HEALTH DISCIPLINES ACT

Revised Statutes of Alberta 2000
Chapter H-2

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Office Consolidation

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Alberta Queen’s Printer
7th Floor, Park Plaza
10611 - 98 Avenue
Edmonton, AB T5K 2P7
Phone: 780-427-4952
Fax: 780-452-0668

E-mail: qp@gov.ab.ca
Shop on-line at www.qp.alberta.ca
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Note

All persons making use of this consolidation are reminded that it has no legislative sanction, that amendments have been embodied for convenience of reference only. The official Statutes and Regulations should be consulted for all purposes of interpreting and applying the law.

Amendments Not in Force

This consolidation incorporates only those amendments in force on the consolidation date shown on the cover. It does not include the following amendments:

RSA 2000 cH-7 s156(n) repeals the Health Disciplines Act, except the Schedule; s156(t) repeals clause (f) of the Schedule to the Health Disciplines Act; s156(u) repeals clause (g) of the Schedule to the Health Disciplines Act; s156(aa) repeals clause (m) of the Schedule to the Health Disciplines Act; s156(bb) repeals clause (n) of the Schedule to the Health Disciplines Act.

Regulations

The following is a list of the regulations made under the Health Disciplines Act that are filed as Alberta Regulations under the Regulations Act

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# HEALTH DISCIPLINES ACT

Chapter H-2

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Regulations
HER MAJESTY, by and with the advice and consent of the Legislative Assembly of Alberta, enacts as follows:

Definitions

1 In this Act,

(a) “Board” means the Health Disciplines Board established under this Act;

(b) “Committee” means a Health Discipline Committee established under this Act;

(c) “designated health discipline” means a health discipline listed in the Schedule;

(d) “Director” means the Director of Health Disciplines;

(e) “health discipline association” means a health discipline association named in an order under section 8;

(f) “Minister” means the Minister determined under section 16 of the Government Organization Act as the Minister responsible for this Act;

(g) “registered member” means a person registered under this Act as a member of a designated health discipline;

(h) “registrar” means the registrar of a designated health discipline.
Part 1
Scope of Practice

Prohibitions and exclusions from Act

2(1) No person other than a registered member of a designated health discipline shall

(a) use the name of the designated health discipline, alone or in combination with other words, in a manner so as to express or imply that the person is a registered member of that designated health discipline, or

(b) use any name, title, description or abbreviation in any manner so as to express or imply that the person is a registered member of that designated health discipline.

(2) A registered member may provide

(a) the health services prescribed in the regulations, and

(b) if the member has the training approved by the Minister of Health, any experimental or developmental health services approved by that Minister.

(3) A registered member shall provide health services in accordance with any conditions or restrictions that may be prescribed in the regulations.

(4) Nothing in this Act shall be construed to affect or restrict

(a) the right of a person who operates

(i) an approved hospital as defined in the Hospitals Act,

(ii) a nursing home as defined in the Nursing Homes Act, or

(iii) an institution or facility or under a program operated or approved by the Minister or by the Minister of Health
to prescribe the duties, whether in accordance with a collective agreement or otherwise, of the person’s employees who are registered members of a designated health discipline, or

(b) the right of an employee who is a registered member of a designated health discipline to perform duties prescribed as mentioned in clause (a).

(5) Subject to section 5(2), this Act does not apply to a person who is entitled to practise a health discipline pursuant to any other Act.
(6) Nothing in this Act or the regulations shall be construed to prevent a registered member of a designated health discipline from performing health services that are not prescribed for the designated health discipline of which the registered member is a member if those health services are rendered in an emergency and without gain or reward or hope of gain or reward.

Part 2
Designation of Health Disciplines

Health Disciplines Board
3(1) There is hereby established a board called the Health Disciplines Board consisting of not more than 9 members appointed, each for a term not exceeding 3 years, by the Lieutenant Governor in Council as follows:

(a) 2 persons who are members of the College of Physicians and Surgeons of Alberta authorized to use the title “physician”;

(b) at least 4 but not more than 7 other persons.

(2) The Lieutenant Governor in Council shall designate one of the members of the Board to be chair and another to be deputy chair.

(3) In the absence of the chair and deputy chair at a meeting of the Board, the members present shall appoint a member to preside at that meeting.

(4) The Director shall act as secretary to the Board.

(5) The Lieutenant Governor in Council may fill a vacancy on the Board by appointing a person as a member to serve the unexpired term of office of the former member, but no vacancy on the Board impairs the right of the remaining members to act until the vacancy is filled.

(6) A member is eligible to be reappointed for not more than one additional consecutive term.

(7) An employee of

(a) the Department of Enterprise and Advanced Education, designated by the Minister of Enterprise and Advanced Education, and

(b) the Department of Health, designated by the Minister of Health,
are entitled to receive notice of and attend meetings of the Board.

(8) A member of the Board who is not an employee of the Government may be paid remuneration for the member’s services and an allowance for the expenses necessarily incurred in the performance of the member’s duties, at the rates prescribed by the Minister in accordance with any applicable regulations under the Alberta Public Agencies Governance Act.

(8.1) If regulations under the Alberta Public Agencies Governance Act establish rates in respect of the remuneration or expenses referred to in subsection (8), those regulations prevail, to the extent of any conflict or inconsistency, over any regulations prescribing a rate under subsection (8).

(9) The Board may make rules governing the calling of and conduct of meetings of the Board and any other matters pertaining to its business and affairs.

(10) The chair may at any time call a meeting that the chair considers necessary or desirable and shall call a meeting at the request of not less than 4 members of the Board.

(11) The Board shall meet at least 4 times a year.

(12) Five members of the Board then holding office constitute a quorum at a meeting of the Board.

(13) The Minister may provide to the Board at no cost to it any supplies and the services of employees of the Government under the Minister’s administration to carry out any work that in the opinion of the Minister may reasonably be required by the Board to enable it to perform its functions under this Act.

Director of Health Disciplines

4(1) In accordance with the Public Service Act, there may be appointed a Director of Health Disciplines and any staff necessary to carry out the duties of the Director under this Act.

(2) The Director may authorize an employee of the Government or a member of a Committee or an advisory committee to do any act or thing required or permitted to be done by the Director under this Act or the regulations.

(3) The Director, when directed to do so by the Minister, shall examine, inquire into, study and report to the Minister on any matter relating to the administration of this Act.
(4) The Director shall submit to the Minister an annual report that reflects the activities of the Board, Committees, health discipline associations and advisory committees.

(5) The Minister shall lay a copy of the annual report before the Legislative Assembly if it is then sitting or, if it is not then sitting, within 15 days after the commencement of the next sitting.

1992 c29 s1(5)

Investigations by Board

5(1) The Board shall conduct an investigation into a health discipline in respect of which

(a) an application has been made by or on behalf of an association of persons who are engaged in that health discipline for it to be designated as a designated health discipline under this Act, or

(b) the Minister has directed the Board to make an investigation

for the purpose of determining if the health discipline should be designated as a designated health discipline under this Act.

