EC2013-529

AMBULANCE SERVICES ACT
DECLARATION RE


EC2013-530

AMBULANCE SERVICES ACT
GENERAL REGULATIONS

Pursuant to section 23 of the Ambulance Services Act R.S.P.E.I. 1988, Cap. A-10.01, Council made the following regulations:

Application

1. The requirements and standards in these regulations apply in respect of every ambulance that is used or intended to be used to provide ambulance services in the province, except an ambulance based outside the province that is used to provide for the inter-provincial transportation of patients.

Staffing of an Ambulance

2. (1) An ambulance shall be staffed by at least two emergency medical technicians.

(2) When transporting a patient by ambulance, at least one emergency medical technician shall ride in the patient section of the ambulance to attend to the patient, except where:
   (a) medical or nursing personnel are in the patient section attending to the patient; and
   (b) space limitations prevent an emergency medical technician from riding in the patient section with the medical or nursing personnel.

Vehicle Safety and Design

3. (1) An ambulance shall be
   (a) registered and inspected in accordance with the Highway Traffic Act R.S.P.E.I. 1988, Cap. H-5, as evidenced by the motor vehicle registration and the inspection certificate carried in the ambulance;
   (b) maintained in good mechanical condition and repair; and
   (c) cleaned, disinfected and decontaminated to prevent the spread of communicable diseases.

   (2) The vehicle design requirements for an ambulance are set out in Schedule A.

Equipment and Supplies

4. (1) The following vehicle equipment shall be carried in an ambulance:
   (a) a two-way radio or mobile phone;
   (b) at least two battery-operated flashlights;
   (c) a properly maintained dry chemical fire extinguisher of a type approved by the Fire Marshal appointed pursuant to the Fire Prevention Act R.S.P.E.I. 1988, Cap. F-11.

   (2) The patient care equipment and supplies set out in Schedule B shall be carried in an ambulance.

5. (1) All equipment and supplies carried in an ambulance shall be properly stored and secured to prevent uncontrolled movement.

   (2) All equipment carried in an ambulance shall
(a) meet any standards established by the Canadian Standards Association (CSA) for such equipment, as indicated by a mark or stamp of CSA approval;
(b) be maintained and calibrated in accordance with any recommendations of the manufacturer; and
(c) be cleaned, disinfected and decontaminated to prevent the spread of communicable diseases.

(3) No person shall use equipment carried in an ambulance for purposes, or under conditions, other than those approved by the manufacturer for that equipment.

Use of Ambulance

6. An ambulance shall not be used for the transportation of human remains unless prior approval has been obtained from a coroner appointed under the Coroners Act R.S.P.E.I. 1988, Cap. C-25.1.

Patient Call Reports

7. For the purposes of clause 15(3)(b) of the Act, an operator shall retain a patient call report for 7 years.

8. These regulations come into force on September 1, 2013.

SCHEDULE A

Ambulance Design Requirements

1. An ambulance shall provide for
   (a) ready access between driver and patient sections;
   (b) entry by rear doors to permit ready loading of a stretcher patient; and
   (c) entry by a curbside door to permit ready loading of an ambulatory patient, with anti-slip covering on any steps.

2. The rear doors of an ambulance shall not contain windows that open.

3. The patient section of an ambulance shall accommodate
   (a) at least one stretcher patient and one other patient lying on another stretcher or backboard, or two seated patients; and
   (b) at least one person who is attending to the patients, with headroom sufficient for the provision of care from a sitting position.

4. (1) An ambulance shall be equipped with a stretcher holder mounted to the floor or left wall assembly so as to secure a wheeled, adjustable-height stretcher.

   (2) The floor or wall assembly on which a stretcher holder is mounted shall be reinforced so as to transmit stresses to the main body of the vehicle.

   (3) A stretcher holder shall be positioned to allow free working space at the foot and head of the stretcher.

5. An ambulance shall be equipped with
   (a) fasteners or holders designed to securely fasten and transport an incubator;
   (b) an attendant seat with headrest, facing toward the rear, and positioned by the head of the stretcher;
   (c) restraint belts for patients and emergency medical technicians or other personnel;
   (d) overhead hooks for use with intravenous treatment;
   (e) readily accessible storage for all required patient care supplies and equipment; and
   (f) a siren, with controls readily accessible to the driver.

