so-called clinical course of the patient [here the complainant] is in her CAP where this user is assigned her ABS of reference which in this case is the Delta Primary Care Service of Llobregat del Prat de Llobregat. The health care given to the patient on the occasion of her visits to the continuing care service (emergency) presents some records in her patient file since 22.08.2015 (copy attached). This means that we have records of the emergency visits that this displaced user makes at CAP Centelles with the corresponding notes of the doctor who treated her."
- 4.4. That "it is not true the statement that from the Centelles CAP the information in the complainant's HC3 was modified regarding the doctors who treated her on different dates at the Centelles CAP, linking all visits to the dentist ( ...) for the simple argument that this action cannot be done within the HC3 system".
- 4.5. That "about the accuracy of the information relating to the complainant contained in the HC CAP Centelles, specifically, about the facts described by Dr. (...) [notation dated 30/05/2020] we can only confirm that, indeed, the family doctor who attended to the [here complainant], as continuous emergency care - was Dr. (...), who wrote down this sentence that you mention without, on our part, deserving more comment than the opinion that this professional expressed at that time in the context of great care pressure motivated by the pandemic of COVID-19."

The reported entity attached various documentation to the letter.

5. On 04/04/2022, also during this preliminary information phase, the Authority addressed a new request to the reported entity, to answer some of the questions that had been raised. Thus, the entity was required to comply with the following:
  - 5.1. Report on the reasons why the dental professional Dr. (...) accessed the complainant's HC3, on 07/06/2020 at 1:34 p.m. and at 1:35 p.m., when theoretically he had already visited it (that same day at 1 p.m.: 00, as stated in the HC of CAP Centelles -section A.2 of precedent 1r-).
  - 5.2. Expand the information on the reasons why the "Patient File", which was given to the person reporting on 01/08/2020, included Dr. (...) as your assigned physician, instead of your CAP Florida GP.
  - 5.3. Explain the apparent contradiction (object of complaint) between the information that appeared in the HC of CAP Centelles and that contained in LMS, in relation to the following medical assistance:
    - a) Visit (or report) of 29/05/2020: at the HC CAP Centelles it is stated that it was made by Dr. (...), while the HC3 includes Dr. (...).
    - b) Visit on 30/05/2020: at the HC CAP Centelles it is stated that it was made by Dr. (...), while the HC3 includes Dr. (...)
    - c) Visits on 22/08/2015, 10/04/2016 and 19/05/2018: according to the document provided by the complainant (section C.1 of background 1), at the HC of CAP Centelles it would contain the following information: "no note is recorded" in the HC CAP, while in the HC3 it is recorded that all of them were made by Dr. (...).
  - 5.4. Report on whether CAP Centelles kept medical information prior to May 2020, relating to the reporting person.
6. On 04/14/2020, the EAP Centelles responded to the request indicated in the previous antecedent, in the following terms:
  - 6.1. That the dental professional accessed the complainant's HC3 on 07/06/2020. Asked about the reason for the time difference between the visit and the entrances to the HC3, he argued the following: "the later access was to think about possible allergies or other diseases about which he had not inquired, that could influence the prescription of the antibiotic he had made. In fact, the departure time of the visit was 13:16 and the consultation time at HC3 at 13:30, therefore almost immediately afterwards."
  - 6.2. That on 07/06/2020 and 08/01/2020 the person making the complaint was assigned a different GP than he had, given that "the computer program we use, OMIAPWEB, requires a doctor to be assigned to open a file to a patient Displaced patients are assigned by the administration by default , Dr. (...) in the well-understood internal, which corresponds to a patient transferred from other Basic Health Areas. It corresponds to the doctor of the displaced."

- 6.3. What in the HC of CAP Centelles there are clinical notes linked to the person, reporting prior to May 2020, "which correspond to closed episodes, that is to say not valid (...)." In order to prove it, a screen printout (IMP 1) containing a list of healthcare episodes prior to May 2020 (marked in blue), which would be linked to the reporting person, was provided.
7. On 02/05/2022, the Authority again required the EAP to report whether, in relation to the care episodes contained in document IMP 1, medical documentation/information was kept. Likewise, the reported entity was also required to respond to what had been requested, in relation to the apparent contradiction between the content of the HC3 and the HC of CAP Centelles.
8. On 06/05/2022, the reported entity's response to the request for information indicated in the previous antecedent was received. In literal terms, the EAP reported the following:
- 8.1. "That the CAP Centelles keeps clinical information of the reporting person prior to May 2020, "all entries prior to this date are kept in the Primary Care Clinical History (HC\_AP) of our CAP de Centelles health center. (...) There are entries prior to said date of 05/19/2020. These annotations correspond to closed episodes, that is to say, not valid (in blue in document IMP 1), from other previous reasons for consultation. Add that the HC\_AC OMIAP system does not allow the deletion or modification, after the date of the visit, of any annotation."