(2) The Board shall conduct an investigation into a health discipline if an application has been made by a professional association representing the majority of the persons who are

(a) engaged in that health discipline, and

(b) entitled to practise the health discipline pursuant to any other Act

for the purpose of determining if the health discipline should be designated as a designated health discipline under this Act.

(3) An application under subsection (1) or (2) must

(a) be in the form and contain the information required by the Board, and

(b) be accompanied with the fee prescribed by the Minister by order.

(4) In conducting an investigation into a health discipline under subsection (1) or (2), the Board shall consult with any association of persons engaged in the practice of that health discipline or any association of persons that has as one of its objects the advancement or promotion of the practice of that health discipline.
(5) In conducting an investigation into a health discipline under subsection (1) or (2), the Board shall ascertain

(a) the tasks involved in the practice of that health discipline and the complexity of those tasks,

(b) the degree of direction or supervision that a person who engages in the practice of that health discipline in the course of the person’s employment receives with respect to that practice,

(c) what educational programs approved by the Minister of Enterprise and Advanced Education exist in Alberta for that health discipline, and

(d) what educational programs exist outside Alberta for that health discipline.

(6) The Board shall, having regard to the matters ascertained under subsection (5),

(a) evaluate the degree of direct and personal impact that the care or treatment that is normally provided by a person engaged in the practice of that health discipline may have on the health of persons to whom that care or treatment is provided,

(b) determine what services members of that health discipline may provide to persons requiring care and treatment within the scope of that health discipline and any limitations or conditions applicable to the provision of those services,

(c) evaluate the extent of independence of practice in that health discipline that is necessary or desirable for a person who is, in the course of the person’s employment, engaged in that practice,

(d) consider what qualifications may be desirable for applicants for registration to practise in that health discipline, whether with respect to education, training or possession of a specified body of knowledge or technical proficiency, and

(e) consider what may be minimum standards of competency to be required of members of that health discipline in the practice of their discipline.

(7) On completing an investigation under subsection (1) or (2), the Board shall, if it is satisfied, having regard to the matters ascertained, evaluated, determined and considered under subsections (5) and (6), that the potential for and degree of risk of
harm to the public that may result from the practice of that health discipline is such that the health discipline investigated by the Board should be a designated health discipline under this Act, submit to the Minister a full report on the investigation and recommend to the Minister that

(a) legislation be enacted to designate that health discipline as a designated health discipline, and

(b) the health discipline be governed by

   (i) a Committee, or

   (ii) a health discipline association.

RSA 2000 cH-2 s5;2013 c10 s15

Advisory committee

6(1) The Minister may, in consultation with the Health Disciplines Board, establish advisory committees to provide advice to the Board.

(2) The Minister may, with respect to an advisory committee established under this section,

   (a) appoint or provide for the manner of the appointment of its members,

   (b) prescribe the term of office of any member in accordance with the Alberta Public Agencies Governance Act,

   (c) designate a chair, vice-chair and secretary, and

   (d) authorize, fix and provide for the payment of remuneration and expenses to its members in accordance with any applicable regulations under the Alberta Public Agencies Governance Act.

RSA 2000 cH-2 s6;2009 cA-31.5 s47

Assessment by Board

7(1) If the Board recommends under section 5(7) that a health discipline be designated as a designated health discipline, the Board shall carry out an assessment for the purpose of determining whether the designated health discipline should be governed by a Committee or a health discipline association.

(2) In carrying out an assessment under subsection (1), the Board shall consult with any person or association it considers appropriate.

(3) The Board shall consider the following matters:
(a) whether an association exists that represents persons engaged in the health discipline referred to in subsection (1);

(b) the number of members in an association described in clause (a);

(c) the percentage that the members of the association described in clause (a) are of the total number of persons who engage in the health discipline;

(d) the length of time an association described in clause (a) has existed;

(e) the financial position of an association described in clause (a);

(f) the desire of an association described in clause (a) to become a health discipline association;

(g) whether an association described in clause (a) represents or is normally engaged in representing its members in negotiation of collective bargaining agreements or in any proceedings under a collective bargaining agreement;

(h) whether an association described in clause (a) is a corporate body;

(i) whether an association described in clause (a) has an elected governing body;

(j) any other matter it considers appropriate.

Minister’s order

8 When a health discipline is designated as a designated health discipline, the Minister shall, by order, specify that the designated health discipline be governed by

(a) a Committee, or

(b) a health discipline association named in the order.

Health Discipline Committees

9(1) The Minister shall, by order,

(a) establish a Health Discipline Committee for each designated health discipline that is specified by an order under section 8 to be governed by a Committee, and
(b) designate for each Committee so established a name indicating the designated health discipline for which it is established.

(2) A Committee established under subsection (1) shall consist of not fewer than 3 members appointed by the Minister for a term to be prescribed by the Minister in accordance with the *Alberta Public Agencies Governance Act*.

(3) Subject to subsection (4), a majority of the members of a Committee shall be engaged in the designated health discipline for which the Committee is established, and the remaining members of the Committee shall be knowledgeable with respect to the practice of that designated health discipline.

(4) After a register is established for a designated health discipline, a majority of the members of a Committee established for that designated health discipline shall be registered in that designated health discipline and the remaining members of the Committee shall be knowledgeable with respect to the practice of that designated health discipline.

(5) A person who is required under subsection (4) to be registered in a designated health discipline is not eligible to continue to act as a member of a Committee if the person fails to be registered within 60 days after the register for that designated health discipline is established.

(6) The Minister shall designate one of the members of a Committee to be chair.

(7) In the absence of the chair at a meeting of a Committee, the members present shall appoint a member to preside at that meeting.

(8) The Director is the registrar of a designated health discipline that is governed by a Committee and shall act as secretary to the Committee.

(9) A member of a Committee who is not an employee of the Government may be paid remuneration for the member’s services and an allowance for the expenses necessarily incurred in the performance of the member’s duties, at the rates prescribed by the Minister.

(9.1) If regulations under the *Alberta Public Agencies Governance Act* establish rates in respect of remuneration or expenses referred to in subsection (9), those regulations prevail, to the extent of any conflict or inconsistency, over any regulations prescribing a rate under subsection (9).
(10) A Committee may make rules governing the calling of and conduct of meetings of the Committee and any other matters pertaining to its business and affairs.

(11) A majority of the members of a Committee then holding office constitutes a quorum at a meeting of the Committee.

(12) The Minister may provide to a Committee at no cost to it any supplies and the services of employees of the Government under the Minister's administration to carry out any work that in the opinion of the Minister may reasonably be required by the Committee to enable it to perform its functions under this Act.

**Duties of Committee**

10 A Committee, in relation to the designated health discipline for which it is established, shall

(a) govern the registered members in accordance with this Act and the regulations in a manner that serves and protects the public interest,

(b) review applications for registration under Part 3,

(c) hear complaints respecting the conduct or competency of registered members under Part 4, and

(d) advise the Board with respect to

   (i) health services that may be provided by registered members, including any conditions or restrictions applicable to those services,

   (ii) standards of conduct and competency for registered members,

   (iii) qualifications and conditions of eligibility for applicants for registration and renewal of registration,

   (iv) standards to ensure continuing competency of registered members,

   (v) training programs for applicants for registration and renewal of registration,

   (vi) examinations for purposes of registration and renewal of registration, and
(vii) proposed regulations relating to the designated health discipline.