6. The interior surfaces of an ambulance shall be easily washable and free from sharp edges.

7. An ambulance shall be insulated and have a system of heating and cooling or ventilation that allows for keeping the patient section approximately at ordinary room temperature.

8. An ambulance shall be equipped with the following lighting:
(a) a map light in the driver section;
(b) at least two interior lights, located on each side of the patient section, controlled by independent switches to permit dimming of individual lights;
(c) lighting to illuminate the rear entry when the doors are opened and when the transmission is in reverse gear;
(d) lighting to illuminate the side step entry when the door is opened;
(e) a red, or red and white, rotating light or strobe light, mounted on the roof, which is visible within 150 metres from the front and rear of the vehicle;
(f) two red flashing lights on the grill or front face of the vehicle;
(g) an intersection light mounted on the side of each front fender;
(h) a clear ditch light, either mounted on the vehicle or hand-held, sufficient to illuminate a work site or house number at a distance of 15 metres.

9. (1) The interior of an ambulance shall be painted and furnished in soft colours.

(2) The exterior of an ambulance shall be painted predominantly white, cream or yellow.

10. The exterior of an ambulance shall display the word “AMBULANCE” on reflective decals, written in block letters at least 12.5 cm in height, on the rear and both sides of the vehicle, and on the front in reverse printing so as to be readable in a mirror.

**SCHEDULE B**

**Patient Care Equipment and Supplies**

<table>
<thead>
<tr>
<th>Patient Care Equipment and Supplies</th>
<th>Minimum Number or Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Standard, adjustable-height stretcher</td>
<td>1</td>
</tr>
<tr>
<td>2. Pedi-mate paediatric transport device</td>
<td>1</td>
</tr>
<tr>
<td>3. Stair chair</td>
<td>1</td>
</tr>
<tr>
<td>4. Semi-rigid, collapsible stretcher</td>
<td>1</td>
</tr>
<tr>
<td>5. Standard-sized backboard</td>
<td>1</td>
</tr>
<tr>
<td>6. Kendrick extrication device</td>
<td>1</td>
</tr>
<tr>
<td>7. Head immobilization device</td>
<td>1</td>
</tr>
<tr>
<td>8. Backboard quick adjustable clips (body immobilization straps)</td>
<td>1 set of 4</td>
</tr>
<tr>
<td>9. Semi-rigid, adjustable cervical collars</td>
<td>1 adult size</td>
</tr>
<tr>
<td>10. Bedding and linen, as follows:</td>
<td></td>
</tr>
<tr>
<td>(a) blankets</td>
<td>2</td>
</tr>
<tr>
<td>(b) bed sheets</td>
<td>2</td>
</tr>
<tr>
<td>(c) pillows</td>
<td>2</td>
</tr>
<tr>
<td>(d) pillow cases</td>
<td>2</td>
</tr>
<tr>
<td>(e) impermeable protective mattress covers</td>
<td>2</td>
</tr>
<tr>
<td>11. Assorted bandages and sterile dressings, including:</td>
<td></td>
</tr>
<tr>
<td>(a) 4 x 4 sterile gauze pads</td>
<td>12</td>
</tr>
<tr>
<td>(b) abdominal pads</td>
<td>6</td>
</tr>
<tr>
<td>(c) Kling rolled bandages, 4-inch</td>
<td>2</td>
</tr>
<tr>
<td>(d) non-stick (Telfa) dressing</td>
<td>3</td>
</tr>
<tr>
<td>12. Roll of adhesive tape</td>
<td>1</td>
</tr>
<tr>
<td>13. Trauma shears</td>
<td>1</td>
</tr>
<tr>
<td>14. Triangular slings</td>
<td>3</td>
</tr>
<tr>
<td>15. Sterile burn kit</td>
<td>1</td>
</tr>
<tr>
<td>16. Oxygen tanks, with minimum 15 litres per minute regulator, as follows:</td>
<td></td>
</tr>
<tr>
<td>(a) large tank (M size or equivalent), maintained at not less than 500 psi</td>
<td>1</td>
</tr>
<tr>
<td>(b) small (D or E) portable tanks, maintained at not less than 500 psi</td>
<td>2</td>
</tr>
<tr>
<td>17. Nebulizer masks</td>
<td>1 adult size</td>
</tr>
<tr>
<td>18. Nasal cannulas</td>
<td>1 adult size</td>
</tr>
</tbody>
</table>

