

2008 Bill 46

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First Session, 27th Legislature, 57 Elizabeth II

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THE LEGISLATIVE ASSEMBLY OF ALBERTA

# **BILL 46**

**HEALTH PROFESSIONS  
AMENDMENT ACT, 2008**

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MR. ANDERSON

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First Reading . . . . .

Second Reading . . . . .

Committee of the Whole . . . . .

Third Reading . . . . .

Royal Assent . . . . .

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*Bill 46*  
*Mr. Anderson*

## **BILL 46**

2008

### **HEALTH PROFESSIONS AMENDMENT ACT, 2008**

*(Assented to , 2008)*

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

#### **Amends RSA 2000 cH-7**

**1 The *Health Professions Act* is amended by this Act.**

**2 Section 1(1) is amended**

**(a) by adding the following after clause (s):**

(s.1) “inspector” means an inspector of a college appointed  
under Part 3.1;

**(b) in clause (pp) by adding the following after subclause  
(vi):**

(vi.1) failure or refusal

(A) to comply with a request of or co-operate with an  
inspector;

(B) to comply with a direction of the registrar made  
under section 53.4(3);

## Explanatory Notes

**1** Amends chapter H-7 of the Revised Statutes of Alberta 2000.

**2** Section 1(1) presently reads in part:

*1(1) In this Act,*

*(nn) “restricted activity” means a restricted activity and a portion of a restricted activity, within the meaning of Schedule 7.1 to the Government Organization Act;*

*(pp) “unprofessional conduct” means one or more of the following, whether or not it is disgraceful or dishonourable:*

*(vi) failure or refusal*

*(A) to comply with the requirements of the continuing competence program, or*

*(B) to co-operate with a competence committee or a person appointed under section 11 undertaking a practice visit;*

**3 Section 4(1) is amended by adding the following after clause (c):**

- (c.1) a description of and information about inspections under Part 3.1;

**4 Section 10 is amended**

**(a) in subsection (1)**

**(i) in clause (a) by striking out “, subject to Schedule 21,”;**

**(ii) in clause (b) by striking out “or by Schedule 21,”;**

**(b) in subsection (2) by striking out “Subject to Schedule 21, a” and substituting “A”;**

**3** Section 4(1) presently reads:

*4(1) A college must submit to the Minister an annual report of its activities in a form acceptable to the Minister that contains the information requested by the Minister, including but not restricted to*

- (a) a statement respecting the number of complaints made and their disposition, including the number of hearings closed to the public in whole or in part, the number of appeals and the number of regulated members dealt with under section 118;*
- (b) information respecting registration;*
- (c) a description of and information about the college's continuing competence program;*
- (d) whether the college has an approval under section 27 and, if so, a statement describing how it is complying with conditions imposed on the approval, if any;*
- (e) a statement respecting the committees and tribunals established under this Act;*
- (f) audited financial information or financial information in a form and manner satisfactory to the Minister.*

**4** Section 10 presently reads in part:

*10(1) A council*

- (a) may, subject to Schedule 21, establish a competence committee, and*
  - (b) must establish the competence committee if the college is authorized by regulation or by Schedule 21, to undertake practice visits.*
- (2) Subject to Schedule 21, a competence committee must consist of no fewer than 3 members appointed by the council and the majority of members must be regulated members and the council must designate a member of that committee to act as chair.*

**5 Section 35 is amended by striking out “, competence committee or Appeal Committee under Schedule 21” and substituting “or competence committee”.**

**6 Section 40(1)(b)(i) is amended by striking out “or Schedule 21”.**

**7 Section 50(2)(b) is amended by striking out “or Schedule 21”.**

**8 Section 51(3)(e) is amended by striking out “a patient’s medical records” and substituting “patient records”.**

**5** Section 35 presently reads:

*35 The council, hearing tribunal, registration committee, complaint review committee, competence committee or Appeal Committee under Schedule 21 may direct the registrar to correct or remove, and the registrar may correct or remove, any entry made in error in a register.*

**6** Section 40(1)(b)(i) presently reads:

*40(1) An application for a practice permit is complete for consideration under subsection (2) if it is in the form required and given to the registrar by a regulated member*

*(b) who*

*(i) meets the requirements for continuing competence of applicants for a practice permit provided for in the regulations or Schedule 21, or*

**7** Section 50(2)(b) presently reads:

*(2) A continuing competence program*

*(b) may, if authorized by the regulations or Schedule 21, provide for practice visits of the regulated members or categories of regulated members.*

**8** Section 51(3)(e) presently reads:

*(3) For the purposes of conducting a practice visit, any or all of the members of the competence committee and a person appointed under section 11 may, in order to ensure that continuing competence requirements are met,*

*(e) review documents, including a patient's medical records, and examine substances and things that*

*(i) are owned by or under the control of the regulated member, and*

*(ii) are related to the provision of professional services by the regulated member;*

**9 The following is added after section 53:**

**Part 3.1  
Inspections**

**Inspectors**

**53.1** A council may appoint inspectors for the purpose of determining whether regulated members are complying with this Act and the bylaws, standards of practice and code of ethics of the regulated profession.

**Inspection powers**

**53.2(1)** Subject to the regulations, an inspector

- (a) may, at any reasonable time,
  - (i) require any person to answer any questions that are relevant to the inspection and direct the person to answer the questions under oath, and
  - (ii) require any person to give to the inspector any document, substance or thing relevant to the inspection that the person possesses or that is under the control of the person,
- (b) may require any person to give up possession of any document described in clause (a) to allow the inspector to take it away to copy it, in which case the inspector must return it within a reasonable time of being given it,
- (c) may require any person to give up possession of any substance and thing described in clause (a) to allow the inspector to take it away to examine it and perform tests on it, in which case the inspector must return it, if appropriate and possible, within a reasonable time of being given it, and
- (d) subject to subsection (6), may at any reasonable time enter and inspect any place
  - (i) where a regulated member provides professional services,
  - (ii) related to the provision of professional services, or



**9** Inspections.

(iii) where documents associated with the provision of professional services are maintained.

(2) An inspector may copy and keep copies of anything given to the inspector under subsection (1).

(3) A person may comply with a request to give documents under subsection (1)(a)(ii) or an order to produce documents under section 53.3(1)(a)(i) by giving copies of the documents to the inspector.

(4) If a person gives copies under subsection (3), the person must, on the request of the inspector, allow the inspector to compare the copies with the original documents at the person's place of business during regular business hours.

(5) An inspector who makes a comparison under subsection (4) may take away the original documents to perform tests on them and must return them within a reasonable time of taking them.

(6) No inspector may enter

(a) a private dwelling place or any part of a place that is designed to be used and is being used as a permanent or temporary private dwelling place except

(i) with the consent of the occupant of the dwelling place, or

(ii) pursuant to an order of the Court of Queen's Bench;

(b) a publicly funded facility as defined in section 51(1), except

(i) with the consent and agreement of the person who controls or operates the publicly funded facility to the carrying out of one or more of the powers and duties under subsection (1), or

(ii) pursuant to an order of the Court of Queen's Bench.

#### **Application to Court**

**53.3(1)** The registrar, on the request of an inspector, may apply to the Court of Queen's Bench for



- (a) an order directing any person
  - (i) to produce to the inspector any documents, substances or things relevant to the inspection in the person's possession or under the person's control,
  - (ii) to give up possession of any document described in subclause (i) to allow the inspector to take it away to copy it, in which case the inspector must return it within a reasonable time after receiving it,
  - (iii) to give up possession of any substance or thing described in subclause (i) to allow the inspector to take it away, examine it and perform tests on it, in which case the inspector must return it, if possible, within a reasonable time of being given it, or
  - (iv) to allow an inspector to enter any place for the purpose of conducting an inspection,
- (b) an order directing any person to attend before the inspector to answer any relevant questions the inspector may have relating to the inspection, or
- (c) an order authorizing an inspector to conduct an inspection in a private dwelling place or in a publicly funded facility as defined in section 51(1).

(2) An application for an order under subsection (1) may be made without notice if the Court is satisfied that it is proper to make the order in the circumstances.

#### **Report of inspection to registrar**

**53.4(1)** Within 90 days after completing an inspection the inspector who conducted the inspection must give a report setting out the findings of the inspection to the regulated member and the registrar.

(2) The registrar must make a referral to the complaints director if, on the basis of information contained in the inspection report, the registrar is of the opinion that

- (a) a regulated member has failed or refused to co-operate with an inspector conducting an inspection under this Part,



- (b) a regulated member has provided false or misleading information under this Part,
- (c) a regulated member has failed or refused to comply with a direction made by the registrar under subsection (3),
- (d) a regulated member may be incapacitated, or
- (e) a regulated member's conduct constitutes other unprofessional conduct.

(3) Despite subsection (2)(e), if the registrar is of the opinion that the conduct of the regulated member constitutes unprofessional conduct that was minor in nature, the registrar may direct the regulated member to take specified actions instead of making a referral under subsection (2)(e).

(4) Information respecting a regulated member that is obtained under this Part may be provided to the complaints director if the registrar makes a referral to the complaints director in respect of that regulated member under this section.

#### **Inspection committee**

**53.5(1)** A council may establish an inspection committee to carry out the powers and duties of the registrar under this Part except those described in section 53.3.

(2) An inspection committee must consist of one or more members appointed by the council.

(3) If a council establishes an inspection committee under subsection (1), the powers and duties of the registrar under this Part, except those described in section 53.3, are vested in and may be exercised by the inspection committee, and any reference to the registrar in this Part, except in section 53.3, is deemed to be a reference to the inspection committee.