RSA 1980 cH-5.1 s6;1984 c53 s25;1992 c29 s1(8)

Attendance at Board meetings

11(1) A Committee or a health discipline association is entitled

(a) to receive notice of a Board meeting at which matters will be considered that relate to the designated health discipline for which the Committee was established or that is governed by the health discipline association, and

(b) to attend meetings referred to in clause (a).

(2) A Committee or health discipline association may request the Board to hold a meeting to consider matters contained in regulations or that the Committee or health discipline association desires to be included in regulations relating to the designated health discipline, and the Board shall, within 60 days from the date of receipt of the request, hold a meeting to enable the Committee or health discipline association to make representations to it respecting those matters.

(3) A request under subsection (2) shall be in writing and describe the matters with respect to which the Committee or health discipline association intends to make representations to the Board.

Health discipline association is a corporation

12(1) A health discipline association named in an order under section 8(b) or 19(3)(a) is a corporation.

(2) A corporation has the capacity and, subject to this Act, the rights, powers and privileges of a natural person.

(3) A registered member of a designated health discipline that is governed by a health discipline association is a member of a corporation referred to in subsection (1).

Governing body

13(1) A health discipline association shall establish a governing body.

(2) The governing body of a health discipline association shall

(a) manage and conduct the business and affairs of the health discipline association and govern the registered members of the designated health discipline in accordance with this Act,
the regulations and the bylaws in a manner that serves and protects the public interest,

(b) advise the Board with respect to

(i) health services that may be provided by registered members, including any conditions or restrictions applicable to those services,

(ii) standards of conduct and competency for registered members,

(iii) qualifications and conditions of eligibility for applicants for registration and renewal of registration,

(iv) standards to ensure continuing competency of registered members,

(v) training programs for applicants for registration and renewal of registration,

(vi) examinations for purposes of registration and renewal of registration, and

(vii) proposed regulations relating to the designated health discipline,

(c) develop, establish and maintain programs to promote continuing competency of registered members, and

(d) develop, establish and maintain standards of professional ethics for registered members.

Composition of governing body

14(1) The governing body of a health discipline association shall consist of

(a) the number of members of the health discipline association prescribed in the regulations, each of whom shall be elected by and from among members of the health discipline association in accordance with the bylaws, and

(b) when the number of persons elected under clause (a) does not exceed 10, 2 members of the public, or when the number of persons elected under clause (a) is more than 10, 3 members of the public, who shall be appointed by the Lieutenant Governor in Council for a term of not more than 3 years.
The members of a governing body under subsection (1) shall elect from among themselves the officers of the corporation specified in the bylaws in the manner and for the term prescribed in the bylaws.

A member of a governing body appointed under subsection (1)(b) continues to hold office after the expiry of the member’s term of office until the member is reappointed or the member’s successor is appointed.

A member of a governing body appointed under subsection (1)(b) is eligible to be reappointed for not more than one additional consecutive term and may not hold office for more than 6 consecutive years.

The Lieutenant Governor in Council may, after consultation with the governing body, revoke the appointment of a member of a governing body appointed under subsection (1)(b).

The Minister may, in the absence of any payment by the governing body to the member for that purpose, pay to a member of a governing body appointed under subsection (1)(b) travelling and living expenses incurred by that member for the member’s attendance at any meeting of the governing body while away from the member’s usual place of residence and fees in an amount prescribed by the Minister.

The powers, duties and operations of a governing body are not affected by

(a) the fact that no one is appointed as a member of the governing body under subsection (1)(b),

(b) the revocation, under subsection (5), of the appointment of a member of the governing body, or

(c) the resignation from the governing body of a member appointed under subsection (1)(b).

The failure of a member appointed under subsection (1)(b) to attend a meeting of the governing body does not affect or restrict the governing body in exercising any powers or performing any duties at that meeting.

A health discipline association shall appoint a registrar.
Registration committee

16  A health discipline association shall establish, in accordance with the regulations, a registration committee consisting of not less than 3 and not more than 9 members of the health discipline association.

1984 c53 s10;1992 c29 s1(13)

Conduct and competency committee

17(1)  A health discipline association shall establish, in accordance with the regulations, a conduct and competency committee consisting of

(a)  not less than 3 members of the health discipline association, and

(b)  one member of the public who shall be appointed by the Lieutenant Governor in Council for a term of not more than 3 years.

(2)  A member of a conduct and competency committee appointed under subsection (1)(b) continues to hold office after the expiry of the member’s term of office until the member is reappointed or a successor is appointed.

(3)  A member of a conduct and competency committee appointed under subsection (1)(b) is eligible to be reappointed for not more than one additional consecutive term and may not hold office for more than 6 consecutive years.

(4)  The Lieutenant Governor in Council may, after consultation with the governing body of the health discipline association, revoke the appointment of a member of the conduct and competency committee appointed under subsection (1)(b).

(5)  The Minister may pay to a member of a conduct and competency committee appointed under subsection (1)(b) remuneration and travelling and living expenses incurred in the performance of the member’s duties at the rates prescribed by the Minister.

(6)  The powers, duties and operations of a conduct and competency committee are not affected by

(a)  the fact that no one is appointed as a member of the committee under subsection (1)(b),

(b)  the revocation, under subsection (4), of the appointment of a member of the committee, or
(c) the resignation from the committee of a member appointed under subsection (1)(b).

(7) The failure of a member appointed under subsection (1)(b) to attend a meeting of the conduct and competency committee does not affect or restrict the committee in exercising any powers or performing any duties at that meeting.

(8) The Director shall be notified of and may attend and make representations at a hearing before the conduct and competency committee.

Annual report of health discipline association

18 A health discipline association shall annually on or before the date prescribed in the regulations submit to the Director a report in the form required by the Board.

Minister’s order

19(1) If
(a) the Board is satisfied that a Committee or a health discipline association is not performing its duties in a proper manner,
(b) an association applies to become a health discipline association for a designated health discipline in respect of which a Committee has been established under section 9(1), or
(c) the Minister directs the Board to consider whether a Committee or a health discipline association is performing its duties in a proper manner,

the Board shall make a recommendation under subsection (2).

(2) If subsection (1) applies, the Board shall recommend that
(a) an order be made under subsection (3)(a),
(b) an order be made under subsection (3)(b), or
(c) no change be made in respect of a Committee or a health discipline association,

and the Board’s recommendation and reasons for it must be submitted to the Minister in writing.

(3) The Lieutenant Governor in Council, on the recommendation of the Minister, may
(a) abolish a Committee and order that a health discipline association or another Committee be established by the Minister to act in that Committee’s place, or

(b) rescind an order specifying that a designated health discipline be governed by a health discipline association and establish a Committee to act in the health discipline association’s place,

and direct the Committee abolished under clause (a) or the health discipline association in respect of which an order has been rescinded under clause (b) to turn over its files, records and register to the Committee or health discipline association ordered to take its place, as the case may be.

1984 c53 s10

Part 3
Registration

Definition

20 In this Part, “committee” means a Committee established under section 9(1)(a) or a registration committee established under section 16.

