

# AMENDED BYLAW FOR ALBERTA HEALTH SERVICES ESTABLISHING THE SEXUAL ORIENTATION, GENDER IDENTITY AND EXPRESSION PROVINCIAL ADVISORY COUNCIL

## Article 1 – Statutory Basis of Bylaw

### 1.1 Statutory Basis of Bylaw

Alberta Health Services (AHS), a corporation established under the *Regional Health Authorities Act*, R.S.A. 2000, c.R-10, hereby enacts the following Bylaw governing the organization and functioning of the Sexual Orientation, Gender Identity and Expression Provincial Advisory Council as described in this Bylaw and under the provisions of the *Regional Health Authorities Act*, the *Community Health Councils Regulation*, A.R. 202/1997 and the *Community Health Councils (Ministerial) Regulation*, A.R. 193/1997, and amendments thereto and other legislation as may be applicable.

### 1.2 Binding Effect

The Bylaw binds the Council and all present and future members of the Council to the same extent as if each had signed, sealed and delivered to each of the others a promise to comply with and be bound by the Bylaw and all acts, decisions, proceedings and things done and taken under the Bylaw.

### 1.3 Conflict with Act or Regulations

The Bylaw is subordinate to the Act and the Regulations and is not intended to conflict with the Act or the Regulations. In the case of conflict, the Bylaw is to be interpreted to the extent possible so as to eliminate the conflict. If it is not possible to interpret the Bylaw, the conflicting provision of the Bylaw shall be considered as separate and severed from the Bylaw, the balance of which shall remain in force and be binding as if the conflicting provision had not been included.

### 1.4 Severability

Each provision of the Bylaw is intended to be severable and if any provision is determined by a court of competent jurisdiction to be illegal or invalid or unenforceable for any reason whatsoever, such provision shall be severed from the Bylaw and will not affect the legality or validity or enforceability of the remainder of the Bylaw or any other provision hereof unless it affects the entire intent and purpose of this Bylaw.

## Article 2 – Definitions

### 2.1 Definitions

In this Bylaw:

"Act" means the *Regional Health Authorities Act*, R.S.A. 2000, c.R-10;

"AHS" means Alberta Health Services, which, pursuant to the Act, is a corporation consisting of its members;

"Board" means the governing board of AHS, comprised of the members appointed by the Minister pursuant to the *Regional Health Authorities Membership Regulation*;

"Board Committee" means the Board committee that is authorized to recommend to the Board matters relating to this Bylaw and is delegated, pursuant to section 6(2) of the Act, those powers or duties of the Board as set out in this Bylaw;

"CEO" means the President and Chief Executive Officer of AHS;

"Council" has the meaning ascribed to it in Article 3.1;

"Council Coordinator" means a member of the AHS Community and External Relations team or

another provincial program team as assigned;

"*Council Terms of Reference*" means the Sexual Orientation, Gender Identity and Expression Provincial Advisory Council Terms of Reference as described in Article 14;

"*Legislation*" means the Act, the Regulation, and the Ministerial Regulation and any amendments thereto;

"*Minister*" means the Minister, Alberta Health;

"*Ministerial Regulation*" means the *Community Health Councils (Ministerial) Regulation, A.R. 193/1997*;

"*Permanent Resource Persons*" means individuals appointed by virtue of the roles they play within their organization and subject to the rules and regulations of their organizational position. Permanent Resource Persons are without voting rights and assist the Council in achieving its objectives;

"*Regulation*" means the *Community Health Councils Regulation, A.R. 202/1997*; and

"*Regulations*" means the Ministerial Regulation and the Regulation.

### **Article 3 – Name**

#### **3.1 Name**

In accordance with the Act and the Regulations, this Bylaw confirms that the community health council being established by this Bylaw, in accordance with the Legislation, will be referred to as the Sexual Orientation, Gender Identity and Expression Provincial Advisory Council (the "Council").

### **Article 4 – Objective**

#### **4.1 Objective of the Sexual Orientation, Gender Identity and Expression Provincial Advisory Council**

The objective of the Council is to advise AHS on healthcare matters in the best interest of sexual and gender minority Albertans throughout the Province.

### **Article 5 – Functions and Duties**

#### **5.1 Functions and Duties**

The primary functions and duties of the Council are to:

- (a) consider and provide evidence-based suggestions to AHS in the development of AHS strategies, policy, planning and service delivery that:
  - (i) improves the quality of services and patient/client satisfaction through effective planning of sexual and gender minority care;
  - (ii) prevents stigma and discrimination faced while accessing and navigating the healthcare system; and
  - (iii) enhances and creates opportunities to work towards a collaborative and integrated partnership among patients/clients, their family members, service providers, and policy makers;
- (b) provide a forum for patients/clients, families and communities to identify existing and emerging healthcare matters affecting sexual and gender minorities; and
- (c) provide advice to AHS on ways to improve quality, access and sustainability of safer and more inclusive healthcare services in Alberta.

