

GUIDELINES

FOR INTERPRETING

THE CONFIDENTIALITY AND DISCLOSURE

PROVISIONS OF THE

ALBERTA ALCOHOL AND DRUG ABUSE ACT

Amended
June 2006

Alberta Alcohol and Drug Abuse Commission
An Agency of the Government of Alberta

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1. Background

Protection of privacy has been part of professional practice within the Alberta Alcohol and Drug Abuse Commission (AADAC) since the Commission first appeared as the Alcoholism Foundation of Alberta in 1951. AADAC's governing legislation, the Alberta *Alcohol and Drug Abuse Act* (see Appendix One), recognizes the importance of confidentiality and prohibits the disclosure of individual client information.

Assurance of confidentiality is an important component of addiction treatment as it provides clients with protection from being identified as having problems associated with alcohol, other drugs or gambling. Confidentiality and protection of privacy are important to the therapeutic process and are needed to ensure that AADAC's reputation as a provider of professional and confidential services is safeguarded.

These guidelines expand on AADAC's Policy on the Confidentiality and Disclosure Provisions of the Alberta *Alcohol and Drug Abuse Act*. The guidelines have a broad focus. They do not address individual or specific situations but rather provide a consistent interpretation of AADAC's confidentiality requirements. Operational decisions about the handling of confidential client information must comply with these guidelines. Concerns about the application of these guidelines must be discussed with an immediate supervisor or manager and if necessary with more senior management.

These guidelines have been developed in consultation with AADAC staff and management and have been reviewed by Alberta Justice. These guidelines reflect AADAC's governing legislation. However, only a Court of Law can make a final interpretation of the disclosure provisions contained in the Alberta *Alcohol and Drug Abuse Act*. Staff are cautioned to exercise prudence in handling client information and to discuss questionable situations with their immediate supervisor or manager.

2. Prohibition Against Disclosure of Client Information

Section 9 of the Alberta *Alcohol and Drug Abuse Act* provides:

A person who is or has been a member or employee of the Commission or is or has been employed or engaged in the administration of this Act shall not disclose or be compelled to disclose any information obtained by the person that names or identifies a client who has been provided with treatment, care or services by the Commission, and any file, record, document or paper in the custody of the Commission that names or identifies a client who has been provided with treatment, care or services by the Commission shall not be disclosed to any person or admitted in evidence in any proceedings.

Electronic records such as AADAC System for Information and Service Tracking (ASIST) are covered by this provision and must be treated as confidential documents.

The Act states: “*client*” means a person who has been provided with treatment, care or other services by the Commission or at a hospital, clinic, or centre operated by the Commission. Anyone who is provided information, prevention or treatment services by the commission is protected under these guidelines.

Section 9 of the *Alcohol and Drug Abuse Act* supersedes the provisions of the *Health Information Act* and the *Freedom of Information and Protection of Privacy Act* (FOIP) with regard to the disclosure of client information and therefore, takes precedence in matters dealing with the disclosure of a client’s identity or records. However, the *Freedom of Information and Protection of Privacy Act* (FOIP) governs the collection, use, correction, disposition and security of AADAC client records and files as well as how AADAC handles disclosure of other information that is not specific to individual clients.

3. Exceptions Permitting the Disclosure of Confidential Client Information

Notwithstanding the previously noted restrictions, there are certain situations outlined in Section 9 of the Alberta *Alcohol and Drug Abuse Act* and other statutes where AADAC may disclose or is compelled to disclose client information.

3.1 Release of Information With Client Consent

Information concerning a client can be disclosed with the written consent of the client or, in some cases, the consent of the client's legal guardian. The decision to consent to disclosure of client information rests with the client.

When dealing with a minor or any client who has a legal guardian, the legal guardian does not have the authority to sign a release form on behalf of the individual in their care when that client **has the intellectual capacity to understand the consequences of consenting to the release of their personal information**. Because the matter of competence is one of interpretation by the Courts on a case-by-case basis, no clear definition as to what constitutes sufficient intellectual capacity to consent to treatment and to disclosure of personal information can be offered here.

AADAC does, however, operate from the position that any youth, regardless of age, who has the intellectual capacity to understand the nature and consequences of allowing their personal information to be disclosed can agree to or refuse consent to release their personal information. The parent or legal guardian's authority to make treatment decisions for the minor **terminates** once the youth has the intellectual capacity to consent to his or her own treatment. The onus of proving such a capacity is on the agency providing the treatment. As a consequence, the **disclosure provisions of the Act apply fully to youth who are deemed by AADAC to have sufficient intellectual ability to understand and comprehend their treatment**. For these individuals, treatment information cannot be released even to parents or legal guardians, except where a release form has been signed, where there is overriding legislation or judicial direction, or where compelling health and safety circumstances exist.

If the client is a minor or other person with a guardian or personal representative, as listed in Section 79 of FOIP, and **does not** have the intellectual capacity to understand the consequences of consenting to the release of their personal information then the power rests with the guardian. The guardian will not have power to consent in the mere absence of a valid consent by a minor who is deemed to have capacity to make that decision.

Consent to release personal information can only be obtained by having the client or legal guardian complete and sign the appropriate AADAC Release and Collection of Confidential Information form.

In cases where AADAC is releasing information to or obtaining information from other external service providers (i.e., information is shared one way), the AADAC Release and

Collection of Confidential Information form is used. A copy of this release form is included in Appendix Two and located on AADAC's Unity website (see forms and templates, treatment).

In situations where AADAC is working with other external service providers to deliver services to common clients and there is a need to share client information (i.e., information shared both ways), the **shared** Consent to Collection and Disclosure of Confidential Information form is used. A copy of this release is included in Appendix Three and presented in the AADAC Information Management Services Manual, Guideline on Client Information and Shared Service Arrangements. In some cases the shared release form is customized for specific programs or initiatives (e.g., Health Authorities). Customized forms are located on AADAC's Unity website (see forms and templates, treatment).

Signed release forms produced by other government or non-government bodies are acceptable when the forms comply with the provisions of *The Freedom of Information and Protection of Privacy Act*.

The forms must include:

- the specific information to which the consent applies
- the individuals to whom information may be disclosed
- how the information may be used
- the period of time during which the consent is valid.

Otherwise, the release form must be directly between the client and AADAC.

3.2 Release of Information Without Client Consent

Under certain circumstances, an AADAC staff member may be compelled to release confidential client information even if a valid consent form does not exist. These circumstances are outlined below.

3.2.1 Overriding Legislation

There are four provincial statutes that override or take precedence over the disclosure provisions of the *Alcohol and Drug Abuse Act*. These are the *Child, Youth and Family Enhancement Act*, the *Public Health Act*, the *Fatality Inquiries Act* and the *Protection for Persons in Care Act*.

An Order in Council issued by the Lieutenant Governor will also override the Act. In situations in which the above noted statutes are invoked, or where an Order in Council is issued, AADAC staff are required to divulge all pertinent information and documentation when called upon to do so, even in the absence of client consent.

It should be noted that some federal statutes including the *Youth Criminal Justice Act* and the *Criminal Code* take precedence over provincial legislation. Disclosure of information in criminal proceedings is discussed in Sections 3.2.2 a) ii and 3.2.2 b) ii.

a) *Child, Youth and Family Enhancement Act*

If an AADAC staff member has reasonable grounds to believe that a child is in need of protective services, under the terms of the *Child, Youth and Family*

Enhancement Act, the staff member is required to notify Child Welfare authorities. This could involve disclosing confidential information even if client consent is not available.

The *Child, Youth and Family Enhancement Act* defines situations where a child is in need of protective services. This section of the Act can be found in Appendix Three.

In this regard, it should be noted that in matters involving the *Child, Youth and Family Enhancement Act*, staff are compelled to report violations of the Act regardless of whether the client proposes to address the problem or refuses to provide consent to disclose personal information.

If confronted with such a situation, the staff member must first inform his or her manager. The manager or staff member must then notify the closest Child Welfare Services office or call the 24-hour Child Abuse Hotline at 1-800-387-5437.