1992 c29 s1(17)

Register

21(1) The registrar shall establish and maintain a register of registered members of the designated health discipline.

(2) The registrar shall permit the inspection of the register by any person during regular office hours.

1992 c29 s1(17)

Registration requirements

22 The registrar shall register as a registered member of the designated health discipline a person who

(a) meets the qualifications prescribed in the regulations,

(b) is of good character and reputation, and

(c) has paid the fees prescribed by the Minister by order or in the bylaws of the health discipline association, as the case may be.

1992 c29 s1(17)

Referral to committee

23(1) The registrar shall refer an application for registration to the committee if the registrar
(a) is not satisfied, on reasonable grounds, that an applicant is eligible for registration under section 22, or

(b) believes that terms, conditions or limitations should be imposed on the registration or practice of the applicant.

(2) If the registrar refers an application to the committee, the registrar shall give the applicant notice of the grounds for referral and of the right to make submissions under subsection (3).

(3) The applicant may make oral or written submissions to the committee within 30 days after receiving a notice under subsection (2) or within any longer period specified in the notice.

(4) On completing a review of an application referred to it and any submissions made by the applicant, the committee shall direct the registrar to register the applicant if it is satisfied that the applicant

(a) is eligible under section 22, or

(b) has training and experience that is substantially equivalent to the qualifications required for registration under section 22 and is otherwise eligible under section 22.

(5) If the committee is not satisfied that the applicant meets the requirements of subsection (4), it may direct the registrar

(a) to defer the registration until the applicant has successfully completed specified additional training or examinations, or both, within the time specified by the committee,

(b) to issue, with the consent of the applicant, a restricted registration imposing specified terms, conditions or limitations on the applicant’s registration or practice, or

(c) to refuse to register the applicant.

(6) If the committee gives a direction under subsection (5), it shall inform the registrar in writing of its decision, the reasons for it and the steps, if any, the applicant must take to become eligible for registration.

(7) The registrar shall, not more than 90 days after receiving an application for registration,

(a) send the applicant written notice of the decision under this section, and

(b) if applicable,
Annual renewal of registration

24(1) A registered member shall submit to the registrar annually by the date prescribed in the regulations an application for renewal of registration in the form prescribed by the Minister.

(2) If a registered member does not submit an application for renewal of registration as required, the registrar may cancel the member’s registration not earlier than 30 days after the member is served with a written notice of the intention to cancel the registration, unless the member submits the application within the time prescribed in the notice.

(3) The registrar shall issue an annual certificate to a registered member who

(a) has practised the designated health discipline in accordance with the regulations,

(b) meets any continuing education requirements prescribed in the regulations, and

(c) pays the annual fees prescribed by the Minister by order or in the bylaws, as the case may be.

(4) If a registered member does not meet the requirements in subsection (3)(a) or (b), the registrar shall

(a) refer the application to the committee, and

(b) give the registered member notice of the grounds for referral and of the right to make submissions under subsection (5).

(5) The registered member may make oral or written submissions to the committee within 30 days after receiving a notice under subsection (4)(b) or within any longer period specified in the notice.

(6) On completing a review of an application referred to it and any submissions made by the registered member, the committee shall direct the registrar to issue an annual certificate if it is satisfied that the registered member has maintained competency in the designated health discipline either through actively engaging in the
practice of that health discipline or through involvement in education or training that relates to that health discipline.

(7) If the committee is not satisfied that the registered member has maintained competency in the designated health discipline, it may direct the registrar

(a) to defer issuing an annual certificate until the registered member has successfully completed specified additional training or examinations, or both, within the time specified by the committee, or

(b) to issue, with the consent of the registered member, a restricted annual certificate imposing specified terms, conditions or limitations on the registered member’s registration or practice.

(8) If a registered member does not comply with a direction under subsection (7)(a) within the time specified, the committee may direct the registrar to cancel the registered member’s registration.

(9) If the committee gives a direction under subsection (7), it shall inform the registrar in writing of its decision, the reasons for it and the steps, if any, the registered member must take to become eligible for renewal of registration.

(10) The registrar shall, not more than 90 days after receiving an application for renewal of registration,

(a) send the registered member written notice of the decision under this section, and

(b) if applicable,

(i) send the registered member a copy of the information received from the committee under subsection (9), and

(ii) inform the registered member in writing of the right under section 25 to request a review of the committee’s decision.

Review by Board

25(1) An applicant whose registration has been deferred, restricted or refused or whose renewal of registration has been deferred or restricted may, not more than 30 days after receiving notice of the committee’s decision, request a review of the decision by serving on the Director

(a) a written request for a review by the Board, and
(b) written reasons why, in the applicant’s opinion, the registration or renewal of registration should be approved or approved without restrictions.

(2) On receipt of a request for a review, the Director shall notify the applicant and the registrar of the date, time and place at which the Board will review the decision of the committee.

(3) The review must be commenced not more than 90 days after the Director receives the request for a review.

(4) An applicant and the health discipline association, if any, is entitled to appear and be represented by counsel at the review.

(5) On reviewing a decision of the committee under this section, the Board may

(a) make any decision the committee could have made, or

(b) refer the matter back to the committee for further review.

(6) The committee, on reviewing a matter referred back to it by the Board, may confirm, reverse or vary its original decision.

(7) The Director shall serve the applicant and the registrar with a copy of the Board’s decision and the reasons for its decision.

(8) The registrar shall do all things necessary to carry out the decision of the Board.

Cancellation on request

26 The registrar may cancel the registration of a registered member

(a) at the request or with the consent of the member, or

(b) that is made in error, with the approval of the Board.

Part 4 Complaint Proceedings

Definitions

27 In this Part,

(a) “chair” means the chair of the committee and includes a vice-chair;
(b) “committee” means a Committee established under section 9(1)(a) or a conduct and competency committee established under section 17(1);

(c) “complaint” means a complaint made in writing and signed by the person making it about the conduct, skill, judgment or fitness to practise of a registered member;

(d) “conduct” includes any act or omission;

(e) “investigated person” means a registered member or former registered member with respect to whom an investigation or hearing is held under this Part;

(f) “preliminary investigator” includes the registrar or any person appointed by the registrar who conducts a preliminary investigation under this Part.

Panels

27.1(1) The chair may designate a minimum of 3 members of a committee to sit as a panel of the committee under this Part.

(2) The chair may establish as many panels as the chair considers necessary.

(3) The chair must designate which member of a panel is to act as the chair of the panel.

(4) A panel of a committee has all the powers and duties of a committee under this Part.

(5) If a member designated under subsection (1) is not capable of carrying out the powers and duties of a member, the panel may continue a review, hearing or rehearing in which the member was participating and the panel may carry out its powers and duties with respect to that review, hearing or rehearing.

(6) A power or duty carried out by a panel of a committee is a power or duty carried out by the committee.

(7) Two or more panels of a committee may carry out their powers and duties simultaneously.

(8) Any reference in this Part or in Part 5 of this Act or in Part 10 of the Health Professions Act to a committee may be read as a reference to a panel of the committee.
Complaint

28(1) A person may make a complaint to the registrar regarding a registered member and the complaint must be dealt with in accordance with this Part and the regulations.