In an advisory role, the Council will encourage Albertans to participate in the development of

its advice for building safe and inclusive quality healthcare services. The Council will also provide advice related to sexual and gender minority Albertans' priorities for services provided throughout the Province, drawing upon other expertise and lived experience as required. Therefore, the Council will:

- (d) seek and appropriately consider evidence and information from Albertans across the spectrum of sexual orientation, and gender identity and expression when advising on planning, delivery and evaluation of healthcare services;
- (e) gather the perspectives of the intersectionality of diversity by engaging with Albertans across the spectrum of sexual orientation, and gender identity and expression through communications, discussions or through other methods to hear their experiences, as they pertain to improving healthcare for sexual and gender minorities in their region or locale;
- (f) provide ongoing feedback about what is working well in the healthcare system and areas for improvement;
- (g) provide recommendations to AHS to improve access and provincial coordination of health services and assist Albertans to navigate Alberta's health system;
- (h) provide recommendations to AHS to share with Alberta's professional regulatory bodies to support knowledge and awareness of current key issues such as respectful provider interactions, correct terminology and data collection for diagnostics and laboratory, as examples;
- (i) provide feedback on tools, resources and training to support healthcare providers in providing safer and more inclusive care for all Albertans;
- (j) provide advice and input on strategies to prevent stigma and discrimination affecting the access and quality of care for sexual and gender minorities;
- (k) consider information provided by AHS and provide feedback, or seek further inputs to identify issues or trends from a diverse perspective;
- (l) review key performance indicators for AHS; and
- (m) provide feedback to AHS about strategies to further engage the community on sexual orientation, gender identity and expression in healthcare.

## **Article 6 – Council Membership and Permanent Resource Persons**

### **6.1 Membership and Composition**

- (a) There shall be eight (8) to eighteen (18) voting members on the Council.
- (b) Notwithstanding Article 6.1(a), when in the opinion of the Board circumstances require that the Council consist of less than eight (8) members, the Council may consist of fewer than eight (8) members for a period of time that the Board considers reasonable to accommodate the circumstances. AHS shall inform the Board of recruitment efforts undertaken to achieve a full complement of members.
- (c) The members will include patients/clients and family members with experience in sexual and gender minority healthcare matters, with broad representation from across Alberta.

## **6.2 Eligibility**

- (a) The following persons are not eligible to be or remain a member of the Council:
  - (i) all members of the Board;
  - (ii) the CEO;
  - (iii) all AHS management personnel who report directly to one or more members of the Board;
  - (iv) all AHS management personnel who report directly to the CEO;
  - (v) all remaining AHS management personnel who report directly to management personnel referred to in Article 6.2(a)(iv); and
  - (vi) all persons who are engaged on a fee for service basis in a management capacity referred to in any of Articles 6.2(a)(ii) to (v).
  
- (b) The following persons are eligible to be members of the Council, but not more than one-third (1/3) of the membership may consist of such persons:
  - (i) employees of AHS, other than persons referred to in Article 6.2(a) above who are employees;
  - (ii) independent health service providers who, directly or indirectly through a corporation, partnership or other association, receive income through the provision of health services from the Government of Alberta or AHS;
  - (iii) employees of persons referred to in Article 6.2(b)(ii);
  - (iv) other persons who rely in whole or in part on contracts with AHS as a means of earning their livelihood; and
  - (v) directors, officers or employees of a corporation that is a person referred to in Article 6.2(b)(iv) or partners or employees of a partnership that is a person referred to in Article 6.2(b)(iv).

## **6.3 Member Recruitment, Selection Criteria and Appointment Process**

- (a) Vacancies will be advertised within AHS and externally to communities throughout Alberta through media and stakeholder organizations. Applications will be vetted by an interview panel comprised of the Council Chair or another public Council member, AHS Permanent Resource Person(s), and the Council Coordinator, with interviews of top candidates.
  
- (b) All recommended appointments shall meet the eligibility requirements set out in Article 6.2 and the following selection criteria:
  - (i) the individual submits a complete, signed application form, as required by AHS;
  - (ii) the individual is 18 years of age, or older;
  - (iii) the individual is ordinarily resident in Alberta;
  - (iv) the individual has significant lived experience with sexual and gender minority healthcare and a demonstrated interest in the health of the community and in health issues generally; and
  - (v) the individual completes the AHS Advisory Councils' Conflict of Interest form.
  
- (c) AHS, in consultation with the interview panel, shall put forward recommendations for appointment of members, and such recommendations shall be considered for appointment by the Board Committee, who shall forward the nomination slate to the Board for approval.
  
- (d) The successful appointee(s) shall be notified, by mail, by the Board.