**10 Section 56 is amended by striking out** “under Part 3 or Schedule 7” **and substituting** “under Part 3, Part 3.1, Schedule 7 or Schedule 21”.

**10** Section 56 presently reads:

*56 Despite not receiving a complaint under section 54, but subject to section 54(3) and (4), if the complaints director has reasonable grounds to believe that the conduct of a regulated member or former member constitutes unprofessional conduct, receives a referral under Part 3 or Schedule 7, is given notice under section 57, is given*

**11 Section 122(1) is amended**

- (a) by striking out** “health planning, policy development, health workforce planning and health service planning and delivery” **and substituting** “planning and resource allocation, health system management, public health surveillance and health policy development”;
- (b) in clause (a) by striking out** “33(4)(b)” **and substituting** “33”.

**12 The following is added after section 122:**

**Abandoned patient records**

**122.1(1)** A council must adopt standards of practice that require each regulated member to make arrangements and put plans in place to ensure that the member’s patient records are not abandoned within the meaning of the regulations.

**(2)** If a regulated member, or former member, of a college abandons the member’s patient records, that college must ensure that the member’s abandoned patient records are secured and managed in accordance with the regulations.

**(3)** The Court of Queen’s Bench may make an order in accordance with the regulations

- (a)** directing the sheriff of any judicial district in Alberta to seize, remove and place in the custody of a trustee abandoned patient records, or property containing abandoned patient records, and
- (b)** authorizing the sheriff to enter on land or premises or open any receptacle if there is reason to believe that



*information orally or is aware of non-compliance with a direction under section 118, the complaints director may treat the information, notice or non-compliance as a complaint and act on it under section 55.*

**11** Section 122 presently reads in part:

*122(1) For the purposes of health planning, policy development, health workforce planning and health service planning and delivery, a registrar must*

- (a) on the request of the Minister compile information referred to in section 33(4)(b), in the form and manner requested by the Minister, and*
- (b) on the request of the Minister disclose any or all of that information to the Minister and to other persons authorized by regulation under section 134 to receive such information.*

**12** Abandoned patient records.

abandoned patient records may be found on the land or premises or in the receptacle.

**13 Section 126(1) is amended**

**(a) by adding the following after clause (c):**

- (c.1) a trustee of abandoned patient records appointed in accordance with the regulations;
- (c.2) the Minister or an employee or agent of the department administered by the Minister;
- (c.3) a person who conducts or has conducted an inspection under Part 3.1;

**(b) in clause (d) by striking out “(c)” and substituting “(c.3)”;**

**(c) by renumbering clause (d.1) as clause (f).**

**14 Section 131(1)(g) is amended by striking out “and Schedule 21”.**

**15 Section 134 is amended**

**(a) by adding the following after clause (c.1):**

- (c.2) respecting abandoned patient records for the purposes of section 122.1, including, without limitations, regulations
  - (i) respecting the circumstances under which patient records are considered abandoned;
  - (ii) respecting the manner in which abandoned patient records are to be secured and managed, including regulations respecting access to and disclosure of

**13** Section 126(1) presently reads in part:

*126(1) No action lies against any of the following in respect of anything done or omitted to be done in good faith pursuant to this Act, an order of the Minister, the bylaws or any direction of the council:*

- (d) a person who acts on the instructions of or under the supervision of a person referred to in clauses (a) to (c);*
- (e) a person appointed as an administrator pursuant to an order of the Minister under section 135.2(1);*
- (d.1) a person who, at the request of the council of a college of a regulated profession, performs an assessment of the competence of an individual who has applied for registration to provide professional services of the regulated profession.*

**14** Section 131(1)(g) presently reads:

*131(1) A council may make regulations*

- (g) establishing and respecting practice visits as part of a continuing competence program and respecting directions to be imposed and complied with under section 51(5)(b)(ii) and Schedule 21;*

**15** Section 134 presently reads:

*134 The Lieutenant Governor in Council may make regulations*

- (a) respecting the expenses for the purposes of sections 82(1)(j) and 89(6);*
- (b) respecting information to be provided by regulated members under section 33(4)(b);*
- (c) authorizing the Minister to use, retain and disclose information that is disclosed to the Minister in accordance with this Act;*

abandoned patient records, the transfer of abandoned patient records and the destruction of abandoned patient records;

- (iii) respecting the appointment and removal of trustees and their powers and duties, including the appointment of a college or its delegate as a trustee and the appointment of a trustee by the Court of Queen's Bench;
- (iv) respecting the fees, costs and expenses of trustees and the college, including regulations respecting the liability of a regulated member or former member to pay those fees, costs and expenses;
- (v) respecting rules under which applications to the Court of Queen's Bench are to be made and heard, and dealing generally with all matters of procedure;

**(b) by adding the following after clause (f):**

- (f.1) defining terms that are used but not defined in this Act;

**16 The following is added after section 134:**

**Ministerial regulations**

**134.1** The Minister may make regulations respecting inspectors, inspections and inspection committees for the purposes of Part 3.1.

**17 Section 142 is repealed and the following is substituted:**

**Consequential amendment**

**142 The *Workers' Compensation Act* is amended**

- (a) in section 1(1)(v) by striking out "licensed" and substituting "licensed or authorized under the *Health Professions Act*";
- (b) by repealing section 46.1(3)(a) and substituting the following:

- (c.1) authorizing persons to receive information disclosed on the request of the Minister pursuant to section 122(1);*
- (d) respecting fees under sections 31(6) and 41(8);*
- (e) specifying organizations for the purposes of section 119(2);*
- (f) respecting the consultation requirements to be followed before an order is made under section 135.1 or 135.2 or before a regulation is made under section 135.3 or 135.4;*
- (g) respecting any other matter under this Act.*

**16** Ministerial regulations.

**17** Section 142 presently reads:

*142 The Workers' Compensation Act is amended in section 1(1)(v) by striking out "licensed" and substituting "licensed or authorized under the Health Professions Act".*

- (a) is a regulated member of the College of Physicians and Surgeons of Alberta who holds a practice permit issued under the *Health Professions Act*, or

**18 Section 146 is amended**

- (a) by repealing subsection (1)(a) and substituting the following:**

- (a) by repealing section 1(l) and substituting the following:**

- (l) “pathologist” means a regulated member of the College of Physicians and Surgeons of Alberta who is authorized to use the title “pathologist”;

- (b) in subsection (2)(b) by striking out “permit respecting the practice of medicine, surgery or osteopathy” and substituting “permit issued under that Act”;**

- (c) in subsection (3) in the new subclause (i) by striking out “permit respecting the practice of medicine, surgery or osteopathy” and substituting “permit issued under that Act”;**

- (d) in subsection (6) by striking out “who is a physician, surgeon or osteopath”;**

- (e) by repealing subsection (6.1) and substituting the following:**

**(6.1) The *Health Care Protection Act* is amended**

- (a) in section 2(2)(a) by striking out “in the bylaws under the *Medical Profession Act*” and substituting “in the bylaws under Schedule 21 of the *Health Professions Act*”;**

- (b) by repealing section 8(3)(g) and substituting the following:**

- (g) that the proposed agreement contains provisions showing how physicians’ compliance with the following, as they relate to conflict of interest and

**18** Section 146 presently reads in part:

*146(1) The Fatality Inquiries Act is amended*

(a) *in section 1(l) by striking out “College of Physicians and Surgeons of the Province of Alberta” and substituting “College of Physicians and Surgeons of Alberta”;*

(2) *The Alberta Health Care Insurance Act is amended*

(a) *in section 1(g) by striking out “College of Physicians and Surgeons of the Province of Alberta” and substituting “College of Physicians and Surgeons of Alberta”;*

(b) *in section 1(t)(i) by striking out “a person registered as a medical practitioner or as an osteopathic practitioner under the Medical Profession Act” and substituting “a regulated member of the College of Physicians and Surgeons of Alberta under the Health Professions Act who holds a practice permit respecting the practice of medicine, surgery or osteopathy, or a professional corporation registered with the College of Physicians and Surgeons of Alberta”;*

(c) *by repealing section 22(20)(a) and substituting the following:*

(a) *the council or hearing tribunal of the College of Physicians and Surgeons of Alberta,*

(3) *Section 1(n)(i) of the Hospitals Act is repealed and the following is substituted:*

(i) *with reference to medical services provided in Alberta, a person registered as a regulated member of the College of Physicians and Surgeons of Alberta under the Health Professions Act who holds a practice permit respecting the practice of medicine, surgery or osteopathy, and*

(6.1) *The Health Care Protection Act is amended*

other ethical issues in respect of the operation of the facility, will be monitored:

- (i) the *Health Professions Act* and regulations under that Act;
  - (ii) the bylaws of the College of Physicians and Surgeons of Alberta;
  - (iii) the code of ethics and standards of practice adopted by the council of the College of Physicians and Surgeons of Alberta under the *Health Professions Act*.
- (c) **in section 21(5) by striking out** “College of Physicians and Surgeons of the Province of Alberta” **and substituting** “College of Physicians and Surgeons of Alberta”;
- (d) **in section 25**
- (i) **in subsection (1)(q) by striking out** “the *Medical Profession Act* or Schedule 7 of”;
  - (ii) **in subsection (2) by striking out** “College of Physicians and Surgeons of the Province of Alberta” **and substituting** “College of Physicians and Surgeons of Alberta”;
- (e) **in section 29**
- (i) **in clause (a)(i)**
    - (A) **by striking out** “College of Physicians and Surgeons of the Province of Alberta” **and substituting** “College of Physicians and Surgeons of Alberta”;
    - (B) **by striking out** “within the meaning of section 103 of the *Medical Profession Act* and the bylaws under that Act or” **and substituting** “under”;
  - (ii) **in clause (c) by striking out** “College of Physicians and Surgeons of the Province of Alberta” **and**