(2) A complaint under subsection (1) shall be accompanied with the complainant’s mailing address.

(3) A complaint about a person whose registration has been cancelled or suspended under this Act may, notwithstanding the cancellation or suspension, be dealt with within 5 years following the date of cancellation or suspension as if the cancellation or suspension had not occurred.

1992 c29 s1(17)

Preliminary investigation

29(1) Forthwith on receipt of a complaint, the registrar shall conduct or appoint a preliminary investigator to conduct a preliminary investigation regarding the registered member.

(2) In the absence of a complaint, if the registrar has evidence showing that the conduct, skill, judgment or fitness to practise of a registered member poses a significant risk to the public, the registrar may, after consultation with the Director, conduct or appoint a preliminary investigator to conduct a preliminary investigation regarding the registered member.

(3) The registrar shall notify the registered member that a preliminary investigation will be conducted, giving reasonable particulars of the matter to be investigated.

(4) A preliminary investigator may request any person to produce to the preliminary investigator any models, charts, documents, papers, notes, records, radiographs or other materials or things in the person’s possession or under the person’s control and to attend the preliminary investigation.

(5) The preliminary investigator may copy and keep copies of any of the things produced under subsection (4).

(6) A preliminary investigator may investigate any other matter regarding the investigated person that arises in the course of the preliminary investigation.

(7) If a registered member does not co-operate with a preliminary investigator, the preliminary investigator may make a complaint in writing to the committee, and failure or refusal to co-operate may be held by the committee to be professional misconduct.
(8) Forthwith on concluding a preliminary investigation, the preliminary investigator shall report the findings

(a) to the chair, if the registrar is conducting the preliminary investigation, or

(b) to the registrar, if the registrar is not conducting the preliminary investigation.

Conclusion of preliminary investigation

30(1) The registrar or the chair, as the case may be, on receipt of a report by the preliminary investigator, shall

(a) direct that no further action be taken, if in the opinion of the registrar or the chair,

(i) the complaint is frivolous or vexatious, or

(ii) there is insufficient evidence of unskilled practice or professional misconduct,

or

(b) refer the matter under investigation in writing to the committee.

(2) The registrar shall serve on the investigated person and the complainant, if any, a notice that no further action will be taken or that the matter has been referred to the committee, as the case may be.

(3) If the registrar serves a notice on the complainant that no further action will be taken, the registrar shall inform the complainant in writing that the complainant has the right under section 31 to request a review of that decision.

Review by committee

31(1) A complainant who is served with a notice that no further action will be taken may, within 30 days after receipt of the notice, request a review of that decision by the committee.

(2) A request for a review must be made in writing and sent to the registrar.

(3) On receiving a request for a review, the committee

(a) shall determine
(i) whether the complaint is frivolous or vexatious, or

(ii) whether there is sufficient evidence of unskilled practice or professional misconduct to warrant the matter under investigation being the subject of a hearing,

and

(b) shall notify the complainant and the investigated person in writing of its decision and the reasons for its decision.

(4) Before coming to a decision, the committee shall invite the complainant and the investigated person to attend before the committee and make representations to it.

Suspension pending decision

32(1) Notwithstanding anything in this Act, the chair may recommend that the registration of an investigated person be temporarily suspended pending the outcome of proceedings under this Part, and the registrar may suspend the registration accordingly.

(2) An investigated person whose registration is suspended under subsection (1) may apply to the Court of Queen’s Bench for an order staying the action of the registrar.

(3) A copy of an application under subsection (2) must be served on the chair.

Hearing before committee

33(1) On referral to it of a matter under section 30 or on determining under section 31 that a hearing should be held, the committee shall hold a hearing.

(2) A hearing under subsection (1) shall be commenced not more than 90 days after the date on which the matter is referred to the committee or the determination that a hearing should be held is made.

(3) The registrar, not less than 30 days before the date set for the hearing, shall serve

(a) on the investigated person a copy of the complaint, if any, and a notice of the hearing stating the date, time and place at which the committee will hold the hearing, and
(b) on the complainant, if any, a notice of the hearing stating the date, time and place at which the committee will hold the hearing.

1992 c29 s1(17)

Rights at a hearing

34(1) The investigated person and the complainant, if any, may appear and be represented by counsel at the hearing.

(2) The committee may be represented by counsel at the hearing.

(3) The hearing shall be open to the public unless

(a) the complainant requests that the hearing be held in private because of the confidential nature of the matters to be heard, or

(b) in the opinion of the committee, the interests of any person other than the investigated person may be detrimentally affected if the hearing is not held in private.

1992 c29 s1(17)

Further investigation

35 If any other matter concerning the conduct of the investigated person arises in the course of the hearing, the committee may investigate and hear the matter, but in that event the committee shall declare its intention to hear the further matter and shall permit the investigated person a reasonable opportunity to prepare an answer to the further matter.

1992 c29 s1(17)

Evidence

36(1) The committee is not bound by the rules of law respecting evidence applicable to judicial proceedings.

(2) For the purpose of a hearing under this Act, the registrar and the members of the committee are conferred with the powers of a commissioner for oaths under the Notaries and Commissioners Act.

RSA 2000 cH-2 s36;2013 cN-5.5 s32

Witnesses

37(1) The investigated person and any other person who, in the opinion of the committee, has knowledge of the matter being heard are compellable witnesses in any proceedings under this Part.

(2) A witness may be examined under oath on all matters relevant to the hearing before the committee and is not to be excused from answering any questions on the ground that the answer might tend to
(a) incriminate the witness,

(b) subject the witness to punishment under this Act, or

(c) establish the witness’s liability

   (i) to a civil proceeding at the instance of the Crown or of any other person, or

   (ii) to prosecution under any Act,

but if the answer so given tends to incriminate the witness, subject the witness to punishment or establish the witness’s liability, it shall not be used or received against the witness in any civil proceedings, in a prosecution under this Act or in any proceeding under any other Act, except in a prosecution for or proceedings in respect of perjury or the giving of contradictory evidence.

(3) For the purpose of obtaining the testimony of a witness who is out of Alberta, a judge of the Court of Queen’s Bench, on an application made ex parte by a health discipline association or the Director, may direct the obtaining of the evidence from the witness in the manner provided under the Alberta Rules of Court for the taking of the evidence of a person outside Alberta.

RSA 2000 cH-2 s37;2009 c53 s75

Enforcement of attendance and production of documents

38(1) The attendance of witnesses before the committee and the production of models, charts, documents, papers, notes, records, radiographs or other materials or things may be enforced by a notice issued by the registrar requiring the witness to attend and stating the date, time and place at which the witness is to attend and the models, charts, documents, papers, notes, records, radiographs or other materials or things, if any, that the witness is required to produce.

(2) On the written request of the investigated person or of the person’s counsel or agent, the registrar shall, without charge, issue and deliver to that person or the person’s counsel or agent any notices that the person requires for the attendance of witnesses or for the production of any item under subsection (1).