## **6.4 Term of Office**

The term of office for members of the Council shall be served in either 2-year terms or 3-year terms, to a maximum of six (6) consecutive years, unless otherwise determined by the Board. On expiry of the first term, all Council members must express interest in additional term(s) and be re-appointed, in accordance with Article 6.3, for any second and subsequent terms as determined

by the Board. Former Council members may reapply to Council after two (2) years have elapsed following expiration of their final term.

#### **6.5 Council Chair**

- (a) Council shall, every second year, nominate from within its membership, except from among those members who are persons referred to in Article 6.2(b), a Chair. Nomination will be undertaken in accordance with the Council Terms of Reference and the Robert's Rules of Order Election Process. The name of the Council Chair will be submitted to the Board for appointment to a two-year term.
- (b) The Board shall submit, in writing to the Minister, the name of each Council Chair.

#### **6.6 Permanent Resource Persons**

Permanent Resource Persons may include, among other AHS or non-AHS persons, representatives from the following program areas of AHS:

- (a) AHS Community Engagement;
- (b) AHS Diversity and Inclusion;
- (c) AHS Addiction & Mental Health;
- (d) AHS Population, Public Health and Indigenous Wellness Core;
- (e) AHS System Innovations & Programs;
- (f) AHS Primary Care; and
- (g) AHS Zones (ad hoc).

All Permanent Resource Persons or their designate shall attend all meetings of the Council but are not entitled to vote.

#### **6.7 Remuneration**

Members of the Council are not entitled to remuneration for acting as members; however, the Approver, as such term is described in the *AHS Travel, Hospitality, and Working Session Expenses Policy #1122*, as amended from time to time, pursuant to the delegation by the Board, may authorize the payment of expenses incurred by members of the Council in the course of acting as a member, which, in the opinion of the Approver, are reasonable. Payment of such expenses shall be pursuant to the terms set out in the *AHS Travel, Hospitality, and Working Session Expenses Policy #1122*, as amended from time to time.

#### **6.8 Termination and Resignation**

- (a) Pursuant to section 6(2) of the Act, the Board delegates its powers under section 7 of the Regulation to the AHS Vice-President of Community Engagement & Communications.
- (b) The AHS Vice-President of Community Engagement & Communications may, for cause, terminate the appointment of members of the Council, with support from the Board Committee, by notice in writing. This includes, but is not limited to:
  - (i) non-compliance with this Bylaw; and
  - (ii) lack of attendance and participation at Council meetings. Should lack of attendance and participation at Council meetings be a concern, AHS, in consultation with the Council Chair, will review with the member their ability to continue as a member.
- (c) A member of the Council may resign, by notice in writing to AHS.
- (d) The Board shall receive notification annually of all resignations and terminations by AHS.

## **6.9 Vacancies**

Vacancies on the Council shall be filled by the Board pursuant to the process referred to in Articles 6.2 and 6.3.

## **Article 7 – Conflict of Interest**

### **7.1 Conflict of Interest**

(a) Article 7 is in addition to the Conflict of Interest provisions as set out in section 6 of the Regulation, including the definitions contained therein, and is not intended as a substitute for section 6.

(b) No member shall take part in a decision in the course of carrying out the member's office or powers as a member knowing that the decision may, or may potentially further a private interest of the member, a person directly associated with the member or a minor child of the member.

### **7.2 Declaration of Conflict**

Where:

(a) a matter for decision is before the Council, or a committee of the Council; and

(b) a member has reasonable grounds to believe that the member, a person directly associated with the member, or a minor child of the member, has or may have a private interest in the matter, whether real or perceived;

the member must make a verbal declaration of that interest and must withdraw forthwith from the meeting without participating in the discussion of, or voting on, the matter.

### **7.3 Power to Influence**

No member shall use the office or power of the Council or as a member to influence a decision to be made by, or on behalf of, the Council or the Board to further a private interest, whether real or perceived, of the member, a person directly associated with the member, or a minor child of the member.

### **7.4 Information Use or Communication**

No member shall use or communicate information not available to the general public that was gained by the member in the course of carrying out the member's office or powers as a member to further or seek to further a private interest, whether real or perceived, of the member, a person directly associated with the member, or a minor child of the member.

## **Article 8 – Meetings of the Council**

### **8.1 General**

The Council shall meet at least four (4) times per year or at the call of the Council Chair. The meetings shall be conducted in accordance with the Legislation, this Bylaw, and the Council Terms of Reference.

### **8.2 Public Meetings**

A meeting of the Council must be open to the public unless the Council determines that holding the meeting, in whole or in part, in public can or will result in the release of:

(a) information that will, or may, impair the ability of AHS or the Council to carry out its

responsibilities; or

- (b) information relating to the personal interests, reputation or privacy of any person.