- (a) *in section 21(5) by striking out “College of Physicians and Surgeons of the Province of Alberta” and substituting “College of Physicians and Surgeons of Alberta”;*
  - (b) *in section 25(2) by striking out “College of Physicians and Surgeons of the Province of Alberta” and substituting “College of Physicians and Surgeons of Alberta”;*
  - (c) *in section 29*
    - (i) *in clause (a)(i)*
      - (A) *by striking out “College of Physicians and Surgeons of the Province of Alberta” and substituting “College of Physicians and Surgeons of Alberta”;*
      - (B) *by striking out “within the meaning of section 103 of the Medical Profession Act and the bylaws under that Act or” and substituting “under”;*
    - (ii) *in clause (c) by striking out “College of Physicians and Surgeons of the Province of Alberta” and substituting “College of Physicians and Surgeons of Alberta”.*
- (7) *The Interpretation Act is amended in section 28(1)(pp) by striking out “registered under the Medical Profession Act as a medical practitioner” and substituting “a regulated member of the College of Physicians and Surgeons of Alberta who holds a practice permit respecting the practice of medicine, surgery or osteopathy”.*
- (8) *The Mental Health Act is amended*
- (a) *by repealing section 1(1) and substituting the following:*
    - (1) *“psychiatrist” means a person who is a regulated member of, and who has been granted specialty recognition in psychiatry by, the College of Physicians and Surgeons of Alberta under the Health Professions Act;*
  - (b) *in section 17(7)(m)*
    - (i) *by striking out “of the College of Physicians and Surgeons of the Province of Alberta or an investigating committee under the Medical Profession Act” and substituting “or hearing tribunal of the College of Physicians and Surgeons of Alberta”;*

**substituting** “College of Physicians and Surgeons of Alberta”;

**(iii) by repealing clause (l) and substituting the following:**

(l) “physician” means a regulated member of the College of Physicians and Surgeons of Alberta who holds a practice permit issued under the *Health Professions Act*;

**(iv) in clause (r) by striking out** “bylaws under the *Medical Profession Act*” **wherever it occurs and substituting** “bylaws under Schedule 21 of the *Health Professions Act*”;

**(f) in subsection (7) by striking out** “permit respecting the practice of medicine, surgery or osteopathy” **and substituting** “permit issued under the *Health Professions Act*”;

**(g) in subsection (8)(a) by striking out the new clause (l) and substituting the following:**

(l) “psychiatrist” means a regulated member of the College of Physicians and Surgeons of Alberta who is authorized to use the title “psychiatrist”;

**(h) in subsection (9) in the new clause (i)**

**(i) by striking out** “who is a physician, surgeon or osteopath”;

**(ii) by striking out** “and to podiatrists”.

#### **19 Section 152(1) is amended**

**(a) by repealing clause (a) and substituting the following:**

**(a) in section 1(v)(i) by striking out** “a person registered as a member of the Alberta Podiatry Association and lawfully entitled to practise in Alberta” **and substituting** “a regulated member of the College of

(ii) *in subclause (i) by striking out “College or” and substituting “College of Physicians and Surgeons of Alberta or”.*

(9) *The Public Health Act is amended by repealing section 70(5)(b)(i) and substituting the following:*

(i) *a regulated member of the College of Physicians and Surgeons of Alberta under the Health Professions Act who is a physician, surgeon or osteopath but does not apply to a student enrolled in a program of studies and to podiatrists,*

**19** Section 152(1) presently reads:

*152(1) The Alberta Health Care Insurance Act is amended*

(a) *in section 1(v)(i) by striking out “a member of the Alberta Podiatry Association and lawfully entitled to practise in Alberta, and” and substituting “a regulated member of the College of Physicians and Surgeons of Alberta who holds a practice permit respecting the practice of podiatry, and”;*

Podiatric Physicians of Alberta who holds a practice permit issued under the *Health Professions Act*”;

**(b) by repealing clause (c) and substituting the following:**

**(c) by repealing section 22(20)(e) and substituting the following:**

(e) the council or a hearing tribunal of the College of Podiatric Physicians of Alberta,

**20 Schedule 2 is amended in section 3 by striking out “and” at the end of clause (a) and adding the following after clause (a):**

(a.1) teach, manage and conduct research in the science, techniques and practice of chiropractic, and

**21 Schedule 3 is amended in section 3 by striking out “and” at the end of clause (b) and adding the following after clause (b):**

(b.1) teach, manage and conduct research in the science, techniques and practice of combined laboratory and x-ray technology, and

**22 Schedule 6 is amended in section 3 by striking out “and” at the end of clause (b) and adding the following after clause (b):**

(b.1) teach, manage and conduct research in the science, techniques and practice of dental technology, and

(c) *by repealing section 22(20)(e).*

**20** Schedule 2, section 3 presently reads:

*3 In their practice, chiropractors do one or more of the following:*

- (a) examine, diagnose and treat, through chiropractic adjustment and other natural means, to maintain and promote health and wellness, and*
- (b) provide restricted activities authorized by the regulations.*

**21** Schedule 3, section 3 presently reads:

*3 In their practice, combined laboratory and X-ray technologists do one or more of the following:*

- (a) analyze biological specimens, apply ionizing radiation and perform electrocardiography procedures,*
- (b) evaluate the results obtained under clause (a) for accuracy and reliability, and*
- (c) provide restricted activities authorized by the regulations.*

**22** Schedule 6, section 3 presently reads:

*3 In their practice, dental technologists do one or more of the following:*

- (a) fabricate, duplicate, alter and repair prosthetic and orthodontic devices,*

**23 Schedule 8 is amended in section 3 by striking out “and” at the end of clause (b) and adding the following after clause (b):**

- (b.1) teach, manage and conduct research in the science, techniques and practice of denturism, and

**24 Schedule 10 is amended in section 3 by striking out “and” at the end of clause (b) and adding the following after clause (b):**

- (b.1) teach, manage and conduct research in the science, techniques and practice of nursing, and

**25 Schedule 12 is amended in section 3**

**(a) by repealing subsection (1)(d) and substituting the following:**

- (d) teach, manage and conduct research in the science, techniques and practice of medical diagnostic and therapeutic technology, and

**(b) in subsection (2) by adding the following after clause (a):**

- (a.1) teach, manage and conduct research in the science, techniques and practice of electroneurophysiology;

- (b) *fit those devices when fitting is incidental to the fabrication, duplication, alteration or repair, and*
- (c) *provide restricted activities authorized by the regulations.*

**23** Schedule 8, section 3 presently reads:

*3 In their practice, denturists do one or more of the following:*

- (a) *assess, diagnose and treat persons missing some or all of their natural teeth,*
- (b) *design, construct, repair, alter and fit any complete or partial denture for the purpose of restoring and maintaining function and appearance, and*
- (c) *provide restricted activities authorized by the regulations.*

**24** Schedule 10, section 3 presently reads:

*3 In their practice, licensed practical nurses do one or more of the following:*

- (a) *apply nursing knowledge, skills and judgment to assess patients' needs,*
- (b) *provide nursing care for patients and families, and*
- (c) *provide restricted activities authorized by the regulations.*

**25** Schedule 12, section 3 presently reads:

*3(1) In their practice, medical diagnostic and therapeutic technologists do one or more of the following:*

- (a) *apply ionizing radiation and other forms of energy to produce diagnostic images,*
- (b) *evaluate the technical sufficiency of the images,*
- (c) *use ionizing radiation and other forms of energy for treatment purposes,*

**26 Schedule 14 is amended in section 3 by striking out “and” at the end of clause (b) and adding the following after clause (b):**

- (b.1) teach, manage and conduct research in the science, techniques and practice of naturopathic medicine, and

**27 Schedule 18 is amended in section 3 by striking out “and” at the end of clause (a) and adding the following after clause (a):**

- (a.1) teach, manage and conduct research in the science, techniques and practice of paramedicine, and



(d) *take part in patient care through interdisciplinary, peer and public education, patient counselling, radiation protection, management and research related to matters described in this subsection, and*

(e) *provide restricted activities authorized by the regulations.*

(2) *In their professional practice, electroneurophysiology technologists do one or more of the following:*

(a) *use sensitive electronic equipment to record and evaluate the electrical activity of patients' central and peripheral nervous systems to assist physicians, surgeons and other health professionals in diagnosing diseases, injuries and abnormalities;*

(b) *provide restricted activities authorized by the regulations.*

**26** Schedule 14, section 3 presently reads:

*3 In their practice, naturopathic practitioners do one or more of the following:*

(a) *promote health, prevent illness and treat disease by using natural therapies and substances that promote the body's ability to heal,*

(b) *focus on the overall health of the individual on the basis of naturopathic assessment and common diagnostic procedures, and*

(c) *provide restricted activities authorized by the regulations.*

**27** Schedule 18, section 3 presently reads:

*3 In their practice, emergency medical technicians, emergency medical technologists and emergency medical responders do one or more of the following:*

(a) *assess an individual's health status to determine the need, priority and method of treatment and transportation in order to provide a range of emergency services, and*

(b) *provide restricted activities authorized by the regulations.*

**28 Schedule 19 is amended**

**(a) in section 2 by adding the following after clause (j):**

- (k) pharmacy technician;
- (l) pharmacy technologist;
- (m) dispensary technician;
- (n) dispensary technologist;
- (o) Pharm. Tech.;
- (p) Ph.T.;
- (q) R.Ph.T.