If an AADAC employee is issued a subpoena to appear in court in a matter relating to the *Child, Youth and Family Enhancement Act*, that employee is required to provide information in his/her possession that may relate to the proceeding before the court with respect to the child. A ruling by the presiding judge on the disclosure provisions of the *Alcohol and Drug Abuse Act* is not required in such situations. The sections of the *Child, Youth and Family Enhancement Act* that outline these requirements, are contained in Appendix Four. Also, Section 9 (7) of the AADAC Act outlines the Commission's obligation to respond to a subpoena under the *Child, Youth and Family Enhancement Act*.

b) Public Health Act

Under provisions of the *Public Health Act*, there is a requirement to disclose if it is known that a person is infected with one of the communicable diseases listed in the regulations of the Alberta *Public Health Act*. These diseases include

- acquired immunodeficiency syndrome (AIDS)
- hepatitis A, B, non-A, non-B
- tuberculosis
- sexually transmitted communicable diseases

A complete listing of notifiable communicable diseases as outlined in the *Public Health Act* Communicable Disease Regulation is contained in Appendix Five.

Disclosing information relating to a notifiable communicable disease may necessitate divulging confidential information even in the absence of client consent. In almost all situations, notification will be up to the physician employed by the Commission. The physician is required by the *Public Health Act* to report a communicable disease listed in the regulation. That physician must inform the Medical Officer of Health of the local Regional Health Authority of a disease of this nature. The section of the *Public Health Act* that outlines this requirement is contained in Appendix Six.

In all cases, the staff member or his/her supervisor must notify the appropriate AADAC Executive Director of the actions taken.

c) Fatality Inquiries Act

Upon the request of a Medical Examiner, the disclosure of information pertaining to a deceased client must be made at a fatality inquiry. While technically, this information may be provided voluntarily by the staff member, it is advisable that he/she only provide such testimony when compelled to do so by means of a subpoena.

The staff member should ensure the Medical Examiner is aware that, under the provisions of the *Alcohol and Drug Abuse Act*, this information can only be presented in proceedings that are closed to the public.

d) Protection for Persons in Care Act

Any AADAC staff member who reasonably believes that an adult client (18 years and older) has been abused in an AADAC residential treatment centre or any other publicly funded care facility must report that abuse to an appropriate authority, such as the police for emergency situations, a professional association when the incident involves a member of such an association (e.g. a registered nurse) or the provincial reporting line (1-888-357-9339). The Commission has developed guidelines for compliance with the provisions of the *Protection for Persons in Care Act* (see Appendix Seven).

3.2.2 Judicial Requests

In certain matters before the Court, a staff member may be requested to provide confidential information about a client.

a) Testifying Before a Court

Staff should not voluntarily agree to testify in court actions if requested to do so by a client or his/her lawyer. It is preferable that the Court follows the standard procedure of issuing a subpoena in a criminal matter or a Notice to Attend in the case of a civil proceeding. In either case, the staff member must notify his/her immediate supervisor or manager of the Court action.

If the client has signed a valid consent form, then the staff member, during his/her testimony, can provide whatever information the client has consented to disclose.

If no consent form exists or the consent form does not cover the information requested, then the following procedures must be followed.

The staff member must first determine whether they are being asked to attend a civil proceeding or a criminal proceeding. The procedure that AADAC staff should follow in civil proceedings is different from that in criminal cases.

i) Civil Proceedings

In civil proceedings, staff must attend if served with a Notice to Attend. Prior to releasing any information, the staff member must raise the confidentiality provisions of the *Alberta Alcohol and Drug Abuse Act* and ask for the judge's ruling as to whether he/she can testify. Only with the permission of the judge can confidential information be divulged in a civil proceeding.

Ideally, the Court should be notified as early as possible about the disclosure provisions of the Act. Because each case will differ, there is no single course of action that can be followed to do this. In general, if a lawyer approaches a staff member to appear as a witness, then the staff member should notify the lawyer of the provisions of the Act and ask that the matter be raised with the judge prior to the trial. In cases where it is not possible to do this, the staff member must raise it while on the stand prior to testifying. As well, the staff member should clarify what information is specifically needed for Court so only the records needed in Court are disclosed.

The exception to this is where an AADAC staff member is required to attend Court in accordance with the *Child, Youth and Family Enhancement Act*. In such cases the disclosure provisions of the *Alcohol and Drug Abuse Act* are overridden, and no ruling from the Court is required.

ii) Criminal Proceedings

In the case of criminal proceedings, an AADAC staff member is required to appear as a witness if served with a subpoena. The disclosure provisions of the Act need not be raised with the Court either before or during the staff member's testimony.

It should be noted that, in some criminal proceedings, other legal mechanisms can be invoked that would prohibit a staff member from divulging confidential information. The staff member will be advised by the Court, or the lawyer involved in the case, of such situations. AADAC staff should follow the direction given by the Court or the lawyer in these instances.

b) File Material and Other Documentation

Client records and files must not be disclosed to a Court unless the information is specifically requested by means of a subpoena in criminal cases, or if a judge in a civil proceeding directs that the information be disclosed.

In complying with the Court's directive, only the material that is specifically required should be released. Any original material that is forwarded to the Court must be copied, with the copy retained by AADAC.

i) Civil Proceedings

With civil proceedings, the Court must be advised of the disclosure provisions of the *Alberta Alcohol and Drug Abuse Act* before material is released. To comply with this directive, a staff member must accompany the file material, or be present in Court for the case in question, to explain the disclosure provisions and to ask for a ruling. Those situations where it

appears difficult for staff to do this must be raised with an immediate supervisor.

Exceptions to this are civil proceedings where file or other documentation is requested pursuant to the *Child, Youth and Family Enhancement Act*. In these situations, the disclosure provisions of the *Alberta Alcohol and Drug Abuse Act* are automatically overridden, and no ruling from the Court is required.

ii) Criminal Proceedings

When a subpoena is issued as part of a criminal proceeding, file material must be released to the Court. Staff members will be informed through the Court or the lawyers involved in the case of exceptions to this.

c) Sexual Offence Proceedings

If a staff member receives a request for information pertaining to a sexual offence, receives a subpoena for information or to attend a court hearing regarding a sexual offence, the matter should be referred to the Senior Manager, Information Management Services for direction and advisement.

d) Staff Called Upon as Expert Witness

Staff may be requested by a lawyer to appear as an “expert” witness. If served with a subpoena or a Notice to Attend, the staff member must attend whether or not the case involves an AADAC client but staff should not voluntarily agree to appear as a witness in any proceeding.

If required to appear, it is the decision of the Court as to whether or not a staff member will be considered as an expert and allowed to give expert testimony. No matter what the Court’s decision, as a general guideline, staff should only give factual information based on their own knowledge and experience in the area without reference to an individual client.

3.2.3 Compelling Health or Safety Circumstances

AADAC staff may encounter situations where they are unable to divulge confidential information because the client has not completed a consent form, or there is no judicial or legislative justification for disclosure, yet the staff member strongly believes that there is a compelling health or safety reason to release the information to other professionals.

The need to divulge this information could come, for example, from a medical emergency or result from situations where there is a fear that emotional or physical harm could come to the client or to another person (e.g. threat of suicide or violence).

Where there is a compelling need to divulge information, this can only be done in accordance with the provisions of the *Alberta Alcohol and Drug Abuse Act*, as outlined in AADAC’s Policy on the Confidentiality and Disclosure Provisions of the *Alberta Alcohol and Drug Abuse Act* and the guidelines, which accompany the Policy.

Notice of the disclosure must be mailed to the last known address of the client.

If staff are confronted with such a circumstance, they should first satisfy themselves that there is a real risk of significant harm to the health and safety of the client or

other people, and that client consent cannot be obtained before such information is disclosed. Having concluded that disclosure would be the best course of action, staff should then, whenever possible, discuss their concerns and views with their immediate supervisor and obtain the approval of their manager to disclose the necessary personal information. In cases where this is not possible, staff should call the AADAC FOIP coordinator (Senior Manager, Information Management Services).

In all cases involving compelling health and safety circumstances where information is released without client consent, the circumstances and the actions taken must be documented and the documentation placed on file.