In determining whether to hold a meeting or part of it in private, the Council shall take the following considerations into account:

- (c) whether holding the meeting, or part of the meeting, in public would result in the release of information that would prejudice measures protecting health, safety, security or the maintenance of the law;
- (d) whether holding the meeting, or part of the meeting, in private is justified in order to permit the Council to carry out its responsibilities in an effective and efficient manner; and
- (e) any other significant and relevant consideration as determined by the Council.

### **8.3 Closed Meetings**

- (a) Where the Council has determined under Article 8.2 that a meeting, or part of a meeting, shall be held in private, the Council shall ensure that the minutes of the meeting indicate:
  - (i) the nature of the subject matter to be discussed in the closed meeting; and
  - (ii) the reason(s) the Council deems it necessary to hold the meeting, or part of the meeting, in private.
- (b) Where a meeting, or part of a meeting, is held in private under Article 8.3(a), no resolution related to the subject matter that was discussed in the closed meeting may be passed unless the meeting reverts to a public meeting.

### **8.4 Quorum**

A quorum shall consist of 50 per cent (50%) plus one (1) of the members then in office. A resolution may be passed, or action taken on any matter, only where a duly constituted meeting has been called and a quorum is present at the time the resolution is put forward. In the event that a quorum is not present, the meeting may proceed; however, any action or resolution shall be deferred to the next meeting where a quorum is present.

## **Article 9 – Minutes of Meetings**

### **9.1 Minutes of Council Meetings**

- (a) The Council shall record the minutes of each of its respective meetings.
- (b) At each meeting, the Council shall adopt the minutes of the previous meeting.
- (c) The Council shall forward a copy of the adopted minutes from each meeting to AHS within seven (7) days after the meeting at which the minutes were adopted.
- (d) AHS shall make the adopted minutes of the Council available for inspection by the public during normal business hours of AHS.
- (e) AHS may exclude from the minutes made available to the public, any matter that relates to a meeting, or part of a meeting, that was held in private, other than a resolution that was passed in respect of that matter at a public meeting of the Council.
- (f) The Council and AHS shall keep a copy of the minutes of each meeting of the Council in

accordance with the legal requirements to retain such records.

## **Article 10 – Fiscal Year**

### **10.1 Fiscal Year**

The fiscal year of the Council shall be 01 April to 31 March of the following calendar year.

## **Article 11 – Annual Report**

### **11.1 Annual Report**

The Board delegates to the Board Committee the powers and duties in this Article.

- (a) The Council shall provide, in September of each year, an annual report of its activities for the previous fiscal year to the Board Committee.
- (b) The Board Committee may require the Council to submit the annual report in the form and containing the information as specified.
- (c) The Board Committee shall make the annual report of the Council available to the public.

## **Article 12 – Amendment to Bylaw**

### **12.1 Amendment(s)**

- (a) Any amendment(s) made to the Bylaw must be done on resolution of a quorum of members and shall be submitted to the Board for approval and ratification.
- (b) The Board shall approve, and submit to the Minister for approval, any amendments proposed to the Bylaw.
- (c) Such amendment(s) have no effect until the amended Bylaw receives written approval of the Minister.

## **Article 13 – Disestablishment of the Council**

### **13.1 Disestablishment of the Council**

The Minister may, in accordance with section 10 of the Act, give directions to the Board to disestablish the Council. In the event that the Board wishes to disestablish the Council, it shall submit to the Minister a proposal for the disestablishment and the winding up of Council affairs. Upon written approval of the proposal by the Minister, the Board shall pass a Bylaw to disestablish the Council in accordance with the approved proposal. The Board shall submit to the Minister a copy of such Bylaw to disestablish the Council which has no effect until it has been approved in writing by the Minister.

## **Article 14 – Terms of Reference**

### **14.1 Terms of Reference**

The Council shall have Terms of Reference approved by the Board. The Terms of Reference shall comply with, and are subordinate to, the Legislation and this Bylaw, including their respective limits of authority, and shall not contain matters required by the Legislation to be set out in this Bylaw. The Terms of Reference are not intended to conflict with the Legislation and



this Bylaw. In the case of conflict, the Terms of Reference shall be interpreted to the extent possible so as to eliminate the conflict having regard, firstly, to the paramountcy of the Legislation and secondly, to this Bylaw.

## Article 15 – Effective Date

### 15.1 Effective Date

This Amended Bylaw comes into force and effect upon written approval of the Minister.


This Amended Bylaw is passed by resolution of the Board of Alberta Health Services this 17<sup>th</sup> day of March, 2022.



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Gregory Turnbull, QC, Chair  
Alberta Health Services Board

This Amended Bylaw is approved by the Minister of Health, this 21<sup>st</sup> day  
of July, 2022.



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The Honourable Jason Copping  
Minister of Health