**(b) by renumbering section 3 as section 3(1) and adding the following after subsection (1):**

**(2)** In their practice, pharmacy technicians promote safe and effective drug distribution and, in relation to that, do one or more of the following under the direction of a pharmacist:

- (a) receive, gather, enter and store prescription and patient information,
- (b) store and repackage products,
- (c) participate in the management of systems for drug distribution and inventory control,
- (d) participate in the research, development, implementation and evaluation of quality assurance and risk management policies, procedures and activities,
- (e) provide restricted activities authorized by the regulations,
- (f) instruct patients about the use of health aids and devices, and
- (g) teach the practice of pharmacy technicians.

**28** Schedule 19, sections 2 and 3 presently read:

*2 A regulated member of the Alberta College of Pharmacists may, as authorized by the regulations, use any of the following titles, abbreviations and initials:*

- (a) pharmacist;*
- (a.1) clinical pharmacist;*
- (b) pharmaceutical chemist;*
- (c) druggist;*
- (d) apothecary;*
- (e) pharmacy intern;*
- (g) pharmacist intern;*
- (g.1) registered pharmacist;*
- (g.2) pharmacy student;*
- (g.3) pharmacist student;*
- (g.4) Pharm. D.;*
- (i) Ph. C.;*
- (j) R. Ph.*

*3 In their practice, pharmacists promote health and prevent and treat diseases, dysfunction and disorders through proper drug therapy and non-drug decisions and, in relation to that, do one or more of the following:*

- (a) assist and advise clients, patients and other health care providers by contributing unique drug and non-drug therapy knowledge on drug and non-drug selection and use,*
- (b) monitor responses and outcomes to drug therapy,*
- (c) compound, prepare and dispense drugs,*
- (d) provide non-prescription drugs, blood products, parenteral nutrition, health care aids and devices,*

**29 Schedule 20 is amended in section 3 by striking out “and” at the end of clause (b) and adding the following after clause (b):**

- (b.1) teach, manage and conduct research in the science, techniques and practice of physical therapy, and

**30 Schedule 21 is amended**

- (a) in the heading to the Schedule by striking out “, Osteopaths and Podiatrists” and substituting “and Osteopaths”;
- (b) by repealing section 1(2) to (7);
- (c) in section 2
  - (i) by repealing clauses (g) to (j), (kkk) and (lll);
  - (ii) by repealing clause (aaaa) and substituting the following:
    - (aaaa) adolescent medicine specialist;

- (e) *supervise and manage drug distribution systems to maintain public safety and drug system security,*
- (f) *educate clients, patients and regulated members of the Alberta College of Pharmacists and of other colleges in matters described in this section,*
- (g) *conduct or collaborate in drug-related research,*
- (h) *conduct or administer drug and other health-related programs, and*
- (i) *provide restricted activities authorized by the regulations.*

**29** Schedule 20, section 3 presently reads:

*3 In their practice, physical therapists do one or more of the following:*

- (a) *assess physical function,*
- (b) *diagnose and treat dysfunction caused by a pain, injury, disease or condition in order to develop, maintain and maximize independence and prevent dysfunction, and*
- (c) *provide restricted activities authorized by the regulations.*

**30** Schedule 21 presently reads in part:

*1(2) On the coming into force of this Schedule,*

- (a) *the corporation known as the Alberta Podiatry Association under the Podiatry Act is dissolved,*
- (b) *the name of the Alberta Association of Podiatric Medicine, a society incorporated under the Societies Act, is, despite the Societies Act, changed to Alberta Podiatry Association,*
- (c) *subject to subsections (3) and (4), all the assets and liabilities of the Alberta Podiatry Association referred to in clause (a) are vested in the Alberta Podiatry Association referred to in clause (b), a society incorporated under the Societies Act, and*

- (bbbb) critical care practitioner;
- (cccc) Doctor of Osteopathic Medicine;
- (dddd) D.O.;
- (eeee) Doctor of Osteopathy;
- (ffff) family medicine practitioner;
- (gggg) medical practitioner;
- (hhhh) osteopathic medical practitioner.

**(d) by repealing section 3(2);**

**(e) in section 5 by striking out “, osteopaths or podiatrists” and substituting “or osteopaths”;**

**(f) by repealing sections 6 and 7;**

**(g) by repealing section 8 and substituting the following:**

**Definitions**

**8** In this section and sections 8.1 to 8.7 of this Schedule,

- (a) “accreditation committee” means the Medical Facility Accreditation Committee;
- (b) “accreditation standard” means an accreditation standard established or adopted by the council under the bylaws of the college;
- (c) “accredited medical facility” means a medical facility that is accredited in accordance with this Schedule;
- (d) “college” means the College of Physicians and Surgeons of Alberta;
- (e) “council” means the council of the college;
- (f) “medical facility” means a facility in which a regulated member provides health services or causes health services to be provided;

*(d) all rights of action by and against the Alberta Podiatry Association referred to in clause (a) are vested in and may be continued and maintained by and against the Alberta Podiatry Association referred to in clause (b), a society incorporated under the Societies Act.*

*(3) On the coming into force of this Schedule the College of Physicians and Surgeons of Alberta has the ownership, custody and control of records of the Alberta Podiatry Association respecting the following:*

- (a) current and former complaints and allegations of professional misconduct or incompetence made against members of the Alberta Podiatry Association under the Podiatry Act and proceedings taken under the Podiatry Act in respect of those complaints and allegations,*
- (b) current and former applications for membership in the Alberta Podiatry Association under the Podiatry Act and the educational qualifications of applicants for membership in, and of members of, the Alberta Podiatry Association under the Podiatry Act,*
- (c) members and former members of the Alberta Podiatry Association under the Podiatry Act and any registers or other material relating to membership and conditions, restrictions or limitations on membership, and*
- (d) decisions and orders made with respect to members or former members of the Alberta Podiatry Association under sections 17 and 18 of the Podiatry Act.*

*(4) On the coming into force of this Schedule, the College of Physicians and Surgeons of Alberta has the ownership, custody and control of the records of the Board of Examiners in Podiatry respecting matters described in section 7(5) of the Podiatry Act.*

*(5) Despite section 35(b) of the Freedom of Information and Protection of Privacy Act, on the coming into force of this Schedule the College of Physicians and Surgeons of Alberta has the ownership, custody and control of records of the Board of Examiners in Podiatry described in subsection (4), and the records must be given to the College of Physicians and Surgeons of Alberta.*

*(6) The Minister may request and collect information and records described in subsection (4) from the College of Physicians and*

- (g) “prescribed health service” means a health service prescribed in the bylaws of the college as a health service that may be provided only in an accredited medical facility or a facility referred to in section 8.1(2);
- (h) “registrar” means the registrar of the college;
- (i) “regulated member” means a regulated member of the college.

**Requirement for accreditation**

**8.1(1)** A regulated member shall not provide a prescribed health service, or cause a prescribed health service to be provided, in a facility unless the facility is an accredited medical facility or a facility referred to in subsection (2).

**(2)** Subsection (1) does not apply with respect to a prescribed health service provided in

- (a) an approved hospital within the meaning of the *Hospitals Act*,
- (b) a hospital operated by the Government of Canada,
- (c) a health care facility operated by the Government of Canada or the Government of Alberta,
- (d) a hospital, clinic or centre operated by a regional health authority under the *Regional Health Authorities Act*,
- (e) a facility within the meaning of the *Mental Health Act* or an accredited health centre established for the purpose of section 49(b) of the *Mental Health Act*, or
- (f) a facility that is prescribed in the regulations.

**(3)** On the coming into force of this section, a medical facility that is accredited by the College of Physicians and Surgeons of Alberta is deemed to be accredited by the accreditation committee under this Schedule until that accreditation expires or is cancelled under this Act.



*Surgeons of Alberta for purposes directly related to or necessary for any proceeding, including preparation for a proceeding, with respect to an action or claim, or with respect to the negotiation or settlement of an action or claim before it is before a Court or while it is before a Court, and the Minister may disclose the information or records collected, as the Minister considers appropriate, in carrying out those purposes.*

*(7) The Alberta Podiatry Association referred to in subsection (2)(b), a society incorporated under the Societies Act, may request and collect information and records described in subsections (3) and (4) from the College of Physicians and Surgeons of Alberta for purposes directly related to or necessary for any proceeding, including preparation for a proceeding, with respect to an action or claim, or with respect to the negotiation or settlement of an action or claim before it is before a Court or while it is before a Court, and the Alberta Podiatry Association referred to in subsection (2)(b), a society incorporated under the Societies Act, may disclose the information or records collected, as it considers appropriate, in carrying out those purposes.*

*2 A regulated member of the College of Physicians and Surgeons of Alberta may, as authorized by the regulations, use any of the following titles, abbreviations and initials:*

- (g) podiatrist;*
- (h) podiatric medical practitioner;*
- (i) podiatric surgeon;*
- (j) podiatric orthopedist;*
- (kkk) doctor of podiatric medicine;*
- (lll) podiatric physician;*
- (aaaa) D.P.M.*

*3(2) In their practice, podiatrists do one or more of the following:*

- (a) diagnose and treat ailments, diseases, deformities and injuries of the human foot, including the articulation of the tibia and fibula and those muscles and tendons directly affecting foot function, including the employment of preventive measures and the use of medical, physical or*

### **Medical Facility Accreditation Committee**

**8.2(1)** The Medical Facility Assessment Committee appointed under the *Medical Profession Act* is continued as the Medical Facility Accreditation Committee under this Act.