1 paediatric size
<table>
<thead>
<tr>
<th>19. Non-rebreather masks</th>
<th>1 adult size 1 paediatric size</th>
</tr>
</thead>
<tbody>
<tr>
<td>20. Bag-valve-mask (BVM) devices with intrinsic PEEP valve/external PEEP accessory, as follows:</td>
<td></td>
</tr>
<tr>
<td>(a) adult-sized with 2 adult-sized masks</td>
<td>1</td>
</tr>
<tr>
<td>(b) child-sized with 1 child-sized mask</td>
<td>1</td>
</tr>
<tr>
<td>(c) infant-sized with 1 infant-sized mask</td>
<td>1</td>
</tr>
<tr>
<td>21. Adult CPAP delivery device</td>
<td>1</td>
</tr>
<tr>
<td>22. Suction apparatus with single service tips, as follows:</td>
<td></td>
</tr>
<tr>
<td>(a) electrically operated and stationary</td>
<td>1</td>
</tr>
<tr>
<td>(b) portable</td>
<td>1</td>
</tr>
<tr>
<td>23. Yankeur suction device</td>
<td>1</td>
</tr>
<tr>
<td>24. Suction catheters (sizes 12Fr to 16Fr)</td>
<td>1 per size</td>
</tr>
<tr>
<td>25. Suction tubing</td>
<td></td>
</tr>
<tr>
<td>26. Oropharyngeal airways (sizes 3 to 10)</td>
<td>1 per size</td>
</tr>
<tr>
<td>27. Nasopharyngeal airways (sizes 12 to 30)</td>
<td>1 per size</td>
</tr>
<tr>
<td>28. King LT supraglottic airways (sizes 3 to 5)</td>
<td>1 per size</td>
</tr>
<tr>
<td>29. Colorimetric end tidal CO2 device</td>
<td>1</td>
</tr>
<tr>
<td>30. Endotracheal tubes (sizes 3 to 8.5)</td>
<td>1 per size</td>
</tr>
<tr>
<td>31. Positube esophageal detection device</td>
<td>1</td>
</tr>
<tr>
<td>32. Bougie</td>
<td>1</td>
</tr>
<tr>
<td>33. Cricothyrotomy kits</td>
<td>1 adult size 1 paediatric size</td>
</tr>
<tr>
<td>34. Styles</td>
<td>1 adult size 1 paediatric size</td>
</tr>
<tr>
<td>35. Stethoscope</td>
<td>1</td>
</tr>
<tr>
<td>36. Sphygmomanometer, with infant-sized, pediatric-sized, adult-sized, and large adult-sized cuffs</td>
<td>1</td>
</tr>
<tr>
<td>37. Medications, as follows:</td>
<td></td>
</tr>
<tr>
<td>(a) Acetylsalicyclic Acid (ASA) (81 mg/tablet)</td>
<td>5 packages of 2 tablets</td>
</tr>
<tr>
<td>(b) Adenosine (3 mg/ml)</td>
