

26. The Associate Secretary General establishes a committee to examine the renewal of the member's term of office and designates the chair thereof.

The committee is composed of a representative from the legal community, a retired person having exercised an adjudicative function within a body of the administrative branch and a university representative who is a member of a professional order, who neither belong to nor represent the Administration within the meaning of the Public Administration Act (chapter A-6.01).

Sections 6 to 9 then apply.

27. The committee determines whether the member still fulfils the criteria set out in section 15, considers the member's annual performance evaluations taking into account the needs of the Tribunal and may hold the consultations provided for in section 14 on any matter in the record.

28. Committee decisions are made by a majority vote of its members. In the case of a tie-vote, the chair of the committee has a casting vote. A member may register dissent.

The committee forwards its recommendation to the Associate Secretary General and to the Minister responsible for the administration of the Act to establish the Administrative Labour Tribunal (chapter T-15.1).

29. The Associate Secretary General is the agent empowered to notify a member of the non-renewal of a term of office.

DIVISION X **CONFIDENTIALITY**

30. The names of candidates, the reports of selection or renewal committees, the register, the list of candidates declared qualified to be appointed as members of the Tribunal, as well as any information or document related to a consultation or decision by a committee, are confidential.

Despite the foregoing, a member whose term of office is not renewed may consult the recommendation of the renewal committee concerning him or her.

31. This Regulation comes into force on 18 May 2016.

M.O., 2016

Order number 2016 004 of the Minister of Health and Social Services dated 28 April 2016

An Act respecting end-of-life care
(chapter S-32.0001)

Regulation respecting the conditions for accessing and operating the advance medical directives register

THE MINISTER OF HEALTH AND SOCIAL SERVICES,

CONSIDERING the Act respecting end-of-life care (chapter S-32.0001), which was assented to on 10 February 2014;

CONSIDERING the first paragraph of section 63 of the Act, which provides that the Minister establishes and maintains an advance medical directives register;

CONSIDERING section 64 of the Act, which provides that the Minister prescribes, by regulation, how the register is to be accessed and operated, including who may record advance medical directives in the register and who may consult it;

CONSIDERING that, in accordance with sections 10 and 11 of the Regulations Act (chapter R-18.1), a draft Regulation respecting the conditions for accessing and operating the advance medical directives register was published in the *Gazette officielle du Québec* of 11 November 2015 with a notice that it could be made by the Minister on the expiry of 45 days following that publication;

CONSIDERING that it is expedient to make the Regulation with amendments;

ORDERS AS FOLLOWS:

The Regulation respecting the conditions for accessing and operating the advance medical directives register, attached to this Order, is hereby made.

GAÉTAN BARRETTE,
Minister of Health and Social Services

Regulation respecting the conditions for accessing and operating the advance medical directives register

An Act respecting end-of-life care
(chapter S-32.0001, s. 64)

CHAPTER I PURPOSE

1. This Regulation sets out the conditions for accessing and operating the advance medical directives register established by the Minister pursuant to section 63 of the Act.

CHAPTER II MANAGEMENT OF ACCESS TO THE ADVANCE MEDICAL DIRECTIVES REGISTER

DIVISION I ACCESS MANAGER

2. The function of the access authorization manager is to give the necessary access authorizations to intervening parties so that they have access to the advance medical directives register.

Before assigning access authorizations, the access authorization manager must ensure that the intervening party requesting access to the advance medical directives register needs access within the scope of the party's functions.

3. The following persons may be authorized to act as access authorization manager:

(1) a person designated by the president and executive director or the executive director of a health and social services institution;

(2) a person designated by the executive director of a palliative care hospice;

(3) a person designated by the register manager to ensure the management of the register.

4. Not more than 2 persons may act as access authorization manager in a health and social services institution.

Only 1 person may act as access authorization manager in a palliative care hospice.

5. A person requests from the Minister the authorizations required to act as access authorization manager by providing to the Minister the name of the institution or palliative care hospice for which the person wishes to act

and the documents proving that the person has been designated by the president and executive director or the executive director of the institution or palliative care hospice, as the case may be.