- (2) The accreditation committee must
  - (a) carry out its duties under this Schedule, the regulations and the bylaws of the college, and
  - (b) advise the council on any matter relating to the accreditation of a medical facility or to the accreditation process generally.
- (3) Subject to section 51(4) of this Act, a member of the accreditation committee has the powers and duties of a member of a competence committee under section 51(3) of this Act for the purposes of conducting an inspection under this Schedule.
- (4) The accreditation committee may appoint persons who have technical expertise or other relevant knowledge to inquire into and report to the accreditation committee with respect to any matter related to any power or duty of the accreditation committee.
- (5) The accreditation committee may establish advisory committees to inspect medical facilities and advise the accreditation committee, and for that purpose a member of an advisory committee has the powers of a member of the accreditation committee to carry out an inspection.

### **Application for accreditation**

**8.3(1)** The medical director of a medical facility may apply to the registrar in accordance with the regulations for accreditation of that medical facility and for renewal of that accreditation.

- (2) On receipt of an application under subsection (1) the accreditation committee must review the application in accordance with the bylaws and inspect the medical facility to determine if the facility meets the accreditation standards for that type of facility, and may
  - (a) grant or renew, or refuse to grant or to renew, the accreditation of the medical facility;

*surgical methods but not including treatment of systemic disease, except the local manifestations in the foot,*

- (b) engage in research, education and administration with respect to health, and*
- (c) provide restricted activities authorized by the regulations.*

*5 Despite anything in this Act, a regulated member is not guilty of unprofessional conduct or of a lack of competence solely because the regulated member employs a therapy that is non-traditional or departs from the prevailing practices of physicians, surgeons, osteopaths or podiatrists unless it can be demonstrated that the therapy has a safety risk for that patient that is unreasonably greater than that of the traditional or prevailing practices.*

*6(1) There is hereby established a committee of the College of Physicians and Surgeons of Alberta called the Standing Committee on Podiatry consisting of the following members appointed by the council:*

- (a) 3 regulated members who are podiatrists, one of whom must be designated as chair of the Committee, and*
- (b) 2 regulated members who are physicians, surgeons or osteopaths, one of whom is a member of the council of the College of Physicians and Surgeons of Alberta.*

*(2) Subject to subsection (3), the council of the College of Physicians and Surgeons of Alberta must not discuss or vote on any matter specifically pertaining to the practice of podiatry, to podiatrists as a category, or to a particular podiatrist or category of podiatrists, unless*

- (a) the matter is discussed or voted on at a meeting of the council of which the Standing Committee on Podiatry has been notified in accordance with the bylaws, and*
- (b) the chair of the Standing Committee on Podiatry, or another member of the Committee who is a podiatrist and is designated for the purpose by the chair, is permitted by the council*
  - (i) to participate in the discussion of the matter before a vote is taken on it, and*

- (b) impose conditions on the accreditation of the medical facility;
- (c) direct the medical director of the medical facility to make specified changes before the accreditation of the medical facility will be granted or renewed;
- (d) grant or renew the accreditation of the medical facility for a specified time period of up to 5 years.

**(3) If the accreditation committee**

- (a) refuses to grant or renew the accreditation of a medical facility,
- (b) imposes conditions on the accreditation of a medical facility, or
- (c) directs the medical director of the medical facility to make specified changes,

the accreditation committee must give written reasons for that decision to the medical director of the medical facility.

**(4) The medical director of a medical facility must ensure that a medical facility is accredited before the medical director permits a prescribed health service to be provided in the medical facility.**

**Inspections of medical facilities**

**8.4(1)** The accreditation committee may, at any reasonable time, inspect an accredited medical facility to determine whether

- (a) the medical facility continues to meet the accreditation standards for that type of facility,
- (b) conditions imposed on the accreditation of the medical facility under section 8.3 of this Schedule are being complied with, or
- (c) the medical director of the medical facility has made changes required by the accreditation committee under section 8.3(2)(c) of this Schedule.

- (ii) *if the Standing Committee on Podiatry has prepared a report and recommendations on the matter, to present the report and recommendations before a vote is taken on the matter.*

*(3) Subsection (2) does not apply to proceedings of the council under Part 4 relating to a podiatrist.*

*7 In accordance with the bylaws,*

- (a) *if no regulated member who is a podiatrist is elected as a member of the council of the College of Physicians and Surgeons of Alberta, one regulated member who is a podiatrist must be appointed as a member of the council;*
- (b) *at least one regulated member who is a podiatrist must be appointed as a member of any committee, tribunal or panel of the College of Physicians and Surgeons of Alberta when any of those bodies*
  - (i) *considers or hears a matter affecting, or makes a decision about, a podiatrist, whether related to professional conduct, competence or any other matter, or*
  - (ii) *considers or makes a decision on an application for registration or renewal of registration, or an application for or renewal of a practice permit, of a podiatrist;*
- (c) *the registrar must consult with the Standing Committee on Podiatry before making decisions on the registration of a regulated member as a podiatrist under section 16 of this Schedule.*

*8(1) This section applies to all facilities in which regulated members of the College of Physicians and Surgeons of Alberta provide or cause to be provided diagnostic or treatment services, but does not apply to*

- (a) *an approved hospital within the meaning of the Hospitals Act,*
- (b) *a hospital operated by the federal government,*
- (c) *a health care facility operated by the federal government or the Government of Alberta,*

(2) The accreditation committee may, at any reasonable time, inspect a medical facility that is not an accredited medical facility to determine whether prescribed health services are being provided in the medical facility in contravention of section 8.1 of this Schedule.

(3) On completion of an inspection, the accreditation committee may decide to do any of the following:

- (a) direct the medical director of the medical facility to make specified changes within a specified time period;
- (b) direct the medical director to cease providing prescribed health services in the medical facility until the changes directed under clause (a) have been made to the accreditation committee's satisfaction;
- (c) impose conditions, or vary existing conditions, on the accreditation of the medical facility;
- (d) revoke the accreditation of the medical facility.

(4) The accreditation committee must provide an inspection report and a copy of the written reasons for a decision made under subsection (3) to the registrar and to the medical director of the medical facility.

#### **Appeal of accreditation committee's decision**

**8.5(1)** The medical director of a medical facility may appeal an accreditation committee's decision under section 8.3 or 8.4 of this Schedule to the council by written notice of appeal that states the grounds for the appeal.

(2) A notice of appeal must be given to the registrar within 15 days after the date on which a copy of the decision was given to the medical director.

(3) The registrar must, on being given a notice of appeal, give a copy of the notice of appeal, and make the inspection report of the accreditation committee available, to each member of the council.

(4) The council must schedule an appeal hearing within 30 days after the date on which the registrar is given the notice of appeal, and the registrar must, as soon as possible, notify the

- (d) *a hospital, clinic or centre operated by the Alberta Alcohol and Drug Abuse Commission, or*
- (e) *a facility within the meaning of the Mental Health Act or a diagnostic and treatment centre established for the purpose of section 49(b) of the Mental Health Act.*

*(2) The council may, for the protection of the public and to promote the continuing competent and ethical practice of physicians, surgeons, osteopaths and podiatrists, grant accreditation to or continue the accreditation of a facility where regulated members of the College of Physicians and Surgeons of Alberta provide or propose to provide diagnostic or treatment services, including prescribing and administering drugs and conducting surgical procedures, with or without anesthetic, as specified in the regulations, that are of a specialized nature and that, in the opinion of the council,*

- (a) cannot be safely provided in a medical office or clinic, but*
- (b) can be safely provided outside an approved hospital within the meaning of the Hospitals Act.*

*(3) A regulated member of the College of Physicians and Surgeons of Alberta shall not provide or cause to be provided diagnostic or treatment services in a facility that, in the opinion of council, requires accreditation under this section unless accreditation has been granted to that facility by the council.*

*(4) The council may make regulations respecting*

- (a) the establishment and operation, including the requirement for medical directors, of facilities that require or are granted accreditation under this section;*
- (b) the provision of diagnostic or treatment services by regulated members of the College of Physicians and Surgeons of Alberta in facilities that require or are granted accreditation under this section;*
- (c) subject to sections 97 to 100 of this Act, the ownership of the practice of physicians, surgeons, osteopaths and podiatrists and the financial and contractual arrangements with respect to the provision of diagnostic or treatment services by the regulated members in facilities that require or are granted accreditation under this section;*

medical director of the medical facility of the date, time and place of the appeal hearing.

(5) The chair of the accreditation committee, the appellant and the medical director of the medical facility may appear and be represented by counsel at the appeal hearing.

(6) The council may

- (a) grant adjournments of the proceedings, or reserve the determination of the matters before it, for a future meeting of the council,
- (b) on hearing an application for leave to introduce new evidence, direct the accreditation committee to hear that evidence and to reconsider its decision and vary, quash or confirm the decision,
- (c) vary, quash or confirm the decision of the accreditation committee, or
- (d) order that the matter be referred back to the accreditation committee for further assessment and that the accreditation committee report back to the council for the council's consideration on the appeal.

(7) The council must issue its decision at or within a reasonable time after the conclusion of the appeal hearing.

#### **Unprofessional conduct**

**8.6(1)** For the purposes of Part 4, it is unprofessional conduct for a regulated member of the college

- (a) to contravene section 8.1(1) of this Schedule, or
- (b) to fail or refuse to co-operate with the accreditation committee.