(3) A witness, other than the investigated person, who has been served with a notice to attend or a notice for production under subsection (1) or (2) is entitled to be paid the same allowances as are payable to a witness in an action in the Court of Queen’s Bench.

RSA 2000 cH-2 s38;2009 c53 s75
Failure to attend or give evidence

39(1) Proceedings for civil contempt of court may be brought against a witness

(a) who fails

(i) to attend before the committee in compliance with a notice to attend, or

(ii) to produce any models, charts, documents, papers, notes, records, radiographs or other materials or things in compliance with a notice to produce them,

or

(b) who refuses to be sworn or to answer any question the witness is directed to answer by the committee.

(2) If the witness referred to in subsection (1) is a registered member, the failure or refusal may be held by the committee to be professional misconduct.

Hearing in absence of investigated person

40 The committee, on proof of service of the notice of the hearing on the investigated person in accordance with this Act, may

(a) proceed with the hearing in the absence of the investigated person, and

(b) act and decide on the matter being heard in the same way as if the investigated person were in attendance.

Findings by committee

41(1) Any conduct of a registered member that, in the opinion of the committee,

(a) is detrimental to the best interests of the public,

(b) contravenes this Act or the regulations, or

(c) displays a lack of knowledge, skill or judgment in the practice of the designated health discipline,

whether or not that conduct is disgraceful or dishonourable, may constitute either unskilled practice of the designated health discipline or professional misconduct, whichever the committee finds.
(2) The committee may find that the conduct of an investigated person constitutes or does not constitute unskilled practice of the designated health discipline or professional misconduct, or both.

Order of committee

42(1) If a committee finds that the conduct of an investigated person constitutes unskilled practice of the designated health discipline or professional misconduct, or both, the committee may make one or more of the following orders:

(a) reprimand the investigated person;

(b) suspend the registration of the investigated person for a specified period;

(c) suspend the registration of the investigated person until
   (i) the investigated person has completed a specified course of studies or obtained supervised practical experience, or
   (ii) the committee is satisfied as to the competency of the investigated person;

(d) accept, in place of a suspension, the investigated person’s undertaking to limit the investigated person’s practice;

(e) impose any conditions or limitations on the practice of the designated health discipline by the investigated person that it considers appropriate;

(f) direct the investigated person to pass a particular course of studies or satisfy the committee as to the investigated person’s professional competency;

(g) direct the investigated person to satisfy the committee that a disability or addiction can be or has been overcome, and suspend the investigated person’s registration until the committee is so satisfied;

(h) require the investigated person to take counselling that, in the opinion of the committee, is appropriate;

(i) require the investigated person to waive, reduce or repay a fee for services provided by the investigated person that, in the opinion of the committee, were not provided or were improperly provided;

(j) cancel the registration of the investigated person;
(k) make any further or other order that it considers appropriate.

(2) If the committee is satisfied that an investigated person has contravened an order under subsection (1), it may, without the necessity of a further hearing, order that the registration of the investigated person be suspended or cancelled subject to any terms it considers appropriate and shall serve the investigated person with notice of the suspension or cancellation.

Payment of costs and fine

43(1) The committee may, in addition to or instead of dealing with the conduct of an investigated person in accordance with section 42, order that the investigated person pay, within the specified time,

(a) all or part of the costs of the hearing,

(b) a fine not exceeding $5000 for each finding of unskilled practice or professional misconduct and $10 000 in the aggregate for all such findings arising out of the hearing, or

(c) the costs under clause (a) and the fines under clause (b).

(2) If a person ordered to pay a fine, costs, or both, under subsection (1) fails to pay the fine or costs within the time ordered, the registrar may suspend the registration of the person until the fine and costs are paid and shall serve the person with notice of the suspension.

(3) A fine or costs ordered to be paid pursuant to subsection (1) shall be paid

(a) if the order is made by a conduct and competency committee, to the health discipline association, or

(b) if the order is made by a Committee established under section 9(1)(a), to the General Revenue Fund.

Effect of suspension

44 A person whose registration as a registered member of a designated health discipline is suspended under this Act shall not practise the designated health discipline until notified by the registrar in writing that the suspension has been revoked or the suspension has expired in accordance with its terms.
Decision and record of hearing

45(1) The committee shall, within a reasonable time after the conclusion of the hearing, provide a written decision on the matter, in which it shall

(a) describe each finding made by it,

(b) state the reasons for each finding made by it, and

(c) state any order made by it.

(2) The committee shall forward to the registrar

(a) the decision, and

(b) the record of the hearing, consisting of all evidence presented before it, including

(i) all exhibits,

(ii) all documents, and

(iii) a summary of all testimony given before it.

(3) The registrar shall, on receiving the decision of the committee and the record of the hearing referred to in subsection (2), serve on the investigated person and on the complainant, if any,

(a) a copy of the decision, and

(b) a statement of the right of the investigated person and the complainant, if any, to appeal the decision to the Board.

(4) The registrar shall send a copy of the decision to the Director.

(5) The investigated person, the Director and the complainant, if any, may examine the record of the hearing before the committee or any part of the record.

1992 c29 s1(17)

Rehearing

46 If there is new evidence available that was not available or for good reason was not presented at the hearing before the committee, the committee may, with the consent of the investigated person, rehear any matter already heard by it and, for that purpose, has the same powers and duties that it had and was subject to in connection with the first hearing.

1992 c29 s1(17)
Stay pending appeal

47(1) Subject to subsection (2), a decision of the committee remains in effect until the Board makes a decision on an appeal.

(2) An investigated person may apply to the Board for an order staying the decision of the committee pending the outcome of the appeal to the Board.

Part 5
Appeals

Appeal to Board

48(1) An investigated person or the complainant, if any, may appeal a finding or an order, or both, of the committee to the Board by notice in writing.

(2) A notice of appeal under subsection (1) shall

(a) describe the finding or order, or both, being appealed, and
(b) state the reasons for the appeal.

(3) A notice of appeal under this section shall be served on the Director not more than 30 days after the date on which the decision of the committee is served on the investigated person or the complainant, as the case may be.

(4) The Director shall, on receiving a notice of appeal under subsection (3), give a copy of the notice of appeal to each member of the Board and make the decision of the committee and the record of the hearing available to each member of the Board.

Notice and hearing

49(1) The Director shall, on receiving a notice of appeal, serve on the investigated person and the complainant, if any, a notice of hearing of an appeal stating the date, time and place at which the Board will hear the appeal.

(2) The Board shall,

(a) if the registration of the investigated person has been cancelled or suspended, hear the appeal within 30 days after the date of service of the notice of appeal, or
(b) if the registration of the investigated person has not been cancelled or suspended, hear the appeal within 90 days after the date of service of the notice of appeal.
(3) The Board may extend the periods referred to in subsection (2) for one or more additional periods, but

(a) in a case to which subsection (2)(a) applies, no extension may be granted without the consent of the investigated person, and

(b) in a case to which subsection (2)(b) applies, no extension may be granted for a period of more than 90 days.

Proceedings before Board

50(1) The investigated person, the complainant, if any, and the health discipline association, if any, may appear and be represented by counsel at the hearing of an appeal before the Board.

(2) The appeal to the Board shall be founded on the record of the hearing before the committee and the decision of the committee.