That the explanation of why a particular search for clinical information by the reporting person had yielded an unsuccessful result (no results found) could have been due to the fact that "the acute episodes for which a patient consults have a specific time of validity, generally of 6 months, therefore, after this period, they cease to be visible and become inactive, without having been deleted. Conversely, chronic episodes remain permanently visible. As you can see, the "CONSULTES ODONTOLOGIA" episode remains black, active, given that it is treated as chronic. It is a tailor's drawer where the different dental consultations are recorded. (...)."

- 8.2. Regarding the apparent contradiction between the HC3 and the HC of CAP Centelles, the EAP stated the following (the bold is from the Authority):
- That "the CAP of Centelles has an accredited system of HC\_AP called OMIAP, which meets the requirements established by the Department of Health. The Centelles CAP adheres to the UCH Type Code and follows its recommendations. The Catalan Health Service (CatSalut) establishes the obligation to share clinical, pharmacy, sick leave and other information, according to the requirements, standards, encryption and security elements. (...) The various records in the HC\_AP of the CAP de Centelles have not been modified, deleted or established by any professional other than the one who attended to [complainant]."
  - That "the HC3 is not the sum of the clinical histories of the health centers and does not incorporate all the information of the clinical histories but only some of them, according to the criteria of CatSalut and the Department of Health."
  - That "as can be seen in Figure\_3 (which is attached), in the data extracted from the clinical course of HC3 referring to care at the CAP de Centelles, there is the



following warning in the heading: 'for for technical reasons it has not been possible to retrieve all the information, the data listed is partial'. This is the reason why there are no entries prior to HC3 that are contained in the HC\_AP of the Centelles CAP. It can also be observed that the identification of the professional who attended to the patient in each visit is the same as that which appears in the HC\_AP of the CAP de Centelles and HC3 (Figures 1, 2 and 3 [which contains the letter]). Therefore there is no discrepancy between the authorship of the HC\_AP and HC3."

- That "all the documents mentioned and provided by the person reporting (...), do not correspond to HC3 annotation but to 'La Meva Salut'. My Health: It is a safe, personal and non-transferable online digital health space, where the Department of Health makes available to each citizen the most relevant data relating to their health that allows each patient to access their information health and carry out certain procedures in a simple, secure and confidential manner. It is a viewer that the Catalan Health System (SISCAT) has given to citizens that allows them to access certain relevant information, such as medical reports, diagnostic tests, etc. **The responsibility for the information contained and its custody correspond to the Department of Health** . In no case is the CAP de Centelles responsible and cannot make any changes. It is important to note that it does not collect all the complete information of the patient's clinical history, but that which the Department of Health has determined."
- That "**Therefore the discrepancy observed between the authorship of the annotations in the HC\_AP and HC\_3 actually corresponds between these and La Meva Salut. There is no authorship discrepancy between the HC\_AP and HC3 as it is proven** . The cause of the observed discrepancy must be attributed to technical reasons, the complexity of the system, the tables and codes, their updating and for other reasons that we do not know, it appears by mistake in the LMS space an authorship of visits that do not correspond to those that exist in the HC\_AP, which are also different from those that exist in the HC3; which, if they correspond with those of the HC\_AP of the CAP de Centelles."

9. On 03/21/2023, the Authority required the Department of Health to comply with the following:

- In relation to the CAP Centelles, I would report on the procedure through which the information relating to the visits, reports and medical diagnoses carried out by the health professionals of said center is transferred to the HC3.
- Point out who is responsible for defining the information (and the way to visualize it) that is shown to users through the LMS.
- Indicate in detail the reasons why the reporting person sees in his LMS virtual folder - in the "Reports and results" section - information (which appears to be erroneous ) regarding the medical professionals who treated him on different dates in the CAP Centelles (those indicated in section C *in fine* of the 1st antecedent), so that the information displayed would not coincide with the clinical course contained in the HC3 referring to the visits of the CAP Centelles, nor with the history CAP Centelles clinic.