(2) The accreditation committee or a member of the accreditation committee must make a referral to the complaints director if, on the basis of information obtained pursuant to carrying out powers and duties under this Schedule, the accreditation committee or member is of the opinion that a regulated member may be guilty of unprofessional conduct.



*(d) the diagnostic or treatment services that may be provided by regulated members of the College of Physicians and Surgeons of Alberta in a facility that requires or has been granted accreditation under this section.*

*(5) A regulation under subsection (4) does not come into force unless it is approved by the Lieutenant Governor in Council.*

*(6) The council may establish a medical facility assessment committee to investigate and inspect facilities and proposed facilities in which regulated members of the College of Physicians and Surgeons of Alberta offer or propose to offer diagnostic or treatment services described in subsection (2) or (4)(d) for the purpose of advising the council on the practice of physicians, surgeons, osteopaths and podiatrists conducted by those regulated members, including advice respecting*

*(a) the ownership and operation or the proposed ownership and operation of the practice of physicians, surgeons, osteopaths and podiatrists in the facilities;*

*(b) the financial and contractual arrangements for the provision of diagnostic or treatment services in the facilities;*

*(c) the diagnostic or treatment services appropriate to be provided in the facilities;*

*(d) the standard of care appropriate and required for the provision of the diagnostic or treatment services in the facilities;*

*(e) whether the results of any inspection of a facility were satisfactory;*

*(f) establishing the standard of care to be provided or that is being provided to patients in the facilities;*

*(g) the granting of accreditation or the continuation of a grant of accreditation of a facility under this section.*

*(7) The medical facility assessment committee must, on completion of an inspection under subsection (6), provide a report of its findings to the council and to the medical director of the facility.*

*(8) If the medical facility assessment committee provides a report to the council stating that an accredited facility or a proposed accredited facility does not meet the requirements established in the*

## **Bylaws**

### **8.7** The council may make bylaws

- (a) respecting the establishment and operation of medical facilities that require or are granted accreditation under this Schedule;
  - (b) prescribing health services that may be provided only in an accredited medical facility;
  - (c) prescribing facilities for the purpose of section 8.1(2)(f) of this Schedule;
  - (d) respecting the powers and duties of the accreditation committee;
  - (e) respecting accreditation standards, including the contents, adoption and amendment of accreditation standards;
  - (f) respecting the type of medical facility to which each standard applies;
  - (g) respecting applications for accreditation or the renewal of accreditation;
  - (h) subject to sections 97 to 100 of this Act, respecting the ownership of the practice of physicians, surgeons and osteopaths and the financial and contractual arrangements with respect to the provision of prescribed health services by regulated members in medical facilities that require or are granted accreditation under this Schedule;
  - (i) describing the services that are major surgical services and minor surgical services for the purposes of section 2(2) and 29(r) of the *Health Care Protection Act*;
  - (j) prescribing the kind or degree of risk for the purposes of section 29(r) of the *Health Care Protection Act*.
- (h) by repealing sections 9 to 13;**
- (i) in section 14**

*regulations, the medical facility assessment committee must also provide a copy of the report to the medical director of the facility, who may appeal the report to the council.*

*(9) An appeal by the medical director of a facility must be by a written notice of appeal and must*

*(a) identify the report appealed from, and*

*(b) state the reasons for the appeal.*

*(10) A notice of appeal must be given to the registrar by the medical director of the facility within 15 days after the date that the report was given to the medical director of the facility.*

*(11) The registrar must, on receiving a notice of appeal, provide a copy of the notice of appeal and the report of the medical facility assessment committee to each member of the council or of its delegates.*

*(12) The council must schedule an appeal hearing within 30 days after the date the registrar is given the notice of appeal, and the registrar must, as soon as possible, notify the medical director of the facility of the date, time and place of the appeal hearing.*

*(13) The chair of the medical facility assessment committee and the medical director of the facility may appear and be represented by counsel at the appeal hearing.*

*(14) An appeal to the council must be based on the report of the medical facility assessment committee.*

*(15) An appeal hearing must be open to the public unless an application is granted in accordance with section 78 of this Act.*

*(16) Sections 84 and 85 of this Act apply to the record resulting from the appeal.*

*(17) The council may*

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

*(b) on granting special leave, receive further evidence,*

- (i) **in clause (e) by striking out** “, but may be referred to as the Performance Committee”;
- (ii) **by adding the following after clause (h):**
  - (i) the members of the Medical Facility Assessment Committee under the *Medical Profession Act* continue as members of the Medical Facility Accreditation Committee under this Act for the same terms of office unless their terms are terminated earlier under this Act;
- (j) **by repealing section 15(4);**
- (k) **by repealing section 16(3) to (5);**
- (l) **in section 18(2)**
  - (i) **in clause (a) by striking out** “the Performance Committee” **wherever it occurs and substituting** “the competence committee”;
  - (ii) **in clause (d)**
    - (A) **by striking out** “by an Appeal Committee” **and substituting** “by the council”;
    - (B) **by striking out** “to the Appeal Committee under” **and substituting** “to the council under”;
- (m) **in section 19**
  - (i) **in subsection (2)**
    - (A) **by adding** “and” **at the end of clause (a) and repealing clause (b);**
    - (B) **in clause (c) by striking out** “or a member of the Alberta Podiatry Association under the *Podiatry Act*”;
  - (ii) **by repealing subsections (3) and (9) to (13).**

- (c) vary, quash or confirm the findings of the medical facility assessment committee,
- (d) make any other finding that in its opinion ought to have been made, and
- (e) order that the matter be referred back to the medical facility assessment committee for further assessment and that the medical facility assessment committee report back to the council for the council's consideration on the appeal.

(18) The council must issue its decision at or within a reasonable time after the conclusion of all proceedings under subsections (6) to (17).

(19) For the purposes of Part 4, it is unprofessional conduct for a regulated member of the College of Physicians and Surgeons of Alberta

- (a) to provide or cause to be provided diagnostic or treatment services in a facility that requires accreditation under this section but is not accredited;
- (b) to provide or cause to be provided diagnostic or treatment services that are not allowed in the accreditation granted pursuant to the regulations under this section;
- (c) on and after the coming into force of the Health Care Protection Act, to provide or cause to be provided diagnostic or treatment services in a surgical facility that is not designated as required under Part 2 of the Health Care Protection Act.

9(1) Despite Part 1, the competence committee of the College of Physicians and Surgeons of Alberta is hereby established and may be called the Performance Committee, and it must have at least 5 members and not more than 9 members consisting of

- (a) members from the categories of regulated members required by the bylaws, and
- (b) one member of the public who is not a physician, surgeon, osteopath or podiatrist.

(2) The council must designate annually a member of the Performance Committee to act as chair.



*(3) If the Performance Committee establishes a subcommittee under section 10(2) of this Schedule to conduct a practice visit under section 11(2)(b) of this Schedule, at least one member of the subcommittee must possess competence respecting the area of practice under assessment.*

*10(1) The Performance Committee may adopt the bylaws of the council for the conduct of its business or, with the approval of the council, may establish its own rules and procedures.*

*(2) The Performance Committee may establish one or more subcommittees consisting of one or more persons who are not members of the Performance Committee to perform the duties and functions and exercise the powers of the Performance Committee.*

*(3) Any decision or other action made or taken under this Act by a subcommittee of the Performance Committee is the decision or action of the Performance Committee.*

*(4) Members of the Performance Committee or a subcommittee established under subsection (2) may be paid fees for attendance and reasonable travelling expenses in accordance with the bylaws.*

*11(1) The Performance Committee may, in accordance with the regulations, conduct a general assessment of the competence of each regulated member of the College of Physicians and Surgeons of Alberta once every 5 years.*

*(2) Within 90 days after completing a general assessment of a regulated member, the Performance Committee must prepare a report containing its findings, give a copy of the report to the regulated member and direct that*

- (a) no further compliance with directions imposed in accordance with the regulations be undertaken,*
- (b) the regulated member participate in a practice visit, or*
- (c) the regulated member comply with directions imposed in accordance with the regulations.*

*(3) Part 3 and the regulations under Part 8 apply to the practice visit and action referred to in subsections (2)(b) and (c) and (4)(b), but if there is a conflict between subsection (4) or (5) and Part 3 and the regulations under Part 8, subsections (4) and (5) prevail.*





*(4) Within 90 days after completing a practice visit, the Performance Committee must prepare a report containing its findings, give a copy of the report to the regulated member and*

- (a) direct that no further compliance with directions imposed in accordance with the regulations be undertaken,*
- (b) direct that the regulated member comply with directions imposed in accordance with the regulations, or*
- (c) refer the matter to the complaints director.*

*(5) The Performance Committee must refer a matter to the complaints director as information under section 56 or 118 of this Act if the Performance Committee is of the opinion that the regulated member*

- (a) may be guilty of unprofessional conduct or criminal conduct, whether in a professional capacity or otherwise,*
- (b) may be incapacitated, or*
- (c) displays a lack of skill or judgment in carrying out the professional practice that has not been remedied by participation in a continuing competence program.*

*(6) The council may make regulations respecting general assessments.*

*(7) A regulation under subsection (6) does not come into force unless it is approved by the Lieutenant Governor in Council.*

*12(1) An Appeal Committee is hereby established consisting of the members provided for by the bylaws.*

*(2) A regulated member who receives a direction from the Performance Committee under section 11(2) or (4) of this Schedule*