<td>5 boxes – injection or vials</td>
</tr>
<tr>
<td>(c) Amiodarone (150 mg/3 ml)</td>
<td>5 vials</td>
</tr>
<tr>
<td>(d) Atropine (1 mg/10 ml)</td>
<td>2 boxes - injection</td>
</tr>
<tr>
<td>(e) Bicarb (Sodium Bicarbonate) (50 mg/50 ml)</td>
<td>1 box - injection</td>
</tr>
<tr>
<td>(f) Dextrose 5% water (D5W) (100ml)</td>
<td>1 bag</td>
</tr>
<tr>
<td>(g) Dextrose 50% (25 g/50 ml)</td>
<td>2 boxes - injection</td>
</tr>
<tr>
<td>(h) Diazepam (Valium) (10 mg/2 ml)</td>
<td>2 vials</td>
</tr>
<tr>
<td>(i) Dimenhydrinate (Gravol) (50 mg/ml)</td>
<td>2 vials or ampules</td>
</tr>
<tr>
<td>(j) Diphenhydramine (Benadryl) (50 mg/ml)</td>
<td>2 vials</td>
</tr>
<tr>
<td>(k) Dopamine (500 ml)</td>
<td>1 bag (pre-mixed)</td>
</tr>
<tr>
<td>(l) Epinephrine (Adrenaline) 1:10,000 (1 mg/10 ml)</td>
<td>6 boxes - injection</td>
</tr>
<tr>
<td>(m) Epinephrine (Adrenaline) 1:1,000 (1 mg/ml)</td>
<td>1 ampule</td>
</tr>
<tr>
<td>(n) Fentanyl (100 mcg/2 ml)</td>
<td>2 ampules</td>
</tr>
<tr>
<td>(o) Furosemide (Lasix) (10 mg/ml)</td>
<td>2 vials</td>
</tr>
<tr>
<td>(p) Glucagon (1 mg)</td>
<td>2 vials/kit</td>
</tr>
<tr>
<td>(q) Haloperidol (Haldol) (5 mg/ml)</td>
<td>1 vial</td>
</tr>
<tr>
<td>(r) Ipratropium (Atrovent)</td>
<td>2 aerosol inhalers; 1 single-use meter dose inhaler</td>
</tr>
<tr>
<td>(s) Lidocaine (Xylocaine)</td>
<td>1 bottle</td>
</tr>
<tr>
<td>(t) Magnesium Sulphate (5 g/10 ml)</td>
<td>1 vial</td>
</tr>
<tr>
<td>(u) Metoclopramide (10 mg/2 ml)</td>
<td>2 vials</td>
</tr>
<tr>
<td>(v) Midazolam (Versed) (5 mg/ml)</td>
<td>1 vial</td>
</tr>
<tr>
<td>(w) Morphine (10 mg/ml)</td>
<td>2 ampules</td>
</tr>
<tr>
<td>(x) Naloxone (Narcan) (0.4 mg/ml)</td>
<td>2 vials</td>
</tr>
<tr>
<td>(y) Nitroglycerin (N/G) (0.4 mg/dose)</td>
<td>2 vials</td>
</tr>
<tr>
<td>(z) Oxytocin (Syntocinon) (10 USP units/ml)</td>
<td>2 ampules</td>
</tr>
<tr>
<td>(aa) Salbutamol (Ventolin)</td>
<td>2 aerosol inhalers;</td>
</tr>
</tbody>
</table>
### 38. Intravenous supplies, as follows:

- **(a)** syringe – 60cc
- **(b)** syringe – 20cc
- **(c)** syringe – 10cc
- **(d)** syringe – 5cc
- **(e)** syringe – 3cc
- **(f)** syringe – 1cc
- **(g)** NaCl 0.9% for injection, 10cc bottles
- **(h)** NaCl 0.9% for flushing, 10cc pre-filled syringes
- **(i)** NaCl 0.9% solution, 1,000 ml bags
- **(j)** peripheral intravenous lock
- **(k)** IV Tubing – 10gtt solution set
- **(l)** Buretrol – 60gtt set
- **(m)** tourniquets
- **(n)** Tagaderm dressing
- **(o)** blunt fill needle – 18 gauge (1-1/2”)
- **(p)** needle – 25 gauge (7/8”)
- **(q)** needle – 22 gauge (1-1/2”)
- **(r)** IV catheter - 14 gauge
- **(s)** IV catheter - 16 gauge
- **(t)** IV catheter - 18 gauge
- **(u)** IV catheter - 20 gauge
- **(v)** IV catheter - 22 gauge
- **(w)** IO catheter – 18 gauge
- **(x)** transport tape
- **(y)** nasal atomizer
- **(z)** alcohol swabs

### 39. Penlight

1

### 40. Sam splints

1

### 41. Urinal

1

### 42. Bedpan, with toilet paper

1

### 43. Emesis bag

1

### 44. Hot compresses

2

### 45. Cold compresses

2

### 46. Disposable gloves (sizes small, medium and large)

1 box/size

### 47. Safety glasses with side shields

2 pairs

### 48. Surgical masks

4

### 49. Sharps disposal container

1

### 50. Biohazard bag

1

### 51. Facial tissues

1 box

### 52. Cardiac monitor kit, portable, including:

- **(a)** cardiac monitor/defibrillator
- **(b)** multi-function defibrillator electrode pads
- **(c)** disposable cardiac electrodes
- **(d)** recorder paper
- **(e)** disposable razor
- **(f)** 5-lead attachment
- **(g)** 12-lead attachment

### 53. Airway kit, portable, including:

- **(a)** wire cutter
- **(b)** Magill forceps
- **(c)** laryngoscope handle with batteries
- **(d)** blade – MacIntosh #3
- **(e)** blade – MacIntosh #4
- **(f)** blade – Miller #0
- **(g)** blade – Miller #1
- **(h)** blade – Miller #4
- **(i)** twill tape
- **(j)** Muko lubricating jelly
- **(k)** styles
EXPLANATORY NOTES

SECTION 1 provides that these regulations apply in respect of every ambulance that is used or intended to be used to provide ambulance services in the province, except an ambulance based outside the province that is used to provide for the inter-provincial transportation of patients.

SECTION 2 requires that an ambulance be staffed by at least two emergency medical technicians and that at least one shall ride in the patient section with a patient, unless medical or nursing personnel are in the patient section attending the patient and there are space limitations.

SECTION 3 sets out vehicle safety requirements for an ambulance and provides that the vehicle design requirements for an ambulance are set out in Schedule A.

SECTION 4 sets out the vehicle equipment that shall be carried in an ambulance and provides that the patient care equipment and supplies that shall be carried in an ambulance are set out in Schedule B.

SECTION 5 sets out safety requirements for equipment and supplies carried in an ambulance.

SECTION 6 requires approval from a coroner before an ambulance is used to transport human remains.

SECTION 7 sets out the required retention period for patient call reports.

SECTION 8 provides for the commencement of these regulations.

EC2013-531

EMERGENCY MEDICAL TECHNICIANS ACT
DECLARATION RE

Under authority of section 16 of the Emergency Medical Technicians Act, Stats. P.E.I. 2012, c. 7 Council ordered that a Proclamation do issue proclaiming the said "Emergency Medical Technicians Act" to come into force effective September 1, 2013.

EC2013-532

EMERGENCY MEDICAL TECHNICIANS ACT
EMERGENCY MEDICAL TECHNICIANS REGULATIONS

Pursuant to section 14 of the Emergency Medical Technicians Act R.S.P.E.I. 1988, Cap. E-6.11, Council made the following regulations:
INTERPRETATION


EMT LICENSES

2. (1) An applicant shall meet the following requirements for a license:
   (a) successful completion of training, including both classroom and practical experience, given in a community college program, or a comparable program, in emergency medical services that is accredited, at the time of the applicant’s graduation, by the Canadian Medical Association;
   (b) currency of knowledge and skills as indicated by one of the following:
      (i) the applicant completed the training required by clause (a) within the two years preceding the date of the application,
      (ii) the applicant practised emergency medical technology, within the two years preceding the date of the application, in relation to at least 20 patients who required emergency medical services, and
      (iii) the applicant successfully completed the continuing education requirements set out in section 4;
      (c) current, valid certification in cardiopulmonary resuscitation at the basic rescuer level in accordance with the standards adopted by the Heart and Stroke Foundation of Canada;
   (d) authorization to drive an ambulance, either under a valid Class 4 driver’s license issued to the applicant pursuant to the Highway Traffic Act R.S.P.E.I. 1988, Cap. H-5, or an equivalent driver’s license issued to the applicant in another jurisdiction; and
   (e) not more than 6 demerit points recorded on the applicant’s driving record pursuant to the Highway Traffic Act, or equivalent legislation in another jurisdiction, in either of the 2 years preceding the application.