- Indicate, in the case at hand, who would have been responsible for defining the (apparently erroneous) information displayed in LMS.
10. On 04/21/2023 the Department of Health responded to the request for information indicated in the previous antecedent, in the following terms (the bold is from the Authority):
- That "Currently the Centelles CAP is using the 'eCap' Platform. Information fed into the HC3 from the center is automatically dumped. It should be noted that in relation to the period of data referred to in the claim, initially the dumps were made via 'web services' (...)."
  - That "The medical history information that is viewed through La Meva Salut corresponds to HC3, since in this case La Meva Salut is an HC3 viewer."
  - That "**The display of the information in the La Meva Salut virtual folder that identifies medical professionals who, according to the claimant, are not the ones who attended to her in the visits she herself indicates, has occurred for technical reasons in the carrying out of the dumping of this data .**"
  - That "It should be borne in mind that La Meva Salut is a viewer of some of the data available to HC3. As indicated in point 1, the dumps have specific structures if the data is incorporated into the different fields depending on the type of information configured. In the case of HC3 there is a field relating to the identification of the professional assigned to the user, who is responsible for the patient, and a field relating to the identification of the professional providing the assistance which may or may not coincide with that. In the case of La Meva Salut, the identification field that is included is that of the assigned professional."
  - That "On the other hand, in the assistance that takes place in an ABS/CAP that is not the one assigned to the user based on their place of residence, the center assigns them a reference professional."
  - That "The public health system of Catalonia has several tools that allow access to health information (...) The complexity of this system is very high not only because of the volume of data it deals with, but also because of the movement , daily increase and update of this data, as well as by the information systems that make it possible and the security systems that preserve it. And, although the benefits that this system entails for the health care of the population are obvious, and although the necessary measures are taken for the proper fit and operation of the system, some technical mismatch may occur."
11. On the basis of the antecedents that have been related and the result of the investigative actions carried out in the framework of the previous information, on today's date the present archive resolution is issued in relation to the conducts related to sections 1.1, 1.2, 1.4. and 1.5 of the antecedents, linked to the EAP.

In relation to the facts described in section 1.3 of the antecedents, as of today the Authority has agreed to initiate a sanctioning procedure against the Department of



Health, given that it is the entity responsible for the personal data contained in the HC3 and are displayed on the La Meva Salut platform.

## **Fundamentals of law**

1. In accordance with the provisions of articles 90.1 of the LPAC and 2 of Decree 278/1993, in relation to article 5 of Law 32/2010, of October 1, of the Catalan Authority of Data Protection, and article 15 of Decree 48/2003, of February 20, which approves the Statute of the Catalan Data Protection Agency, the Director of the Authority is competent to issue this resolution Catalan Data Protection Authority.
2. Based on the antecedents, it is necessary to analyze the reported facts that are the subject of the present archive resolution and which correspond to sections 1.1, 1.2, 1.4 and 1.5 of the antecedents.

- **Background 1.1: in relation to access to the HC3 dated 07/06/2020**

The complainant stated that, on 07/06/2020, she was treated at the CAP Centelles by a dentist, Dr. (...), for "a dental problem". The complainant complained that this professional had improperly accessed her HC3, since said accesses occurred when she had already been visited. In order to prove these facts, the complainant provided, on the one hand, the log of access to his HC3, which contained two accesses made from the CAP Centelles at 1:34 and 1:35 p.m. on the day of the visit; and, on the other hand, the copy of the HC of CAP Centelles in which an annotation made by the dentist Dr. (...), at 1:00 p.m. that day, referring to the assistance he provided to the complainant.

Regarding this, the EAP has admitted that Dr. (...) he accessed the HC3 of the complainant here, a professional who justified said access after the visit made "by thinking about possible allergies or other diseases that he had not investigated, which could influence the prescription of the antibiotic he had made."

Therefore, this Authority does not have any elements that allow it to question the reasons put forward by the reported entity regarding the legitimacy of the disputed accesses, which is why it should be considered that they would be enabled by article 9.1. *h* and 6.1. *e* of Regulation (EU) 2016/679 of the European Parliament and of the Council, of April 27, regarding the protection of natural persons with regard to the processing of personal data and the free movement thereof (RGPD)

- **Background 1.2: in relation to the assignment of a referring physician**

As can be seen from the background, the complainant complained about the fact that, on 07/06/2020 and 08/01/2020, from the CAP Centelles, he would have been assigned a different general practitioner to the one he had at the CAP Florida for more than twenty years, a practitioner who, moreover, did not provide his services at the referred center in the period July/August 2020. The letter of complaint was accompanied by the document relating to the "Patient File", issued on 01/08/2020 by the EAP, where it is observed that

the person making the complaint has the status of "displaced patient" with respect to the aforementioned center and where Dr. (...) as a doctor of reference.

Consulted by this Authority, the reported entity specified that the reporting person is assigned to another Basic Health Area, and that his reference health center is the CAP la Florida, which is why he appears as a "displaced user" in the CAP Centelles. With respect to the above, the EAP explained that " the computer program we use, OMIAPWEB, forces us to assign a doctor to open a file for a patient and that, in the case of displaced users, the same medical professional is always assigned ." For these reasons, the doctor who appeared in the Patient File of the reporting person was Dr. (...), instead of his usual GP (which is the one in his reference CAP). In addition, he added that, contrary to what the complainant claimed, Dr. (...) he did provide services to CAP Centelles in the period indicated.