DIVISION II ACCESS AUTHORIZATIONS

6. An authorization for access to the advance medical directives register may be assigned to

(1) a physician practising in a centre operated by a health and social services institution or in a private health facility;

(2) a nurse practising in a centre operated by a health and social services institution, in a palliative care hospice or in a private health facility;

(3) the holder of a training card issued by the secretary of the Collège des médecins du Québec, practising in a centre operated by a health and social services institution or in a private health facility;

(4) the holder of an authorization issued by the Collège des médecins du Québec under section 42.4 of the Professional Code (chapter C-26), practising in a centre operated by a health and social services institution or in a private health facility;

(5) a person providing technical support services to a physician;

(6) a person employed by the register manager to whom the Minister entrusted the management of the register, if applicable.

7. Before assigning authorizations for access to the advance medical directives register, the access authorization manager must verify the identity of the intervening party.

CHAPTER III OPERATION OF THE ADVANCE MEDICAL DIRECTIVES REGISTER

DIVISION I GENERAL

8. For the purposes of this Chapter, a reference to the Minister is a reference, if applicable, to the manager to whom the Minister entrusted the management of the advance medical directives register pursuant to the second paragraph of section 63 of the Act.

DIVISION II

RECORDING OF ADVANCE MEDICAL DIRECTIVES IN THE REGISTER

9. Advance medical directives are sent to the Minister by their author using the prescribed form.

At the request of their author, advance medical directives may also be sent to the Minister by the notary who received the notarial act. The notary then sends a copy of the directives using an information technology medium and indicating the date on which they were signed.

10. As soon as the Minister receives advance medical directives, the Minister records them in the register after ascertaining the unique identification of their author using, in particular, the following information:

- (1) name;
- (2) date of birth;
- (3) sex;
- (4) health insurance number.

11. Where advance medical directives are sent by their author, the Minister refuses to record them in the register if they are not signed and dated or if their author is under 18 years of age. In such a case, the Minister returns the directives to their author specifying the reasons why the Minister refused to record them in the register.

DIVISION III

CHANGE TO ADVANCE MEDICAL DIRECTIVES

12. Where advance medical directives are sent to the Minister and such directives have already been filed in the register for the author of the directives, the Minister removes the previous directives and replaces them by the most recent.

DIVISION IV

REVOCAION OF ADVANCE MEDICAL DIRECTIVES FROM THE REGISTER

13. Where the author of advance medical directives wishes to revoke them, the author must send to the Minister, in paper form, the revocation form prescribed under section 54 of the Act.

On receipt of the revocation form, the Minister removes the advance medical directives from the register.

As soon as the Minister receives a revocation form, the Minister records the form in the advance medical directives register after ascertaining the unique identification of the author of advance medical directives by means of the information provided for in section 10.

DIVISION V

REMOVAL OF ADVANCE MEDICAL DIRECTIVES FROM THE REGISTER

14. Where the author of advance medical directives wishes to remove them from the register without revoking them, the author must send to the Minister, in paper form, the removal form that has been sent to the author, at the author's request, by the Minister.

On receipt of the removal form and after ascertaining the unique identification of the author of advance medical directives by means of the information provided for in section 10, the Minister removes the advance medical directives from the register. All information relating to the existence of the directives is also removed from the register.

Where advance medical directives were made on the prescribed form, the Minister returns them to their author.

15. Where the Minister is informed of the death of the author of advance medical directives, the Minister removes them from the register.

DIVISION VI

CONSULTATION OF THE ADVANCE MEDICAL DIRECTIVES REGISTER

16. Where an intervening party requests access to the advance medical directives register, the party's access authorizations are verified.

17. Where it is noted that a person is incapable of giving consent to care, the intervening party consults the advance medical directives register to verify the existence of such directives. The intervening party must use the following information relating to their author:

- (1) name;
- (2) date of birth;
- (3) sex;
- (4) health insurance number.

18. Where advance medical directives were recorded in the advance medical directives register, the intervening party consulting them files them in the person's record.

Where no advance medical directives have been filed in the register or they have been removed from the register without being revoked, the register indicates that no advance medical directives exist.

Where advance medical directives have been revoked, the form for the revocation of advance medical directives is disclosed to the intervening party consulting the register.

CHAPTER IV

LOG

19. The Minister logs the access of the authorized intervening parties who access the advance medical directives register, the date and time of access and the results obtained by the intervening parties.

CHAPTER V

FINAL

20. This Regulation comes into force on 15 June 2016.

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