(2) Notwithstanding clause (1)(a), where an applicant successfully completed training but does not meet the requirements of clause (1)(a), the Board may deem the applicant’s training to meet the requirements of clause (1)(a) if
   (a) the applicant provides to the Board an assessment of the training conducted by
      (i) the Canadian Medical Association,
      (ii) the provider of a training program in emergency medical services that has been accredited by the Canadian Medical Association, or
      (iii) another body approved by the Board; and
   (b) either
      (i) the assessor concludes, based on the assessment, that the applicant’s training is equivalent in scope, content and quality to a program referred to in clause (1)(a), or
      (ii) the applicant successfully completes, in such manner as the Board may direct, such further training as the assessor concludes is necessary, based on the assessment, for the applicant’s training to be equivalent in scope, content and quality to a program referred in clause (1)(a).

(3) Notwithstanding clause (1)(e), where an applicant had more than 6 demerit points recorded on his or her driving record in either of the 2 years preceding the application, the applicant shall be deemed to meet the requirements of clause (1)(e) if
   (a) the applicant has successfully completed the Canada Safety Council Defensive Driving Course; and
   (b) the applicant’s demerit points have been reduced to 6 or less.

(4) It is a condition on every license that the EMT who holds the license shall continue to meet the requirements described in clause (1)(d) and (e).

(5) Where an EMT who holds a license no longer meets the requirements of clause (1)(d) or (e), the EMT shall forthwith notify the Board.
3. (1) An applicant shall meet the following requirements for the renewal of a license:
   (a) currency of knowledge and skills as indicated by the practise of emergency medical technology, within the 2 years preceding the date of the application, in relation to at least 10 patients who require emergency medical services;
   (b) successful completion of the continuing education requirements set out in section 4;
   (c) the requirements of clauses 2(1)(c) to (e).

(2) An application for the renewal of a license shall be made before the license expires.

(3) Notwithstanding subsection (1), where an applicant does not meet one or more of the requirements for the renewal of a license, the Board may renew the license for a period of up to 12 months, on the condition that the EMT who holds the license shall, within the time period specified by the Board, meet those requirements.

(4) Notwithstanding subsection (2), the Board may accept an application for the renewal of a license from an applicant whose license expired not more than three years before the date of the application.

(5) Where the Board approves an application for the renewal of a license made by an applicant whose license expired less than a year before the date of the application, it is a condition of the license issued to the applicant that he or she shall, within 60 days of the date the license is issued,
   (a) practise emergency medical technology in relation to at least 10 patients who require emergency medical services; and
   (b) complete the continuing education requirements set out in section 4.

(6) Where the Board approves an application for the renewal of a license made by an applicant whose license expired one to three years before the date of the application, it is a condition of the license issued to the applicant that he or she shall, within six months of the date the license is issued,
   (a) complete at least 420 hours of supervised training approved by the Board at the license level he or she held prior to the expiry of the license;
   (b) practise emergency medical technology in relation to at least 75 patients, at least 15 of whom require emergency medical services; and
   (c) complete the continuing education requirements set out in section 4.

(7) Notwithstanding subsections (5) and (6), where a licensee has commenced, but not completed, the requirements set out in subsection (5) or (6) within the time periods specified, the Board may extend the time period for the completion of the requirements by up to three months.

(8) In subsection (6), “supervised training” means on-the-job training under the direct supervision of an EMT who is a licensee or who holds an equivalent license or registration in another province or territory.

CONTINUING EDUCATION

4. (1) An EMT who holds a license shall earn at least 20 continuing education units within each two-year period defined by the Board, subject to pro-ration.

(2) Subject to subsection (3), continuing education units may be earned as follows:
   (a) one continuing education unit per hour of attendance for the successful completion of a course, or a component of a course, approved by the Board;
   (b) two continuing education units per hour of instruction for instructing a course approved by the Board;
   (c) two continuing education units for acting as a preceptor to a student or another EMT for 1 to 3 months;
   (d) four continuing education units for acting as a preceptor to a student or another EMT for more than 3 months.

CONTINUATION
A maximum of 4 continuing education units may be earned for the successful completion, or teaching, of recertification courses in cardiopulmonary resuscitation and defibrillation.