There are no straightforward guidelines that can be offered to assist staff through exceptional cases. Counsellors must, where possible, advise the client of the seriousness of the concern and the actions that are being considered. Every effort should be made to obtain consent to release from the client before disclosure occurs.

It should be remembered that mutual trust is critical to any successful counsellor-client relationship. The importance of this trust is emphasized by the significance placed on the protection of confidentiality in the *Alberta Alcohol and Drug Abuse Act*. This trust should never be taken lightly nor violated needlessly. As a consequence, staff must be certain in their own mind that divulging confidential information is necessary to ensure the safety and security of the client or of others. Once a staff member has come to that conclusion and received the approval of the manager, AADAC will support the decision.

3.2.4 Special Situations

a) Deceased Clients

Only in specific circumstances can information about a deceased client be released. The Medical Examiner at a fatality inquiry and the Court must be provided with information concerning a deceased AADAC client if the information is requested by the formal procedures outlined in the previous sections. Requests from the client's family, estate, insurer, or any other third party cannot be honoured unless an Order in Council is passed to allow for release of the information.

When confronted with a request concerning a deceased client, staff should inform those seeking the information of the restriction imposed by the *Alberta Alcohol and Drug Abuse Act*. Individuals wishing to pursue their request should be referred to AADAC's President and Chief Executive Officer (CEO) who will initiate appropriate proceedings.

4. Roles

All individuals employed by the Commission on either a permanent or temporary basis are required to follow the provisions of the *Alberta Alcohol and Drug Abuse Act*, these guidelines and the provisions of the FOIP Act. The guidelines and FOIP also govern contractors, volunteers and individuals in student and other learning placements with AADAC.

For the purposes of these guidelines the term “staff” includes AADAC Board members, staff, volunteers, students and contractors.

4.1 Role of AADAC Staff

All individuals covered by these guidelines and the *Alcohol and Drug Abuse Act* must familiarize themselves with the disclosure provisions of the Act. A copy of the Act is contained in Appendix One. Any questions about these provisions that are not addressed in the guidelines are to be discussed with a supervisor or manager.

Staff should also be familiar with the provisions of the *Freedom of Information and Protection of Privacy Act*, which govern all other aspects of recorded client information, record keeping and records other than those relating to individual clients. For further information about the application of the *Freedom of Information and Protection of Privacy Act* please consult the AADAC Information Management Services, Guideline on the Application of the Freedom of Information and Protection of Privacy (FOIP) in AADAC and Guideline on Client Information and Shared Service Arrangements. **It is important to inform clients that there are a number of exceptions to the disclosure provisions of the *Alberta Alcohol and Drug Abuse Act* where we are bound by law to report personal information.** These exceptions include child abuse, AIDS and other reportable diseases, information relating to a fatality inquiry, and situations of threat or abuse in residential settings. Clients should be aware that AADAC records are subject to subpoena under Criminal Code and *Child, Youth and Family Enhancement Act* proceedings and that AADAC is required to report client intent to harm self or others.

Requests for confidential client information from someone other than the client require a valid consent form completed by the client. This consent form must accompany the request or be present on file. (See Appendix Two and Three for copy of consent forms.) Staff must also keep a written record of the request including the course of action taken and the information provided, even when the information was provided verbally. Staff must determine specifically what information is needed before releasing anything. Even with a valid consent form, only information that is reasonably necessary for the particular purpose or situation at hand can be released. See Section 5 of these guidelines for information regarding client access to their personal information.

Information regarding a client or services provided to a client cannot be released to an unidentified or unknown third party or to any individual who does not clearly need to know, even if a valid consent form exists.

Exchange of client-specific information between AADAC staff members is only permitted on a need-to-know basis.

When responding to a **verbal or telephone** request for information, staff must take steps to confirm the identity of the caller and the existence of a valid consent form before releasing information.

When sending information through the **mail**, the address of the intended recipient must be confirmed. When sending information to a client, a plain envelope with no reference to AADAC must be used.

When sending information by **fax**, it is essential that the fax number is confirmed prior to transmission, the intended recipient is informed of the pending transmission and the intended recipient acknowledges receipt of the information.

Under no circumstances can client information be shared electronically, such as via e-mail or the Internet. Section 9 of the *Alberta Alcohol and Drug Abuse Act* is exempt from the *Electronic Transactions Act* (Section 3). This exemption means that client information cannot be shared electronically.

Staff members require the approval of a manager in all circumstances regarding any disclosure not covered by these guidelines. When an immediate manager is not available then a more senior manager must be consulted before acting. In the event a staff member cannot consult his/her immediate manager prior to acting, the staff member is responsible for ensuring the immediate manager is ultimately informed of the incident and that a complete record is kept of the request and the action taken.

4.2 Role of Management

Management must ensure that staff members are knowledgeable about the disclosure provisions of the *Alberta Alcohol and Drug Abuse Act* and the AADAC policy and guidelines regarding disclosure of client information. They should also ensure that staff are familiar with the provisions of the *Freedom of Information and Protection of Privacy Act*, which govern all other aspects of recorded client information, record keeping and records other than those relating to individual clients.

AADAC's President and CEO has delegated to Executive Directors full responsibility for the collection, use, disclosure, correction, disposition and security of all personal information in the custody or control of their respective divisions. This delegation of authority is in accordance with the *Freedom of Information and Protection of Privacy Act*.

Management must ensure that staff members follow the procedures in these guidelines when handling requests for client information.

Unusual or questionable situations not addressed directly in these guidelines will undoubtedly arise and must be referred to management. In the absence of clear direction,

managers should discuss such situations with a more senior officer of the Commission prior to taking action, and then document any decisions made or action taken.

All staff members have the option to call AADAC's FOIP Coordinator (Senior Manager, Information Management Services).

5. Client Access to Their Personal Files

Under the *Freedom of Information and Protection of Privacy Act*, a person has a right of access to all personal information about himself or herself held in government records.

This right only extends to information that relates specifically to that client. Personal information relating to other individuals should not be kept in a client's file. If, however, personal information about another identifiable person is in an individual's file, then that material must be severed prior to the client examining their file. Questions about severing information should be raised with AADAC's FOIP Coordinator (Senior Manager, Information Management Services).

Clients have the right to examine material in their file that pertains to them and that originates within AADAC, as well as information that originate from other organizations or individuals. Staff, however, must exercise caution before allowing a client access to material that originates outside of AADAC, particularly where that information was provided to AADAC in confidence and contains third-party personal information.

Circumstances may arise where a staff member strongly believes immediate and grave harm could result from allowing a client to view certain personal information contained in the client's file. In these circumstances, the staff member should discuss concerns with a supervisor or manager. With the agreement of a supervisor or manager, and with the written support of a physician, chartered psychologist, psychiatrist or any other appropriate expert depending on the circumstances of the case, personal information then can be withheld on these grounds.

An individual cannot remove their file or any of its contents from the possession of AADAC under any circumstances. A staff member must be present at the time of the file review and may offer to go through the file with the client.

AADAC staff should photocopy material in a client's file if requested to do so by the client and then release the material to the client. The client must acknowledge in writing that they have received photocopied material from their file.

Appendix One

RSA 2000

ALCOHOL AND DRUG ABUSE ACT

Chap. A-38

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ALCOHOL AND DRUG ABUSE ACT

Chapter A-38

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

Definitions

1 In this Act,

- (a) "alcohol and drug abuse" means the use of any substance by a person in quantities that create a condition in the person that is characterized by physical, psychological or social problems;
- (b) "bylaws" means the bylaws of the Commission;
- (c) "Commission" means the Alberta Alcohol and Drug Abuse Commission;
- (d) "Crown" means the Crown in right of Alberta;
- (e) "Minister" means the Minister determined under section 16 of the Government Organization Act as the Minister responsible for this Act.

RSA 1980 cA-38 s1;1985 c6 s3;1990 c8 s2

Incorporation of Commission

2(1) The Alberta Alcoholism and Drug Abuse Commission is continued as a corporation under the name "Alberta Alcohol and Drug Abuse Commission".