- (a) may appeal to the Appeal Committee by filing a notice of appeal with the registrar within 30 days after the date of being given the direction, and the registrar must give a copy of the notice of appeal to the Performance Committee, and*
- (b) may apply in writing to the president to stay the decision of the Performance Committee pending the appeal, and the president must decide, as soon as possible, whether to grant a stay.*



*(3) A notice of appeal under subsection (2) must*

- (a) be in writing, and*
- (b) set out the grounds for the appeal.*

*(4) On being given a copy of a notice of appeal by the registrar, the Performance Committee must prepare a report including a copy of the notice of appeal and must forward to the Appeal Committee the report and a statement of any direction given to the regulated member.*

*(5) The Appeal Committee must schedule the hearing of the appeal within 30 days after being given the notice of appeal, and the registrar must, as soon as possible, notify the appellant of the date, time and place of the appeal hearing.*

*(6) The Appeal Committee must consider the report and direction and must*

- (a) hear any representation that the regulated member or the regulated member's counsel wishes to make respecting the report and directions, and*
- (b) hear any representation by counsel representing the Performance Committee.*

*(7) The Appeal Committee may*

- (a) confirm, reverse or vary the direction appealed and make any direction that the Performance Committee could have made, and*
- (b) make any further order the Appeal Committee considers necessary for the purposes of carrying out its decision.*

*(8) The regulated member must comply with the decision of the Appeal Committee or any further order of the Appeal Committee under subsection (7).*

*14 On the coming into force of this Schedule,*

- (d) the members of the Appeal Committee of the College of Physicians and Surgeons of Alberta under the Medical Profession Act continue as members of the Appeal Committee of the College of Physicians and Surgeons of Alberta under*



*this Act for the same terms of office unless their terms are terminated earlier under this Act;*

- (e) the members of the Physician Performance Committee of the College of Physicians and Surgeons of Alberta under the Medical Profession Act continue as members of the competence committee of the College of Physicians and Surgeons of Alberta under this Act for the same terms of office unless their terms are terminated earlier under this Act, but may be referred to as the Performance Committee;*
- (h) despite clause (d), if a notice of appeal is filed under section 38(2) of the Medical Profession Act and the hearing is not concluded, the members of the Appeal Committee continue as members of the Appeal Committee for the purposes of the review and as members of the Appeal Committee under this Schedule for the same term of office unless their terms are terminated earlier under this Act.*

*15(4) On the coming into force of this Schedule, a person who is a member of the Alberta Podiatry Association under the Podiatry Act is deemed to be a regulated member of the College of Physicians and Surgeons of Alberta and deemed to have been issued a practice permit that is subject to*

- (a) the same conditions on practice imposed by the Alberta Podiatry Association under the Podiatry Act that existed, on the coming into force of this Schedule, with respect to that person under the Podiatry Act, and*
- (b) the same authority and conditions on the practice of a podiatrist under the Drugs, Chemicals and Compounds Regulation (AR 21/99), that existed on the coming into force of this Schedule,*

*until the practice permit expires, is modified or cancelled under this Act.*

*16(3) On the coming into force of this Schedule, an application for registration under the Podiatry Act that is not concluded must be concluded in accordance with that Act, but the registrar may issue a practice permit and impose conditions on the practice permit under this Act.*



*(4) A decision of the registrar under subsection (3) may be appealed to the council of the College of Physicians and Surgeons of Alberta in accordance with sections 31 and 32 of this Act.*

*(5) For the purposes of subsection (3), the powers and duties*

*(a) of the Council of Management and of the Board of Examiners in Podiatry under the Podiatry Act are vested in and may be exercised by the registrar of the College of Physicians and Surgeons of Alberta under this Act, and any reference to the Council of Management or the Board of Examiners in the Podiatry Act is deemed to be a reference to the registrar under this Act;*

*(b) of the registrar under the Podiatry Act are vested in and may be exercised by the registrar of the College of Physicians and Surgeons of Alberta under this Act, and any reference to the registrar in the Podiatry Act is deemed to be a reference to the registrar under this Act;*

*(c) of the Minister under section 8(5) of the Podiatry Act remain with the Minister.*

*18(2) For the purposes of subsection (1), the powers and duties*

*(a) of the Physician Performance Committee under the Medical Profession Act are vested in and may be exercised by the Performance Committee of the College of Physicians and Surgeons of Alberta under this Act, and any reference to the Physician Performance Committee in the Medical Profession Act is deemed to be a reference to the Performance Committee under this Act;*

*(d) of the Appeal Committee under the Medical Profession Act are vested in and may be exercised by an Appeal Committee of the College of Physicians and Surgeons of Alberta under this Act, and any reference to the Appeal Committee in the Medical Profession Act is deemed to be a reference to the Appeal Committee under this Act.*

*19(2) Subsection (1) applies to*

*(b) a person who was a member of the Alberta Podiatry Association under the Podiatry Act when the conduct that was the subject of the complaint was alleged to have occurred, but only if the complaint was made within the 2*





*years of that person ceasing to be a registered practitioner,  
and*

*(c) a regulated member of the College of Physicians and Surgeons of Alberta who was a registered practitioner under the Medical Profession Act or a member of the Alberta Podiatry Association under the Podiatry Act when the conduct that was the subject of the complaint was alleged to have occurred.*

*(3) In dealing with a complaint about a podiatrist under subsection (2)(b), the podiatrist is deemed to have been a regulated member of the College of Physicians and Surgeons of Alberta when the conduct that was the subject of the complaint is alleged to have occurred.*

*(9) On the coming into force of this Schedule, any proceedings with respect to a complaint under the Podiatry Act made before the coming into force of this Schedule that have not been concluded must be concluded in accordance with that Act.*

*(10) Subject to subsection (11), for the purposes of subsection (9), the powers and duties*

*(a) of the registrar under the Podiatry Act are vested in and may be exercised by the complaints director of the College of Physicians and Surgeons of Alberta under this Act, and any reference to the registrar in the Podiatry Act is deemed to be a reference to the complaints director under this Act;*

*(b) of the Council of Management under the Podiatry Act are vested in and may be exercised by a hearing tribunal of the College of Physicians and Surgeons of Alberta, and any reference to the Council in the Podiatry Act is deemed to be a reference to the hearing tribunal under this Act;*

*(c) of the Association under the Podiatry Act are vested in and may be exercised by the College of Physicians and Surgeons of Alberta under this Act, and any reference to the Association in the Podiatry Act is deemed to be a reference to the College of Physicians and Surgeons of Alberta.*

*(11) If on the coming into force of this Schedule the Council of Management under the Podiatry Act has commenced but not concluded hearing a matter, the Council and those members hearing the matter must continue until a written decision is made under the*

**31 The following is added after Schedule 21:**

**Schedule 21.1**

**Profession of Podiatrists**

**College, Association and records**

**1(1)** On the coming into force of this Schedule, the Alberta Podiatry Association under the *Podiatry Act* is continued as a corporation under the name College of Podiatric Physicians of Alberta.

**(2)** Despite section 35(b) of the *Freedom of Information and Protection of Privacy Act*, on the coming into force of this Schedule the College of Podiatric Physicians of Alberta has the ownership, custody and control of the records of the Board of Examiners in Podiatry respecting matters described in section 7(5) of the *Podiatry Act*, and the records must be given to the College of Podiatric Physicians of Alberta.

**(3)** The Minister may request and collect information and the records described in subsection (2) from the College of Podiatric Physicians of Alberta for purposes directly related to or necessary for any proceeding, including preparation for a proceeding, with respect to an action or claim, or with respect to the negotiation or settlement of an action or claim before it is before a Court or while it is before a Court, and the Minister may disclose the information or records collected, as the Minister considers appropriate, in carrying out those purposes.

*Podiatry Act as if this Schedule and Part 4 had not come into force and the Podiatry Act had not been repealed.*

*(12) For the purposes of subsections (9) and (11), a reference in section 17 of the Podiatry Act to the registration of an investigated member is deemed to be a reference to the registration and practice permit of a regulated member under this Act.*

*(13) On the coming into force of this Schedule, every order of the Council of Management made under section 17 or 18 of the Podiatry Act is deemed to be an order of the council of the College of Physicians and Surgeons of Alberta, and may be amended or cancelled by the council under this Act.*

**31** New Schedule dealing with podiatrists.

**Use of titles**

**2** A regulated member of the College of Podiatric Physicians of Alberta may, as authorized by the regulations, use any of the following titles, abbreviations and initials:

- (a) podiatrist;
- (b) podiatric medical practitioner;
- (c) podiatric surgeon;
- (d) podiatric orthopedist;
- (e) podiatric physician;
- (f) doctor of podiatric medicine;
- (g) doctor;
- (h) D.P.M.
- (i) Dr.

**Practice**

**3** In their practice, podiatrists do one or more of the following:

- (a) diagnose and treat ailments, diseases, deformities and injuries of the human foot, including the articulation of the tibia and fibula and those muscles and tendons directly affecting foot function, including the employment of preventive measures and the use of medical, physical or surgical methods but not including treatment of systemic disease, except the local manifestations in the foot,
- (b) engage in research, education and administration with respect to health, and
- (c) provide restricted activities authorized by the regulations.

**Fines**

**4** Column 3 of the unprofessional conduct fines table applies to proceedings of the College of Podiatric Physicians of Alberta under Part 4.



**Transitional**

**5** On the coming into force of this Schedule,

- (a) the members of the Council of Management of the Alberta Podiatry Association under the *Podiatry Act* continue as members of the council of the College of Podiatric Physicians of Alberta under this Act for the same terms of office unless their terms are terminated earlier under this Act;
- (b) the registrar of the Alberta Podiatry Association under the *Podiatry Act* continues as the registrar of the College of Podiatric Physicians of Alberta under this Act for the same term of office unless the term is terminated earlier under this Act.