(3) Sections 36 to 40 apply to proceedings before the Board.

(4) The Board may

(a) grant adjournments of the proceedings or reserve the determination of the matters before it to a future meeting of the Board,

(b) on granting special leave for that purpose, receive further evidence, and

(c) draw inferences of fact and make any determination or finding that, in its opinion, ought to have been made by the committee.

(5) The hearing before the Board shall be open to the public unless

(a) the complainant requests that the hearing be held in private because of the confidential nature of the matter to be heard, or

(b) in the opinion of the Board, the interests of any person other than the investigated person may be detrimentally affected if the hearing is not held in private.

Decision of Board

51(1) The Board, not more than 90 days after the conclusion of all proceedings before it, shall
(a) make any finding or order that, in its opinion, ought to have been made by the committee,

(b) quash, confirm or vary the finding or order of the committee or substitute or make a finding or order of its own, or

(c) refer the matter back to the committee for further consideration in accordance with any direction that the Board may make.

(2) The Board may make any award as to the costs of any appeal to it that it considers appropriate.

(3) The Board shall, within a reasonable time after the conclusion of the proceedings before it, make a written decision on the matter and shall forward the decision to the Director.

(4) The Director shall

(a) serve a copy of the decision on the investigated person, the complainant, if any, and the registrar, and

(b) inform the investigated person, the complainant, if any, and the Health Discipline Committee or the health discipline association, as the case may be, in writing of the right to appeal the decision to the Court of Appeal.

(5) Subject to subsection (6), the decision of the Board remains in effect until the Court of Appeal makes a decision on an appeal.

(6) An investigated person may apply to the Court of Queen’s Bench for an order staying the decision of the Board pending the outcome of the appeal to the Court of Appeal.

(7) A copy of an application under subsection (6) must be served on the Director.

Appeal to Court of Appeal

52(1) Any of the following may appeal a decision of the Board to the Court of Appeal:

(a) the investigated person;

(b) the complainant, if any;

(c) if the designated health discipline is governed by a health discipline association, the governing body of that association;
(d) if the designated health discipline is governed by a
Committee, the chair of that Committee.

(2) An appeal under this section shall be commenced
(a) by filing a notice of appeal with the Registrar of the Court at
Edmonton or Calgary, and
(b) by serving a copy of the notice of appeal on the Board,
within 30 days from the date on which the decision of the Board is
served on the appellant.

(3) The appeal to the Court of Appeal shall be founded on the
record of the proceedings before the Board and the decision of the
Board.

Powers of Court
53(1) The Court of Appeal on hearing an appeal may
(a) make any finding or order that, in its opinion, ought to have
been made,
(b) quash, confirm or vary the decision of the Board or any part
of it,
(c) refer the matter back to the Board for further consideration
in accordance with any direction of the Court, or
(d) direct that a trial of any mixed questions of law and fact
related to a finding or order, or both, of the Board be held
before the Court of Queen’s Bench.

(2) The Court of Appeal may make any award as to the costs of an
appeal to it that it considers appropriate.

Termination of employment by employer
54 If the employment of a registered member is terminated
because of conduct that is, in the opinion of the former employer or
that is alleged by the former employer to be, professional
misconduct, conduct that displays a lack of skill or judgment in the
practice of a designated health discipline or conduct that indicates
that the person is unfit to practise a designated health discipline, the
former employer shall report the matter to the registrar or the
Director and provide a copy of the report to the registered member.
Part 6
General Provisions

Regulations

55(1) The Board may make regulations

(a) prescribing the health services that registered members of each designated health discipline may provide;

(b) prescribing the conditions or restrictions, if any, under which registered members of each designated health discipline may provide health services;

(c) establishing the qualifications and conditions of eligibility for applicants for registration and renewal of registration in each designated health discipline;

(d) respecting registers to be kept by the registrar;

(e) prescribing standards of conduct and competency for registered members of each designated health discipline;

(f) prescribing, in respect of a designated health discipline, a date or dates for the purposes of section 24;

(g) respecting training programs for applicants for registration and renewal of registration in each designated health discipline;

(h) respecting examinations for the purposes of registration and renewal of registration in each designated health discipline;

(i) prescribing the matters to be entered by the registrar in a register described in clause (d);

(j) prescribing the conditions for renewal of registration to be met by a registered member of a designated health discipline pursuant to section 24(3)(a) and (b);

(k) respecting the name, title, description, abbreviation or initial that a registered member of a designated health discipline may use to indicate that the registered member is a member of a designated health discipline;

(l) respecting fees payable to the Minister for registration, conducting an examination, and the renewal of registration;

(m) respecting the temporary registration of a person in a designated health discipline;
(n) respecting the limitations and restrictions on the practice of a designated health discipline by a person described in clause (m);

(o) prescribing the information that the registrar may include on an annual certificate;

(p) prescribing the number of members on the governing body of a health discipline association;

(q) providing for the establishment of a registration committee and a conduct and competency committee for a health discipline association;

(r) prescribing the date by which a health discipline association shall submit the report required under section 18;

(s) respecting inspections under section 60;

(t) requiring registered members of a designated health discipline to carry professional liability insurance and governing the minimum coverage required;

(u) respecting the establishment of practice review committees;

(v) respecting the responsibilities, duties and composition of a practice review committee.

(2) A regulation under subsection (1) does not come into force unless it is approved by the Lieutenant Governor in Council under subsection (3).

(3) The Lieutenant Governor in Council may, with respect to a regulation referred to in subsection (1),

(a) approve the regulation,

(b) vary the regulation and approve the regulation as varied, or

(c) disapprove the regulation.

Regulations

56 Notwithstanding section 55, if the Minister has requested the Board to make a regulation under section 55(1) or to amend or repeal a regulation made under section 55(1) and the Board neglects or refuses to make the regulation so requested or to amend or repeal a regulation as requested by the Minister within 60 days after the date of the request, the Lieutenant Governor in Council...
may make the regulation so requested, or may amend or repeal the regulation as requested.

RSA 1980 cH-5.1 s28

Bylaws

57(1) The governing body of a health discipline association may make bylaws

(a) for the government of the health discipline association and the management and conduct of its affairs;

(b) determining the location of the head office of the health discipline association;

(c) respecting the calling of and conduct of meetings of the health discipline association and its governing body;

(d) respecting the nomination, election, number and term of office of members of the governing body and officers of the health discipline association, the filling of vacancies on the governing body and any committee or board established by the governing body, the appointment to the governing body and any committee or board established by the governing body of members who are members by virtue of their offices, and prescribing their powers, duties and functions, except the power to amend, repeal or suspend any bylaw of the governing body;

(e) providing for the appointment of alternate members of a governing body and procedures for the election of registered members;

(f) providing for the term of office of a registrar appointed under section 15 and the appointment of an individual as an acting registrar who has all of the powers and performs all of the duties of a registrar under this Act, the regulations and the bylaws when a registrar is absent or unable to act or when there is a vacancy in the office of a registrar appointed under section 15;

(g) prescribing the number of members that constitutes a quorum at meetings of the health discipline association;

(h) providing for the delegation of any powers or duties of a governing body under this Act, the regulations or the bylaws with or without conditions to a committee established by the governing body;

(i) respecting the establishment of and payment of sums of money for scholarships, fellowships and any other
educational incentive or benefit programs that the governing body considers appropriate;

(j) governing the publication of the names of applicants for registration under this Act;

(k) requiring persons who engage in the practice of a designated health discipline to maintain a business address in Alberta and to inform the registrar appointed under section 15 in writing of that address and of any change in that address forthwith after the change occurs;

(l) prescribing the manner of proof as to matters required to be proved by applicants for registration;

(m) respecting qualifications and conditions to be met by candidates for registration as student, associate and honorary members;

(n) respecting the holding of votes by mail on any matter relating to a health discipline association;

(o) respecting fees payable to a health discipline association for registration, conducting an examination, and the renewal of registration.