(2) The Commission shall consist of the chair, the vice-chair and not more than 10 other members.

(3) The chair and vice-chair must be appointed by the Lieutenant Governor in Council.

(4) The members of the Commission, other than the chair and vice-chair, shall be appointed by the Lieutenant Governor in Council for a term of not more than 3 years and may be appointed for not more than 2 consecutive terms.

RSA 1980 cA-38 2;1985 c6 s4

Status and functions of Commission

3(1) Notwithstanding anything in this Act, the Commission

- (a) is, and is declared always to have been, an agent of the Crown,
- (b) may exercise its powers and shall perform its duties and functions only as an agent of the Crown, and
- (c) shall, in the exercise and performance of its powers, duties and functions, comply with directions given to it by the Minister.

(2) A member of the Commission shall not conduct himself or herself in a manner that results in the Commission's failing to comply with subsection (1).

1990 c8 s3

Compensation

4(1) The chair of the Commission may receive from the Commission the remuneration and shall perform the duties that the Lieutenant Governor in Council may prescribe.

- (2) The Commission may pay to each member of the Commission, other than the chair, fees for attending meetings of the Commission, at the rates prescribed by the Minister.
- (3) The Commission may pay travelling and living expenses at the rates prescribed by the Minister to each member of the Commission while the member is absent from the member's ordinary place of residence in the course of the member's duties as a member of the Commission.

RSA 1980 cA-38 s3

Meetings

- 5(1) At a meeting of the Commission the vice-chair shall preside in the absence of the chair and if the chair and the vice-chair are both absent, the members present may elect one of their number to preside at that meeting.
- (2) A majority of the members of the Commission constitutes a quorum of the Commission.
- (3) The affirmative votes of a majority of the members present at any meeting of the Commission at which a quorum is present are sufficient to pass a resolution or bylaw to bind all the members.
- (4) When one or more vacancies occur on the Commission, the remaining members may exercise all the powers of the Commission.
- (5) At its meetings, the Commission may exercise any of its powers by resolution except where it is required by this Act to exercise a power by bylaw.
- (6) A copy of the minutes of each meeting of the Commission shall be furnished to the Minister.
- (7) The minutes of a meeting at which any amendment is made to the Commission's bylaws or new bylaws are made must set out or incorporate as an attachment the exact words of the resolution effecting the amendment or of the new bylaws.

RSA 1980 cA-38 s4;1990 c8 s4

Bylaws re meetings

- 6 The Commission may make bylaws respecting the calling of meetings of the Commission and the conduct of business at the meetings, the duties and conduct of members and generally as to the conduct of the business and affairs of the Commission.

RSA 1980 cA-38 s5

Chief executive officer

- 7(1) The Lieutenant Governor in Council, on the recommendation of the chair, may appoint a chief executive officer of the Commission and may fix the chief executive officer's remuneration.

(2) The chief executive officer is an employee of the Commission, and is responsible for the management of the work of the Commission.

(3) The chief executive officer may delegate to an employee of the Commission any power or duty conferred or imposed on the chief executive officer by the Commission.

RSA 1980 cA-38 s6;1985 c6 s5;1990 c8 s5

Members not personally liable

8 The members, officers and employees of the Commission and persons acting under the instructions of any of them or under the authority of this or any other Act or the bylaws are not personally liable for any loss or damage suffered by any person by reason of anything in good faith done or omitted to be done in the exercise or purported exercise of any powers given by this or any other Act or the bylaws.

RSA 1980 cA-38 s7

Secrecy of information

9(1) Except as otherwise provided in this section,

(a) a person who is or has been a member or employee of the Commission or is or has been employed or engaged in the administration of this Act shall not disclose or be compelled to disclose any information obtained by the person that names or identifies a client who has been provided with treatment, care or services by the Commission, and

(b) any file, record, document or paper in the custody of the Commission that names or identifies a client who has been provided with treatment, care or services by the Commission shall not be disclosed to any person or be admitted in evidence in any proceedings.

(2) In this section, "client" means a person who has been provided with treatment, care or other services by the Commission or at a hospital, clinic or centre operated by the Commission.

(3) Subsection (1) does not apply

(a) when the disclosure is necessarily made in the course of the administration of the business and affairs of the Commission or in the course of the administration of this Act,

(b) if there are compelling circumstances affecting anyone's health or safety and notice of the disclosure is mailed to the client at the client's last known address,

(c) when the disclosure is made at the request of or with the consent of the client concerned or of a guardian or trustee of the client appointed under the *Dependent Adults Act* or the *Public Trustee Act*,

- (d) in any special case when permission is given by an order of the Lieutenant Governor in Council, or
- (e) when the disclosure is made in respect of a deceased client to a medical examiner appointed under the *Fatality Inquiries Act*.
- (4) A provincial judge presiding at a public inquiry under Part 4 of the *Fatality Inquiries Act* may admit in evidence any information or any file, record, document or paper pertaining to a deceased client obtained by a medical examiner under subsection (3)(e), but any proceedings related to that information, file, record, document or paper shall be closed to the public.
- (5) Information in the hands of the Commission pertaining to clients and the treatment, care and services provided to clients may be published by the Commission or the Government in statistical form if the individual names of clients are not revealed or made identifiable by those statistics.
- (6) A person who contravenes this section is guilty of an offence and liable to a fine of not more than \$500 and in default of payment to imprisonment for a term of not more than 90 days.
- (7) If the Provincial Court issues a subpoena pursuant to the *Child, Youth and Family Enhancement Act*, the Commission or an employee of the Commission shall release, in accordance with that Act, any information, file, record, document or paper in respect of the child to whom the proceedings before the Provincial Court relate or with respect to a guardian of that child.

RSA 2000 cA-38 s9;2003 c16s117

Audit

10 The Auditor General is the auditor of the Commission.

RSA 1980 cA-38 s9

Fiscal year and budget

11(1) The fiscal year of the Commission is April 1 to the following March 31.

(2) The Commission shall prepare a budget for each fiscal year for approval by the Government and in a form approved by the Minister and shall present it to the Minister in the manner and at the time specified by the Minister.

RSA 1980 cA-38 s10;1985 c6 s7;1990 c8 s6

Annual report

12 The Commission shall, after the end of each fiscal year, prepare and submit to the Minister a general report summarizing its transactions and affairs in that year and showing its revenues during that period together with audited financial statements, and the Minister shall lay the report before the Legislative Assembly if it is then sitting, and if it is not then sitting, within 15 days after the commencement of the next sitting.

Advances to Commission

13 The Provincial Treasurer shall pay to the Commission money voted by the Legislature for the purposes of the Commission in equal monthly installments or on any other basis agreed to by the Commission and the Provincial Treasurer.

RSA 1980 cA-38 s13;1985 c6 s9

Borrowing powers

14 The Commission, with the approval of the Lieutenant Governor in Council and to the extent permitted by the Lieutenant Governor in Council,

(a) may from time to time borrow money from any person or enter into overdraft arrangements with a bank or a treasury branch, for the purpose of meeting its obligations as they become due, and

(b) may give security for the repayment of that money.

RSA 1980 cA-38 s14

General powers

15 In addition to the powers vested in the Commission by this and any other Act, the Commission may

(a) subject to the approval of the Lieutenant Governor in Council, acquire and hold real property required for its purposes, and sell or otherwise dispose of real property no longer required for its purposes;

(b) accept subscriptions, donations, devises and bequests of real or personal property;

(c) make any banking arrangements necessary for the carrying out of its duties and functions;

(d) draw, make, accept, endorse, execute and issue promissory notes, bills of exchange and other negotiable or transferable instruments;

(e) establish a tariff of fees payable to the Commission for services, programs or materials provided by the Commission.

RSA 1980 cA-38 s15;1990 c8 s7

Objects

16(1) The objects of the Commission are as follows:

(a) to operate programs for the prevention or treatment of alcohol and drug abuse;

(b) to conduct studies and research into and investigate alcohol and drug abuse or matters relating to alcohol and drug abuse;

- (c) to provide financial and other assistance to persons conducting programs for the prevention or treatment of alcohol and drug abuse;
 - (d) to provide financial and other assistance to persons conducting studies and research into and investigating alcohol and drug abuse or matters relating to alcohol and drug abuse.
- (2) The Commission may carry out the objects referred to in subsection (1) as they relate to other addictive behaviours designated by the Lieutenant Governor in Council.
- (3) The Commission's objects are declared to be public and governmental.