The Board may approve a course in any of the following subject areas:

(a) professional responsibilities;
(b) communication;
(c) health and safety;
(d) assessment and diagnostics;
(e) therapeutics;
(f) integration;
(g) transportation;
(h) health promotion and public safety.

Each continuing education unit earned may only be counted towards the requirements in subsection (1) once.

An EMT who holds a license shall keep a complete and accurate record of continuing education units earned and shall provide the record to the Board on request.

SCOPE AND STANDARDS OF EMT PRACTICE

5. (1) The levels of license are as follows:
(a) EMT, Level I;
(b) EMT, Level II;
(c) EMT, Level III.

(2) The minimum competencies and scope of practice for each level of license pertaining to the areas of assessment and diagnostics, and therapeutics and integration, are set out in Schedule I.

(3) The performance by an EMT of the competencies set out in Schedule I is subject to
(a) the level of license held by the EMT;
(b) any conditions on the license held by the EMT;
(c) additional procedures approved by the Board in accordance with subsection 7(5) of the Act; and
(d) the protocols established by the Ambulance Services Director under clause 3(2)(b) of the Ambulance Services Act R.S.P.E.I. 1988, Cap. A-10.01.

(4) The minimum competencies for all EMTs who hold a license, pertaining to the following areas are set out in Schedule II:
(a) professional responsibilities;
(b) communication;
(c) health and safety;
(d) transportation;
(e) health promotion and public safety.

MISCONDUCT

6. (1) For the purposes of subclause 1(1)(i)(v) of the Act, the following conduct by an EMT is misconduct:
(a) purporting to have qualifications or expertise that the EMT does not have;
(b) attempting to deal with a patient’s condition in a manner that is beyond the scope of the EMT’s training;
(c) failing to comply with the directions of the medical advisor for an ambulance operation or the medical practitioner responsible for the patient’s care;
(d) assigning another person, who is subject to the EMT’s direction, responsibilities that are outside that other person’s qualifications;
(e) failing to maintain the standards of practice for EMTs adopted or prescribed by these regulations;
(f) engaging in EMT practice while under the influence of drugs (prescription or non-prescription) or other substances that the EMT should know could have an adverse effect on the EMT’s performance;
(g) abuse of, harassment of or offensive behaviour toward a patient;
(h) falsifying patient records or omitting, what is in the opinion of the Board, significant information respecting a patient or services provided or not provided to the patient;
(i) disclosing information to unauthorized persons respecting the condition of a patient or services provided to a patient, except where necessary to provide emergency medical services or other health services to the patient; or
(j) acting in conflict of interest, within the meaning of subsection (2).

(2) Conflict of interest occurs in any situation where an EMT attempts to promote the private or personal interests of the EMT or another person that actually or apparently
(a) interfere with the objective exercise of the duties of the EMT; or
(b) interfere with patient or public safety.

DISCLOSURE OF INFORMATION

7. Where, following a hearing, the Board imposes a condition on, suspends, or revokes, the license of an EMT, the Board, with respect to the actions taken by the Board and the reasons therefore,
(a) may post information on the website operated by the Board;
(b) may inform
(i) the Minister, and
(ii) any other regulatory body that requests information respecting the disciplinary history of the EMT; and
(c) shall inform
(i) the EMT’s employer, and
(ii) any other person the Board considers necessary to prevent unauthorized practice by the EMT.

MISCELLANEOUS

8. The fee for the issuance or renewal of a license is $100, payable to the Minister of Finance, Energy and Municipal Affairs.