Regarding this, the EAP has reported on the organizational reasons that lead to linking a reference doctor to all the patients they attend to as "displaced", which in this case is Dr. (...). These reasons, at the discretion of this Authority, are sufficient to prove the accuracy of the data entered in the patient file of the person making the complaint.

In accordance with the above, in this case it is not observed that the information in the Patient File of the reporting person contravenes the data protection regulations, specifically article 5.1. d, of the RGPD, relating to the principle of accuracy.

– **Background 1.4: in relation to the conservation of clinical history**

The complainant also pointed out that the CAP Centelles does not keep his medical history, referring to the period before the month of May 2020.

In turn, the reported entity has made it clear that all the notes made by health professionals in the medical history of the person reporting, prior to the controversial date, "are kept in the Primary Care Clinical History (HC\_AP) of our health center CAP de Centelles (...)". And, regarding this, he added that "the HC\_AC OMIAP system does not allow the deletion or modification, after the date of the visit, of any annotation."

In relation to the above, the reported entity pointed out that the fact that in certain searches the result had been unsuccessful (absence of annotations prior to the mentioned date) could be motivated by the fact that "acute episodes for which a patient consults have a fixed period of validity, usually 6 months, so once this period has passed, they cease to be visible and become inactive, without having been deleted. Conversely, chronic episodes remain permanently visible."

The EAP provided several screenshots that allow viewing episodes of the reporting person's medical history, and which are prior to 05/29/2020. This would prevent the initiation of any disciplinary proceedings against this entity for an alleged violation linked to the failure to preserve clinical information .

– **Background 1.5: in relation to the medical notes entered on 05/30/2020**

The complainant complained about the fact that, on 05/30/2022, Dr. (...) he would have entered in his clinical history "completely false facts, which harm my image as a patient,

and may cause the care I receive to be inadequate, due to the qualification given to me, of going to the Caps d'Osona for trivial illnesses (...)."

In turn, the reported entity, consulted by this Authority, has confirmed that "indeed, the family doctor who treated [the person reporting], as continuous emergency care - was Dr. (...), who wrote down this sentence that you mention without, on our part, deserving more comment than the opinion that this professional expressed at that time in the context of great care pressure motivated by the pandemic of Covid-19."

Regarding this, this Authority does not have sufficient elements to question the veracity and accuracy of the information entered by Dr. (...) to the HC of CAP Centelles, in relation to the medical care provided to the person making the complaint on 30/05/2020, without prejudice to the opinion that the person making the complaint may deserve. This would prevent the initiation of disciplinary proceedings against the entity for violation of the principle of accuracy (art. 5.1. d RGPD).

3. In accordance with everything that has been set out in the 2nd legal basis, and since during the actions carried out in the framework of the previous information it has not been accredited, in relation to the facts that have addressed in this resolution, no fact that could be constitutive of any of the violations provided for in the legislation on data protection, it is necessary to agree to its archive.

Article 10.2 of Decree 278/1993, of November 9, on the sanctioning procedure applied to the areas of competence of the Generalitat provides that "(...) no charges will be drawn up and the dismissal of the file and the archive of actions when the proceedings and the tests carried out prove the non-existence of infringement or responsibility. This resolution will be notified to the interested parties". And article 20.1 of the same Decree determines that dismissal is appropriate: "a) When the facts do not constitute an administrative infraction ; b) When there are no rational indications that the facts that have been the cause of the initiation of the procedure have occurred."

Therefore, I resolve:

1. Archive the actions of prior information number IP 222/2021, regarding the EAP Osona Sud – Alt Congost, SLP.
2. Notify this resolution to the EAP Osona Sud – Alt Congost, SLP and the reporting person.
3. Order the publication of the resolution on the Authority's website ([apdcat.gencat.cat](http://apdcat.gencat.cat)), in accordance with article 17 of Law 32/2010, of October 1.

Against the archive indicated in point 2 of the dispositive part, which puts an end to the administrative process in accordance with article 26.2 of law 32/2010 , of October 1, of the Catalan Data Protection Authority , with discretion, the interested parties may file an appeal before the director of the Catalan Data Protection Authority, within one month from the day after notification, in accordance with the which provides for article 123 et seq. of the LPAC. They can also directly file an administrative contentious appeal before the administrative contentious courts, within two months from the day after their notification, in accordance with

articles 8, 14 and 46 of Law 29/1998, of July 13, regulating the administrative contentious jurisdiction.

Likewise, interested parties may file any other appeal they deem appropriate to defend their interests.

The director

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