RSA 1980 cA-38 s16;1985 c6 s10;1990 c8 s8;1994 c3 s2

Distributions and surpluses

17(1) The Commission shall not

- (a) pay any dividends or similar distributions to its members, or
 - (b) pay or otherwise make available any part of its assets to or for the personal benefit of any of its members.
- (2) Members are not entitled to participate, on the liquidation, dissolution, winding-up or termination of the Corporation and after the payment of its debts, in the distribution of its assets, but in such an event, all its remaining assets belong to the Crown.
- (3) Nothing in this section prohibits the payment of remuneration or expenses to members pursuant to section 4.

1990 c8 s9

Regulations

18 The Lieutenant Governor in Council may make regulations providing for any matters considered necessary for the purpose of carrying out this Act.

RSA 1980 cA-38 s17

Suits by and against the Commission

19 Notwithstanding any other law or that the Commission acts in accordance with section 3, an action, suit or other legal proceeding in respect of any right or obligation acquired or incurred by the Commission on behalf of the Crown, whether in its name or in the name of the Crown, may be brought or taken by or against the Commission in the name of the Commission in any court that would have jurisdiction if the Commission were not an agent of the Crown.

1990 c8 s10

Appendix Two
Release of Personal Information Form



Release and Collection of Confidential Information

Client ID #

CONSENT	I understand that provision of treatment services is not dependent upon my decision to release information and that I may cancel this consent at any time. I also understand that some action may have been taken prior to cancellation.
	Client Signature: _____
	Witness: _____
	Date Signed: <u> </u> / <u> </u> / <u> </u> / <u> </u> <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u>
	Permission will Expire on: <u> </u> / <u> </u> / <u> </u> / <u> </u> <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u>

CANCEL	I, _____, cancel this permission. I understand that some action may have been taken prior to this cancellation.
	Client Signature: _____
	Witness: _____
	Date Signed <u> </u> / <u> </u> / <u> </u> / <u> </u> <u> </u> / <u> </u> / <u> </u> / <u> </u> / <u> </u>

A faxed or photocopied release shall be valid as original

This information is being collected under the authority of the Alcohol and Drug Abuse Act in order to improve AADAC services. If you have any questions regarding this collection please contact the manager/supervisor at the facility providing you the service.

DEFINITIONS OF THE INFORMATION CATEGORIES TO BE RELEASED:

- Assessment:** A summary of the results of the screening assessment process completed with you at AADAC.
- Attendance:** A summary of your attendance at AADAC treatment.
- End - Summary and Recommended Actions:** The notes that are written at the end of your treatment at AADAC.
- Participation:** A description of your behaviour during treatment at AADAC.
- Program Dates:** The dates that you have attended or will be attending treatment at AADAC.
- Progress Summary:** A summary of your changes during treatment at AADAC.
- Treatment Plan:** A copy of the goals and actions for your treatment at AADAC.
- Other:** Clearly describe any other information, or give details about the information, to be released by AADAC.

DEFINITIONS OF THE INFORMATION CATEGORIES TO BE COLLECTED:

- Assessment:** A summary of the results of the assessment completed with you by an outside professional.
- Attendance:** A summary of your attendance at appointments with an outside professional.
- Participation:** A description of your behaviour during appointments with an outside professional.
- Reason for Referral:** Information from an outside professional about why you were referred to AADAC for treatment.
- Relevant History:** Background information about you that is relevant to the treatment AADAC will provide.
- Treatment Summary:** A summary of the treatment provided to you by an outside professional.
- Other:** Clearly describe any other information, or give details about the information, to be collected from an outside professional.



Alberta Alcohol and Drug Abuse Commission
An Agency of the Government of Alberta

Release and Collection of Confidential Information

Revised May 8, 2006

Page 1 of 2



Release and Collection of Confidential Information

Client ID #

I, _____, give permission to the Alberta Alcohol and Drug Abuse Commission to contact:

TO/FROM

Name: _____
LAST FIRST

Organization: _____

Title/Relationship: _____

Address: _____ Province: _____

City: _____ Country: _____

Postal Code: _____

Phone: () _____ Fax: () _____

WHAT INFORMATION

To release verbally or in writing:

Please check the following information to be released

- | | |
|--------------------------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Assessment | <input type="checkbox"/> Participation |
| <input type="checkbox"/> Attendance | <input type="checkbox"/> Program Dates |
| <input type="checkbox"/> End – Summary & Recommended Actions | <input type="checkbox"/> Progress Summary |
| <input type="checkbox"/> Other (<i>Please specify</i>) | <input type="checkbox"/> Treatment Plan |

To collect verbally or in writing:

Please check the following information to be collected

- | | |
|----------------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Assessment | <input type="checkbox"/> Participation |
| <input type="checkbox"/> Attendance | <input type="checkbox"/> Progress Summary |
| <input type="checkbox"/> Relevant History | <input type="checkbox"/> Reason for Referral |
| <input type="checkbox"/> Other (<i>Please specify</i>) | |

PURPOSE

The information I have consented to for purpose of disclosure shall only be used for the following reasons:

Please describe how the information will be used

Appendix Three
Shared Release of Personal Information Form

Consent to Collect and Disclose Confidential Information

I, _____ (the "Client") authorize the Alberta Alcohol and Drug Abuse Commission ("AADAC") and _____ (the organization) to collect, verbally or in writing or both, and to disclose to each other some or all of the following personal information (my "Information").

Check the boxes below indicating which Information you are consenting to be collected and disclosed. Definitions of the terms used below are set out on page 3 of this consent form.

WHAT INFORMATION	<p>To collect verbally or in writing</p> <p>Please check the following information to be collected</p> <p><input type="checkbox"/> Assessment <input type="checkbox"/> Participation</p> <p><input type="checkbox"/> Attendance <input type="checkbox"/> Progress Summary</p> <p><input type="checkbox"/> Relevant History <input type="checkbox"/> Reason for Referral</p> <p><input type="checkbox"/> Other (Please Describe)</p>	<p>To disclose verbally or in writing</p> <p>Please check the following information to be disclosed</p> <p><input type="checkbox"/> Assessment <input type="checkbox"/> Participation</p> <p><input type="checkbox"/> Attendance <input type="checkbox"/> Program Dates</p> <p><input type="checkbox"/> End – Summary & Recommended Actions <input type="checkbox"/> Progress Summary</p> <p><input type="checkbox"/> Other (Please describe)</p>
	<p>_____</p> <p>_____</p> <p>_____</p>	<p>_____</p> <p>_____</p> <p>_____</p>

I consent to the collection and disclosure of my Information only by or to the following persons employed or engaged by AADAC or by _____ (the organization).

<p>AADAC Name and Title</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Organization Name and title</p> <p>_____</p> <p>_____</p> <p>_____</p>
------------------------------------------------------------------------	-------------------------------------------------------------------------------

I understand that the purpose of the collection and/or disclosure of the Information is to permit AADAC and _____ (the organization) to work together to provide me continuous care, treatment planning, and treatment services.