(2) A bylaw under subsection (1) does not come into force unless it is approved by a majority of members of a health discipline association

(a) present and voting at a general meeting, or

(b) voting at a vote conducted by mail in accordance with the bylaws.

(3) The Regulations Act does not apply to bylaws of a health discipline association.

1984 c53 s20;1985 c31 s7;1986 c18 s13;1992 c29 s1(19)

Forms

58 The Minister may prescribe forms for the purposes of this Act.

1986 c18 s14;1994 c40 s4

Service of documents

59 A notice, order, request for review, complaint or other document or a copy of any one or more of them that is required by this Act to be given or served on or that may be made to any person shall be served personally or by registered or certified mail addressed to the person at the person’s last known address.

RSA 1980 cH-5.1 s29
**Inspection**

60(1) The Lieutenant Governor in Council may, on the recommendation of the Minister, permit the registrar to conduct, in accordance with this section, an inspection of the practice of any registered member of the designated health discipline named in the order for the purpose of determining whether the regulations relating to that designated health discipline are being complied with.

(2) The registrar or a person designated by the Registrar may, during ordinary business hours, enter and inspect the business premises of a registered member of a designated health discipline for the purpose set out in subsection (1).

(3) A person who enters premises under subsection (2)

   (a) shall provide at least 48 hours’ notice to the registered member before the person enters the premises, and

   (b) may require the production for the purpose of inspection of any documents or records required to be maintained under the regulations.

(4) If a person other than the registrar carries out an inspection under this section that person shall, on concluding the inspection, report to the registrar.

(5) On concluding an inspection under subsection (2) or on receiving a report under subsection (4), the registrar

   (a) shall, if there is evidence that the regulations are not being complied with, serve the registered member with a notice in writing specifying

      (i) the manner in which the regulations are not being complied with,

      (ii) any remedial action to be taken by the registered member, and

      (iii) the date by which any remedial action shall be completed,

   or

   (b) may, if there is evidence of conduct that is or is alleged to be unbecoming conduct or that shows or is alleged to show a lack of skill or judgment in the practice of the health discipline, refer the matter to be dealt with as a complaint under Part 4.
(6) If a registered member fails to carry out the remedial action required under subsection (5) by the date specified in the notice, the registrar shall refer the matter to be dealt with as a complaint under Part 4.

(7) The registrar shall provide to the Director a written report of each inspection carried out under this section setting out:

(a) the evidence that the regulations are not being complied with and the matters referred to in subsection (5)(a),

(b) the evidence of conduct that is or is alleged to be unbecoming conduct or that shows or is alleged to show a lack of skill or judgment in the practice of a health discipline, or

(c) a statement that the regulations are being complied with.

Confidentiality of information

61 Subject to this Act or any other Act and the regulations under this Act or any other Act, all matters coming before the Board, a Committee, a health discipline association or a committee appointed by a health discipline association in respect of any person who receives health services from a registered member of a designated health discipline shall be treated by the members of the Board, the Committee, the health discipline association or the committee appointed by a health discipline association as private and confidential information, and that information shall not be published, released or disclosed in any manner that might be detrimental to the personal interests, reputation or privacy of that person without that person’s consent.

Appointment to Board or Committee

62 A person is not eligible to be appointed as or, on being appointed, to continue as a member of the Board, a Committee, the governing body of a health discipline association, or a committee appointed by a health discipline association for a designated health discipline if the person represents or is normally engaged in representing:

(a) an employer of registered members of that designated health discipline, or

(b) a group of employees who are registered members of that designated health discipline,
in negotiations of collective agreements for a bargaining unit that consists of or includes those registered members.

Protection from liability

63(1) No action lies against

(a) a member of the Board, a Committee, a health discipline association or a committee appointed by a health discipline association, a practice review committee, the Director, a registrar, or any person acting on the instructions of any of them, or

(b) any member, officer or employee of a health discipline association

for anything done by that person in good faith and in purporting to act under this Act, the regulations or a bylaw that relates to or is incidental to a professional matter or a matter of public interest that is or may be the subject of a regulation under section 55.

(2) No action for defamation may be founded on a communication that consists of or pertains to the conduct of a person who is entitled to engage in the practice of a designated health discipline if the communication is published to or by

(a) a member of a Committee, a health discipline association, a committee appointed by a health discipline association or the Board or a practice review committee,

(b) an officer or employee of a health discipline association, or

(c) a person acting on the instructions of a person referred to in clause (a) or (b)

in good faith in the course of investigating the conduct or in the course of any proceeding under this Act relating to the conduct.

Offence

64(1) A person who contravenes section 2 or 61 or who practises a designated health discipline of which the person is a registered member when the person’s registration is suspended is guilty of an offence and liable

(a) for a first offence, to a fine of not more than $2000,

(b) for a 2nd offence, to a fine of not more than $4000, and
(c) for a 3rd and every subsequent offence, to a fine of not more than $6000 or to imprisonment for a term of not more than 6 months or to both fine and imprisonment.

(2) A prosecution under this section may be commenced within 2 years after the commission of the alleged offence, but not afterwards.

RSA 1980 cH-5.1 s32;1992 c29 s1(22)

Injunction

65 The Court of Queen’s Bench, on application by the Director or a health discipline association, may grant an injunction enjoining any person from doing any act that contravenes section 2, notwithstanding any penalty that may be provided by this Act in respect of that contravention.

RSA 2000 cH-2 s65;2009 c53 s75

Coming into force

66 Clauses (f), (k) and (n) of the Schedule come into force on Proclamation.

Schedule

Designated Health Disciplines

The following health disciplines are designated as health disciplines for the purposes of this Act:

(a) repealed RSA 2000 cH-7 s156;
(b) repealed RSA 2000 cH-7 s156;
(c) repealed RSA 2000 cH-7 s156;
(d) repealed RSA 2000 cH-7 s156;
(e) repealed RSA 2000 cH-7 s156;
(f) repealed 2013 cS-19.3 s12;
(g) Acupuncturists;
(h) repealed RSA 2000 cH-7 s156;
(i) repealed RSA 2000 cH-7 s156;
(j) repealed RSA 2000 cH-7 s156;
(k) repealed RSA 2000 cH-7 s156;
(l) repealed RSA 2000 cH-7 s156;

(m) Midwives.

(n) repealed 2013 cS-19.3 s12.