**Transitional**

**6** On the coming into force of this Schedule, a person who is a member of the Alberta Podiatry Association under the *Podiatry Act* is deemed to be a regulated member of the College of Podiatric Physicians of Alberta and deemed to have been issued a practice permit that is subject to

- (a) the same conditions on practice imposed by the Alberta Podiatry Association under the *Podiatry Act* that existed, on the coming into force of this Schedule, with respect to that person under the *Podiatry Act*, and
- (b) the same authority and conditions on the practice of a podiatrist under the *Drugs, Chemicals and Compounds Regulation* (AR 21/99) that existed on the coming into force of this Schedule,

until the practice permit expires, is modified or is cancelled under this Act.

**Transitional**

**7(1)** On the coming into force of this Schedule, an application for registration under the *Podiatry Act* that is not concluded must be concluded in accordance with that Act, but the registrar may issue a practice permit and impose conditions on the practice permit under this Act.



(2) A decision of the registrar under subsection (1) may be reviewed by the council of the College of Podiatric Physicians of Alberta in accordance with sections 31 and 32 of this Act.

(3) For the purposes of subsection (1), the powers and duties

- (a) of the Council of Management and of the Board of Examiners in Podiatry under the *Podiatry Act* are vested in and may be exercised by the registrar of the College of Podiatric Physicians of Alberta under this Act, and any reference to the Council of Management or the Board of Examiners in the *Podiatry Act* is deemed to be a reference to the registrar under this Act;
- (b) of the registrar under the *Podiatry Act* are vested in and may be exercised by the registrar of the College of Podiatric Physicians of Alberta under this Act, and any reference to the registrar in the *Podiatry Act* is deemed to be a reference to the registrar under this Act;
- (c) of the Minister under section 8(5) of the *Podiatry Act* remain with the Minister.

#### **Transitional**

**8(1)** Any complaint made after this Schedule comes into force with respect to a person described in subsection (2) that relates to conduct that occurred all or partly before the coming into force of this Schedule must be dealt with under this Act.

(2) Subsection (1) applies to

- (a) a person who was a member of the Alberta Podiatry Association under the *Podiatry Act* when the conduct that is the subject of the complaint is alleged to have occurred but is not a regulated member of the College of Podiatric Physicians of Alberta, but only if the complaint was made within 2 years of that person's ceasing to be a registered practitioner, and
- (b) a regulated member of the College of Podiatric Physicians of Alberta who was a member of the Alberta Podiatry Association under the *Podiatry Act* when the conduct that is the subject of the complaint is alleged to have occurred.





(3) On the coming into force of this Schedule, any proceedings with respect to a complaint under the *Podiatry Act* made before the coming into force of this Schedule that have not been concluded must be concluded in accordance with that Act.

(4) Subject to subsection (5), for the purposes of subsection (3), the powers and duties

- (a) of the registrar under the *Podiatry Act* are vested in and may be exercised by the complaints director of the College of Podiatric Physicians of Alberta under this Act, and any reference to the registrar in the *Podiatry Act* is deemed to be a reference to the complaints director under this Act;
- (b) of the Council of Management under the *Podiatry Act* are vested in and may be exercised by a hearing tribunal of the College of Podiatric Physicians of Alberta, and any reference to the Council in the *Podiatry Act* is deemed to a reference to a hearing tribunal under this Act;
- (c) of the Alberta Podiatry Association under the *Podiatry Act* are vested in and may be exercised by the College of Podiatric Physicians of Alberta under this Act, and any reference to the Association in the *Podiatry Act* is deemed to be a reference to the College of Podiatric Physicians of Alberta.

(5) If on the coming into force of this Schedule the Council of Management under the *Podiatry Act* has commenced but not concluded hearing a matter, the Council and those members hearing the matter must continue until a written decision is made under the *Podiatry Act* as if this Schedule and Part 4 had not come into force and the *Podiatry Act* had not been repealed.

(6) For the purposes of subsections (3) and (5), a reference in section 17 of the *Podiatry Act* to the registration of an investigated member is deemed to be a reference to the registration and practice permit of a regulated member under this Act.

(7) On the coming into force of this Schedule, every order of the Council of Management made under section 17 or 18 of the



*Podiatry Act* is deemed to be an order of the council of the College of Podiatric Physicians of Alberta, and may be amended or cancelled by the council under this Act.

**32 Schedule 22 is amended in section 3 by adding the following after clause (b):**

- (b.1) manage and conduct research in the science, techniques and practice of psychology;

**33 Schedule 23 is amended in section 3 by striking out “and” at the end of clause (c) and adding the following after clause (c):**

- (c.1) teach, manage and conduct research in the science, techniques and practice of dietetics, and

**32** Schedule 22, section 3 presently reads:

*3 In their practice, registered dietitians and registered nutritionists do one or more of the following:*

- (a) assess nutritional status and develop, implement and evaluate food and nutrition strategies and interventions to promote health and treat illness,*
- (b) apply food and nutrition principles to the management of food service systems and to the development and analysis of food and food products,*
- (c) promote optimal health, food security and food safety through the development and delivery of food and nutrition education, programs and policies, and*
- (d) provide restricted activities authorized by the regulations.*

**33** Schedule 23, section 3 presently reads:

*3 In their practice, registered dietitians and registered nutritionists do one or more of the following:*

- (a) assess nutritional status and develop, implement and evaluate food and nutrition strategies and interventions to promote health and treat illness,*
- (b) apply food and nutrition principles to the management of food service systems and to the development and analysis of food and food products,*
- (c) promote optimal health, food security and food safety through the development and delivery of food and nutrition education, programs and policies, and*
- (d) provide restricted activities authorized by the regulations.*

**34 Schedule 26 is amended**

**(a) in section 2 by adding the following after clause (b.2):**

(b.3) respiratory care practitioner in anesthesia;

**(b) in section 3 by striking out “and” at the end of clause (a) and adding the following after clause (a):**

(a.1) teach, manage and conduct research in the science, techniques and practice of respiratory therapy, and

**35 Schedule 27 is amended in section 3 by striking out “and” at the end of clause (c) and adding the following after clause (c):**

(c.1) teach, manage and conduct research in the science, techniques and practice of social work, and

**34** Schedule 26, sections 2 and 3 presently read:

*2 A regulated member of the College and Association of Respiratory Therapists of Alberta may, in accordance with the regulations, use any of the following titles, abbreviations and initials:*

- (a) registered respiratory technologist;*
- (b) registered respiratory therapist;*
- (b.1) respiratory therapist;*
- (b.2) respiratory care practitioner;*
- (c) respiratory technologist;*
- (c.1) provisional respiratory therapist;*
- (d) R.R.T.*

*3 In their practice, respiratory therapists do one or more of the following:*

- (a) provide basic and advanced cardio-respiratory support services to assist in the diagnosis, treatment and care of persons with cardio-respiratory and related disorders, and*
- (b) provide restricted activities authorized by the regulations.*

**35** Schedule 27, section 3 presently reads:

*3 In their practice, social workers do one or more of the following:*

- (a) enhance or restore the social functioning of individuals, families, groups, organizations and communities by improving developmental, problem-solving and coping capacities of people and systems,*
- (b) promote effective and humane systems that provide resources, opportunities and services to people and link people to those systems,*
- (c) contribute to the development and improvement of social policy, and*

**36(1) The *Mental Health Act* is amended by repealing section 1(1)(l) and substituting the following:**

- (l) “psychiatrist” means a regulated member of the College of Physicians and Surgeons of Alberta who is authorized to use the title “psychiatrist”;

**(2) If section 2 of the *Mental Health Amendment Act, 2007* comes into force before section 18(g) of this Act comes into force, section 18(g) of this Act is repealed.**

**(3) If section 18(g) of this Act comes into force before section 2 of the *Mental Health Amendment Act, 2007* comes into force, subsection (1) is repealed.**

**37 The *Pharmacy and Drug Act* is amended**

**(a) in section 1(1)**

**(i) by repealing clause (r) and substituting the following:**

- (r) “pharmacist” means an individual who is registered as a regulated member of the college under the *Health Professions Act* on the clinical register, the provisional register, the courtesy register or the student register and who holds a practice permit issued under that Act;

**(ii) by adding the following after clause (s.1):**

- (s.2) “pharmacy technician” means an individual who is registered as a regulated member of the college under the *Health Professions Act* on the pharmacy technician register and who holds a practice permit issued under that Act;

**(iii) by repealing clause (t);**

**(iv) in clause (y)(ii) by striking out “pharmacists and pharmacy interns, if any,” and substituting “regulated members”;**



*(d) provide restricted activities authorized by the regulations.*

**36** Consequential amendment to chapter M-13 of the Revised Statutes of Alberta 2000.

**37** Consequential amendments to chapter P-12 of the Revised Statutes of Alberta 2000.

- (b) in section 6(2) by striking out “pharmacist” and substituting “regulated member”;**
- (c) in section 26(1)(e) and (2) by striking out “pharmacist” and substituting “regulated member”;**
- (d) in section 32(3) by striking out “pharmacist” and substituting “regulated member”;**
- (e) in section 33(3) by striking out “pharmacist” and substituting “regulated member”;**
- (f) in section 42(2) by striking out “pharmacist, pharmacy intern” and substituting “regulated member”.**

**38 This Act comes into force on Proclamation.**

**38** Coming into force.