I understand and agree that my Information is being collected and disclosed under the authority of the *Alberta Alcohol and Drug Abuse Act*, the _____ Act (the others), and the *Freedom of Information and Protection of Privacy Act* and is subject to the provisions of these Acts. I understand that if I have any questions regarding the collection or disclosure of my Information, I may contact

_____ at telephone number [_____] _____

CONSENT	<p>I understand why I have been asked to authorize the collection and disclosure of my Information and I am aware of the risks and benefits of consenting or refusing to consent to the collection and disclosure of my Information. I also understand that receiving treatment services from AADAC and/or _____ (the organization) is not dependent upon my decision to sign this consent form and that I may withdraw my consent at any time by providing written notice to AADAC and to _____ (the organization) at the addresses below. I agree that a faxed copy or a photocopy of this consent can be used to authorize disclosure.</p> <p style="text-align: center;">Client Signature: _____</p> <p style="text-align: center;">Witness: _____</p> <p style="text-align: center;">Date Signed: _____/_____/_____/_____/_____/_____/_____/_____/_____/_____</p> <p style="text-align: center;"> Y / Y / Y / Y M / M / M D / D</p> <p style="text-align: center;">Consent will expire on: _____/_____/_____/_____/_____/_____/_____/_____/_____/_____</p> <p style="text-align: center;"> Y / Y / Y / Y M / M / M D / D</p>
----------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

WITHDRAWAL OF CONSENT	<p>I, _____, withdraw my consent to the disclosure of my Information between AADAC and _____ (the organization). I understand that some of my Information may have been disclosed between AADAC and _____ (the organization) before this notice is received by AADAC and _____ (the organization). I agree that a faxed copy or photocopy of this notice can be used as notice of withdrawal of the consent.</p> <p style="text-align: center;">Client Signature: _____</p> <p style="text-align: center;">Witness: _____</p> <p style="text-align: center;">Date Signed: _____/_____/_____/_____/_____/_____/_____/_____/_____/_____</p> <p style="text-align: center;"> Y / Y / Y / Y M / M / M D / D</p>
------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

NON-DISCLOSURE REQUEST	<p>I expressly request that _____ (the organization) not disclose any diagnostic, prognostic, treatment, or care information or health services that I receive from AADAC and/or _____ (the organization) to any members of my family or to any other individual with whom I have a close personal relationship.</p> <p style="text-align: center;">Client Signature: _____</p> <p style="text-align: center;">Witness: _____</p> <p style="text-align: center;">Date Signed: _____/_____/_____/_____/_____/_____/_____/_____/_____/_____</p> <p style="text-align: center;"> Y / Y / Y / Y M / M / M D / D</p> <p style="text-align: center;">Consent will expire on: _____/_____/_____/_____/_____/_____/_____/_____/_____/_____</p> <p style="text-align: center;"> Y / Y / Y / Y M / M / M D / D</p>
-------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

AADAC: Address and FAX

(The Organization): Address and FAX

DEFINITIONS OF THE INFORMATION CATEGORIES *TO BE COLLECTED*:

- Assessment:** A summary of the results of the assessment completed with you by an outside professional.
- Attendance:** A summary of your attendance at appointments with an outside professional.
- Relevant History:** Background information about you that is relevant to the treatment AADAC will provide.
- Participation:** A description of your behaviour during appointments with an outside professional.
- Progress Summary:** A summary of your changes during treatment with an outside professional.
- Reason for Referral:** Information from an outside professional about why you were referred to AADAC for treatment.
- Other:** Clearly describe any other information, or give details about the information, to be collected from an outside professional.

DEFINITIONS OF THE INFORMATION CATEGORIES *TO BE DISCLOSED*:

- Assessment:** A summary of the results of the screening assessment process completed with you at AADAC.
- Attendance:** A summary of your attendance at AADAC treatment.
- End - Summary and Recommended Actions:** The notes that are written at the end of your treatment at AADAC.
- Participation:** A description of your behaviour during treatment at AADAC.
- Program Dates:** The dates that you have attended or will be attending treatment at AADAC.
- Progress Summary:** A summary of your changes during treatment at AADAC.
- Other:** Clearly describe any other information, or give details about the information, to be released by AADAC.

Appendix Four
CHILD, YOUTH AND FAMILY ENHANCEMENT ACT
Interpretation & Matters to be considered

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Internet: www.gov.ab.ca/qp

CHILD, YOUTH AND FAMILY ENHANCEMENT ACT
Chapter C-12

Interpretation

1(1) In this Act,

(m.1) “intervention services” means any services, including protective services, provided to a child or family under this Act except for services provided under Part 2 or Part 3.

(2) For the purposes of this Act, a child is in need of intervention if there are reasonable and probable grounds to believe that the survival, security or development of the child is endangered because of any of the following:

- (a) the child has been abandoned or lost;
- (b) the guardian of the child is dead and the child has no other guardian;
- (c) the child is neglected by the guardian;
- (d) the child has been or there is substantial risk that the child will be physically injured or sexually abused by the guardian of the child;
- (e) the guardian of the child is unable or unwilling to protect the child from physical injury or sexual abuse;
- (f) the child has been emotionally injured by the guardian of the child;
- (g) the guardian of the child is unable or unwilling to protect the child from emotional injury;
- (h) the guardian of the child has subjected the child to or is unable or unwilling to protect the child from cruel and unusual treatment or punishment.

CHILD, YOUTH AND FAMILY ENHANCEMENT ACT
Interpretation & Matters to be considered

- (i) repealed 2003 c16 s3.
- (2.1) For the purposes of subsection (2)(c), a child is neglected if the guardian
 - (a) is unable or unwilling to provide the child with the necessities of life,
 - (b) is unable or unwilling to obtain for the child, or to permit the child to receive, essential medical, surgical or other remedial treatment that is necessary for the health or well-being of the child, or
 - (c) is unable or unwilling to provide the child with adequate care or supervision.
- (3) For the purposes of this Act,
 - (a) a child is emotionally injured
 - (i) if there is impairment of the child's mental or emotional functioning or development, and
 - (ii) if there are reasonable and probable grounds to believe that the emotional injury is the result of
 - (A) rejection,
 - (A.1) emotional, social, cognitive or physiological neglect,
 - (B) deprivation of affection or cognitive stimulation,
 - (C) exposure to domestic violence or severe domestic disharmony,
 - (D) inappropriate criticism, threats, humiliation, accusations or expectations of or toward the child,
 - (E) the mental or emotional condition of the guardian of the child or of anyone living in the same residence as the child;
 - (F) chronic alcohol or drug abuse by the guardian or by anyone living in the same residence as the child;
 - (b) a child is physically injured if there is substantial and observable injury to any part of the child's body as a result of the non-accidental application of force or an agent to the child's body that is evidenced by a laceration, a contusion, an abrasion, a scar, a fracture or other bony injury, a dislocation, a sprain, hemorrhaging, the rupture of viscus, a burn, a scald, frostbite, the loss or alteration of consciousness or physiological functioning or the loss of hair or teeth;

CHILD, YOUTH AND FAMILY ENHANCEMENT ACT
Interpretation & Matters to be considered

- (c) a child is sexually abused if the child is inappropriately exposed or subjected to sexual contact, activity or behaviour including prostitution related activities.
- (4) Subject to this Act, a person who is a guardian of a child under an agreement or order made under this Act is a guardian under the *Domestic Relations Act*.

RSA 2000 cC-12 s1;2002 c8 s21;2002 c9 s2;
2003 c16 s3;2004 c16 s2

Matters to be considered

2 If a child is in need of intervention, a Court, an Appeal Panel and all persons who exercise any authority or make any decision under this Act relating to the child must do so in the best interests of the child and must consider the following as well as any other relevant matter:

- (a) the family is the basic unit of society and its well-being should be supported and preserved;
- (b) the importance of stable, permanent and nurturing relationships for the child;
- (c) the intervention services needed by the child should be provided in a manner that ensures the least disruption to the child;
- (d) a child who is capable of forming an opinion is entitled to an opportunity to express that opinion on matters affecting the child, and the child's opinion should be considered by those making decisions that affect the child;
- (e) the family is responsible for the care, supervision and maintenance of its children and every child should have an opportunity to be a wanted and valued member of a family, and to that end
 - (i) if intervention services are necessary to assist the child's family in providing for the care of a child, those services should be provided to the family, insofar as it is reasonably practicable, in a manner that supports the family unit and prevents the need to remove the child from the family, and
 - (ii) a child should be removed from the child's family only when other less disruptive measures are not sufficient to protect the survival, security or development of the child;
- (f) subject to clauses (e) and (g), if a child has been exposed to domestic violence within the child's family, intervention services should be provided to the family in a manner that supports the abused family members and prevents the need to remove the child from the custody of an abused family member;

CHILD, YOUTH AND FAMILY ENHANCEMENT ACT
Interpretation & Matters to be considered

- (g) any decision concerning the removal of a child from the child's family should take into account the risk to the child if the child remains with the family, is removed from the family or is returned to the family;
- (h) if it is not inconsistent with protecting the survival, security or development of a child who is in need of intervention, and appropriate community services are available, the child or the child's family should be referred to the community for services to support and preserve the family and to prevent the need for any other intervention under this Act;
- (i) any decision concerning the placement of a child outside the child's family should take into account
 - (i) the benefits to the child of a placement within the child's extended family;
 - (ii) the benefits to the child of a placement within or as close as possible to the child's home community,
 - (iii) the benefits to the child of a placement that respects the child's familial, cultural, social and religious heritage,
 - (iv) the benefits to the child of stability and continuity of care and relationships,
 - (v) the mental, emotional and physical needs of the child and the child's mental, emotional and physical stage of development, and
 - (vi) whether the proposed placement is suitable for the child;
- (j) the provision of intervention services is intended to remedy or alleviate the condition that caused the child to be in need of intervention;
- (k) intervention services are most effective when they are provided through a collaborative and multi-disciplinary approach;
- (l) if a child is being provided with care under this Act, the child should be provided with a level of care that is adequate to meet the needs of the child and consistent with community standards and available resources;
- (m) if a child is being provided with care under this Act, a plan for the care of that child should be developed that
 - (i) addresses the child's need for stability, permanence and continuity of care and relationships, and
 - (ii) in the case of a youth, addresses the youth's need for preparation for the transition to independence and adulthood;

CHILD, YOUTH AND FAMILY ENHANCEMENT ACT
Interpretation & Matters to be considered

- (n) a person who assumes responsibility for the care of a child under this Act should endeavour to make the child aware of the child's familial, cultural, social and religious heritage;
- (o) there should be no unreasonable delay in making or implementing a decision affecting a child;
- (p) if the child is an aboriginal child, the uniqueness of aboriginal culture, heritage, spirituality and traditions should be respected and consideration should be given to the importance of preserving the child's cultural identity.

RSA 2000 cC-12 s2;2003 c16 s4

Appendix Five

CHILD, YOUTH AND FAMILY ENHANCEMENT ACT Part 1- Intervention Services & Part 4 - General

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CHILD, YOUTH AND FAMILY ENHANCEMENT ACT Chapter C-12

Part 1 – Intervention Services

Division 1 – Preliminary Matters

Reporting child in need

4(1) Any person who has reasonable and probable grounds to believe that a child is in need of intervention shall forthwith report the matter to a director.

(1.1) A referral received pursuant to section 35 of the *Youth Criminal Justice Act* (Canada) is deemed to be a report made under subsection (1).

(2) Subsection (1) applies notwithstanding that the information on which the belief is founded is confidential and its disclosure is prohibited under any other Act.

(3) This section does not apply to information that is privileged as a result of a solicitor-client relationship.

(4) No action lies against a person reporting pursuant to this section, including a person who reports information referred to in subsection (3), unless the reporting is done maliciously or without reasonable and probable grounds for the belief.

(5) Notwithstanding and in addition to any other penalty provided by this Act, if a director has reasonable and probable grounds to believe that a person has not complied with subsection (1) and that person is registered under an Act regulating a profession or occupation prescribed in the regulations, the director shall advise the appropriate governing body of that profession or occupation of the failure to comply.

(6) Any person who fails to comply with subsection (1) is guilty of an offence and liable to a fine of not more than \$2000 and in default of payment to imprisonment for a term of not more than 6 months.

Part 4 – General

Evidence

Witnesses

108(1) In a proceeding before the Court under this Act, the Court or a justice of the peace on the application of a party, or the Court on its own motion, may

- (a) compel the attendance of any person and require the person to give evidence on oath,
- (b) require the production by any person of any documents or things, and
- (c) exercise the powers that are conferred for those purposes on a justice of the peace under Part XXII of the *Criminal Code* (Canada).

(2) The record of the evidence given at any other hearing, any documents and exhibits received in evidence at any other hearing and an order of the Court are admissible in evidence in a hearing under this Act.

(3) The evidence of each witness in a Court proceeding under this Act shall be taken under oath and forms part of the record.

(4) Notwithstanding subsection (3), the Court, if it considers it proper to do so and it is satisfied that no better form of evidence is readily available, may

- (a) accept evidence by affidavit, or
- (b) accept hearsay evidence.

1984 cC-8.1 s74;1985 c16 s25

Confidential Evidence

109(1) Notwithstanding Part XXII of the *Criminal Code* (Canada), the Court may issue a subpoena requiring

- (a) the Commission under the *Alcohol and Drug Abuse Act* or the Commissioner's designate,
- (b) a board under the *Hospitals Act* or the board's designate,
- (c) a board under the *Mental Health Act* or the board's designate, or
- (d) the Chief Medical Officer under the *Public Health Act* or the Chief Medical Officer's designate, to produce any documents, records or other information the person has in the person's possession or under the person's control that may relate to the proceedings before the Court with respect to a child.

CHILD, YOUTH AND FAMILY ENHANCEMENT ACT
Part 1- Intervention Services & Part 4 - General

- (2) The person named in a subpoena or the person's designate shall attend at the time and place stated in the subpoena with any documents, records or other information that may relate to the proceedings before the Court and shall remain in attendance throughout the proceedings unless the person is excused by the Court.
- (3) If, as the result of the issuing of a subpoena under subsection (1), a person is required to produce any documents, records or other information that is otherwise confidential under the *Alcohol and Drug Abuse Act*, the *Health Information Act* or the *Public Health Act*, as the case may be, the documents, records or other information shall be dealt with in accordance with this section.
- (4) The person named in the subpoena or the person's designate shall permit the Minister, a director, a guardian of the child, the child, if the child is 12 years of age or older, or a lawyer representing any of them to examine the documents, records or other information before the time stated in the subpoena.
- (5) The Minister, a director or a guardian of the child may apply to the Court at the time stated in the subpoena or at any other time during the proceedings before the Court to have all or part of the documents, records or other information admitted into evidence.
- (6) Notwithstanding any other section of this Act, an application under subsection (5) and any part of the proceedings relating to the documents, records or other information shall be heard in camera.
- (7) At the conclusion of the proceedings before the Court the documents, records or other information or part of them introduced in evidence shall be sealed by the clerk of the Court and that part of the record of the proceedings relating to the documents, records or other information shall not be made available to the public.
- (8) If the Court makes an order at any time during the proceedings before it and that order is appealed to the Court of Queen's Bench, that part of the hearing before the Court of Queen's Bench that relates to the documents, records or other information shall be heard in camera.

RSA 2000 cC-12 s109;RSA 2000 cH-5 s112

Appendix Six

COMMUNICABLE DISEASES REGULATIONS

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AR 238/85 Communicable Diseases
(Consolidated up to 206/2001)

ALBERTA REGULATION 238/85

Public Health Act

COMMUNICABLE DISEASES REGULATION

Schedule 1

(Notifiable Communicable Diseases)

(Section 6(1) of this Regulation; Sections 31(1) and 33(1) of the Act)

Acquired Immunodeficiency Syndrome (AIDS)	Meningococcal Infections
Amebiasis	Mumps
Anthrax	Neonatal Herpes
Arboviral Infections (including Dengue)	Nosocomial Infections
Botulism	Ophthalmia Neonatorum (all causes)
Brucellosis	Paratyphoid
Campylobacter	Pertussis
Cerebrospinal fluid isolates	Plague
Chickenpox	Poliomyelitis
Cholera	Psittacosis
Congenital Infections (includes Cytomegalovirus, Hepatitis B, Herpes Simplex, Rubella, Toxoplasmosis, Varicella-zoster)	Q-fever
Dengue	Rabies
Diphtheria	Reye Syndrome
	Rickettsial Infections
	Rocky Mountain Spotted Fever
	Rubella (including Congenital Rubella)

COMMUNICABLE DISEASES REGULATIONS

Encephalitis, specified or unspecified	Rubeola
Enteric Pathogens. See note below	Salmonella Infections
Foodborne Illness. See note below	Shigella Infections
Gastroenteritis, epidemic. See note below	Smallpox
Giardiasis	Stool Pathogens, all types. See note below
Haemophilus Influenzae Infections (invasive)	Tetanus
Hemolytic Uremic Syndrome	Toxic Shock Syndrome
Hepatitis A, B, Non-A, Non-B	Trichinosis
Human Immunodeficiency Virus Infections	Tuberculosis
Kawasaki Disease	Tularemia
Lassa Fever	Typhoid
Legionella Infections	Typhus
Leprosy	Varicella
Leptospirosis	Viral Hemorrhagic Fevers (including Marburg, Ebola, Lassa, Argentinian, African Hemorrhagic Fevers)
Listeriosis	Waterborne Illness (all causes)
Malaria	See note below
Measles	Yellow Fever
Meningitis (all causes)	

NOTE: Enteric Pathogens, Foodborne Illness, Gastroenteritis, epidemic and Waterborne Illness include the following and any other identified or unidentified cause: Aeromonas; Bacillus cereus; Campylobacter; Clostridium botulinum and perfringens; E. Coli (enteropathogenic serotypes); Salmonella; Shigella; Staphylococcus; Viruses such as Norwalk and Rotavirus; Yersinia.

AR 238/85 Sched.1;357/88;37/88; 96/2005

Schedule 2
(Notifiable Sexually Transmitted Communicable Diseases)

(Section 6(2) of this Regulation; Section 31(2) of the Act)

Chancroid
Chlamydia Trachomatis Infections (genito-urinary)
Gonococcal Infections
Lymphogranuloma Venereum
Muco-purulent Cervicitis
Non-gonococcal Urethritis
Syphilis

AR 238/85 Sched.2;357/88; 96/2005

Schedule 3
(Diseases for Which a Certificate, Isolation Order

COMMUNICABLE DISEASES REGULATIONS

or Warrant for Examination may be Issued)

(Section 6(3) of this Regulation; Sections 49(1), 54(1) and 57(1) of the Act)

Acquired Immunodeficiency Syndrome (AIDS)
Anthrax
Cholera
Chancroid
Chlamydia Trachomatis Infections (genito-urinary)
Diphtheria
Gonococcal Infections
Human Immunodeficiency Virus Infections
Lassa Fever
Leprosy
Lymphogranuloma Venereum
Plague
Smallpox
Syphilis
Tuberculosis
Viral Hemorrhagic Fevers

AR 238/85 Sched.3;357/88; 96/2005

Appendix Seven

PUBLIC HEALTH ACT - Notification

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PUBLIC HEALTH ACT

Chapter P-37

Notification of communicable disease

22 (1) Where a physician, a health practitioner, a teacher or a person in charge of an institution knows or has reason to believe that a person under the care, custody, supervision or control of the physician, health practitioner, teacher or person in charge of an institution is infected with a communicable disease prescribed in the regulations for the purposes of this subsection, the physician, health practitioner, teacher or person in charge of an institution shall notify the medical officer of health of the regional health authority

(a) by the fastest means possible in the case of a prescribed disease that is designated in the regulations as requiring immediate notification, or

(b) within 48 hours in the prescribed form in the case of any other prescribed disease.

(2) Where a physician, a registered nurse providing extended health services or a midwife knows or has reason to believe that a person under the care in a hospital of the physician, registered nurse or midwife is infected with a disease to which subsection (1) applies, the physician, registered nurse or midwife shall, in addition to carrying out the physician's, registered nurse's or midwife's responsibilities under subsection (1), immediately inform the medical director or other person in charge of the hospital, and the medical director shall notify the medical officer of health of the regional health authority by telephone or in accordance with the prescribed form.

(3) Where a physician, a community health nurse, a registered nurse providing extended health services, a midwife or a person in charge of an institution knows or has reason to believe that a person under the care, custody, supervision or control of

PUBLIC HEALTH ACT – Notification

the physician, community health nurse, registered nurse, midwife or person in charge of an institution is infected with a disease referred to in section 20(2), the physician, community health nurse, registered nurse, midwife or person in charge of an institution shall, within 48 hours, notify the Chief Medical Officer in the prescribed form.

RSA 2000 cP-37 s22;2002 c20 s4

Appendix Eight

PROTECTION FOR PERSONS IN CARE – GUIDELINES

Guidelines for Compliance with the Provisions of the Protection for Persons in Care Act in AADAC Residential Facilities.

June 2003

The intent of the *Protection for Persons in Care Act* is to prevent or stop abuse of adults who live in or receive services from public agencies such as group homes, hospitals, lodges, long term care facilities, vocational training centres and women's shelters. The Act is in relation to adults (18 years and older), not children and the focus is on the reporting of abuse. AADAC's residential treatment centres and Funded Agencies offering residential services, therefore, are subject to the provisions of the Act.

Anyone who reasonably believes that a client has been abused in an AADAC or AADAC funded agency residential treatment centre must report that abuse to an appropriate authority. Failure to report abuse can lead to a fine or imprisonment. A provincial telephone line (1-888-357-9339) has been established to facilitate the reporting process. In emergency situations, abuse should be reported to police. When the incident involves a professional (e.g. a registered nurse), the incident can be reported to their professional association.

The *Protection for Persons in Care Act* states that an agency has three responsibilities. These are:

- (1) protect the people it serves from abuse and maintain a reasonable level of safety
- (2) make the provisions of the Act available to service providers, employees and clients
- (3) require that every successful applicant for employment and every new volunteer provide a criminal record check prior to commencement of employment or placement.

In addition, the Act outlines three specific offences that are violations of the Act:

- (1) failure to report abuse
- (2) knowingly making a false report of abuse
- (3) not protecting the person reporting abuse.

The Act provides penalties for knowingly making a false report of abuse. Also, no adverse action can be taken against a person who makes a report of abuse in good faith.

In complying with the provisions of the *Protection for Persons in Care Act*, AADAC has developed guidelines in four key areas: (1) duty to inform staff and clients of the provisions of the Act, (2) reporting of abuse by a staff member and investigation of incidents, (3) protection of confidentiality and (4) criminal record checks for new employees, student placements and volunteers.

1. Duty to Inform Clients and Staff about the Act

Staff and Volunteers

- Information regarding the provisions of the *Protection for Persons in Care Act* will be provided to new employees and volunteers in residential facilities as part of AADAC's critical policies package or orientation package. Note: all AADAC staff were informed of the provisions of the Act in January, 1998 and residential staff participated in training sessions which outlined the key provisions of the Act and reviewed these Guidelines.

Clients

- Posters provided by Community Development, which outline the provisions of the Act and the 1-888 #, will be displayed in AADAC residential facilities.
- Brochures detailing the same information will be available in pamphlet racks in the residential centres.
- Information about the provisions of the Act will be part of client orientations upon admission.

2. Reporting of abuse by staff members and investigation of incidents.

- AADAC encourages employees reporting abuse to inform their supervisor or manager that they are reporting abuse. When the supervisor or manager becomes aware of a report of abuse within their facility they will in turn inform their manager or director.
- When an AADAC manager or supervisor becomes aware of abuse in their facility or that abuse has been reported, they will initiate an investigation and take appropriate action.

3. Protection of client confidentiality

- In response to investigative inquiries initiated under the *Protection for Persons in Care Act*, the responsible AADAC manager or supervisor must confirm the identity and credentials of the investigator prior to providing any information.
- Under the Act AADAC is not required to release medical or clinical records of a client unless that client or that client's guardian consents to those records being release to the investigator. Therefore, AADAC managers should attempt to contact clients and get the required consent, as per our current practice re: release forms, prior to releasing information. (See AADAC's Policy on Confidentiality and Disclosure and accompanying guidelines).
- If there are compelling health and safety circumstances client information may be released without consent.

4. Criminal Record Checks

- A Personnel Guideline is available which outlines the process to be used in undertaking criminal record checks on job applicants AADAC is considering hiring for residential facilities and on volunteers or students being considered for placement in residential treatment centres in AADAC.