9. The Emergency Medical Services Regulations (EC472/00) are revoked.

10. These regulations come into force on September 1, 2013.

SCHEDULE I

MINIMUM COMPETENCIES AND SCOPE OF PRACTICE:
ASSESSMENT AND DIAGNOSTICS
THERAPEUTICS AND INTEGRATION

<table>
<thead>
<tr>
<th>EMT level</th>
<th>1. ASSESSMENT AND DIAGNOSTICS</th>
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</thead>
<tbody>
<tr>
<td>All</td>
<td>1.1 Conduct triage</td>
</tr>
<tr>
<td>All</td>
<td>(a) rapidly assess a scene based on the principles of a triage system</td>
</tr>
<tr>
<td>All</td>
<td>(b) assume different roles in a mass casualty incident</td>
</tr>
<tr>
<td>All</td>
<td>(c) manage a mass casualty incident</td>
</tr>
<tr>
<td>All</td>
<td>1.2 Obtain patient history</td>
</tr>
<tr>
<td>All</td>
<td>(a) obtain list of patient’s allergies</td>
</tr>
<tr>
<td>All</td>
<td>(b) obtain list of patient’s medications</td>
</tr>
<tr>
<td>All</td>
<td>(c) obtain chief complaint and/or incident history from patient, family members, and/or bystanders</td>
</tr>
<tr>
<td>All</td>
<td>(d) obtain information regarding patient’s past medical history</td>
</tr>
<tr>
<td>All</td>
<td>(e) obtain information about patient’s last oral intake</td>
</tr>
<tr>
<td>All</td>
<td>(f) obtain information regarding incident through accurate and complete scene assessment</td>
</tr>
<tr>
<td>All</td>
<td>1.3 Conduct complete physical assessment demonstrating appropriate use of inspection, palpation, percussion and auscultation, and interpret findings</td>
</tr>
</tbody>
</table>
(a) conduct primary patient assessment and interpret findings  
(b) conduct secondary patient assessment and interpret findings  
(c) conduct cardiovascular system assessments and interpret findings  
(d) conduct neurological system assessments and interpret findings  
(e) conduct respiratory system assessments and interpret findings  
(f) conduct obstetrical assessments and interpret findings  
(g) conduct gastrointestinal system assessments and interpret findings  
(h) conduct genitourinary system assessments and interpret findings  
(i) conduct integumentary system assessments and interpret findings  
(j) conduct musculoskeletal assessments and interpret findings  
(k) conduct assessment of the immune system and interpret findings  
(l) conduct assessment of the endocrine system and interpret findings  
(m) conduct assessment of the eyes, ears, nose and throat and interpret findings  
(n) conduct multisystem assessment and interpret findings  
(o) conduct neonatal assessments and interpret findings  
(p) conduct psychiatric assessments and interpret findings  
(q) conduct pediatric assessment and interpret findings  
(r) conduct geriatric assessment and interpret findings  
(s) conduct bariatric assessment and interpret findings  

### 1.4 Assess vital signs

- (a) assess pulse  
- (b) assess respiration  
- (c) conduct non-invasive temperature monitoring  
- (d) measure blood pressure by auscultation  
- (e) measure blood pressure by palpation  
- (f) measure blood pressure with non-invasive blood pressure monitor  
- (g) assess skin condition  
- (h) assess pupils  
- (i) assess level of consciousness

### 1.5 Utilize diagnostic tests

- (a) conduct oximetry testing and interpret findings  
- (b) conduct end-tidal CO2 monitoring and interpret findings  
- (c) conduct glucometric testing and interpret findings  
- (d) conduct peripheral venipuncture  
- (e) obtain arterial blood samples via radial artery puncture  
- (f) obtain arterial blood samples via arterial line access  
- (g) conduct invasive core temperature monitoring and interpret findings  
- (h) conduct pulmonary artery catheter monitoring and interpret findings  
- (i) conduct central venous pressure monitoring and interpret findings  
- (j) conduct arterial line monitoring and interpret findings  
- (k) interpret lab and radiological data  
- (l) conduct 3-lead electrocardiogram (ECG) and interpret findings  
- (m) obtain and transmit 12-lead electrocardiogram

---

1 for confirmation of tracheal intubation placement (by colorimetric evaluation of end-tidal carbon dioxide).
2. THERAPEUTICS

2.1 Maintain patency of upper airway and trachea
   (a) use manual maneuvers and positioning to maintain airway patency All
   (b) suction oropharynx All
   (c) suction beyond oropharynx II, III
   (d) use oropharyngeal airway All
   (e) use nasopharyngeal airway All
   (f) use airway devices not requiring visualization of vocal cords, and not introduced endotracheally
      All
   (g) use airway devices not requiring visualization of vocal cords, and introduced endotracheally All
   (h) use airway devices requiring visualization of vocal cords, and introduced endotracheally II, III
   (i) remove airway foreign bodies (AFB) All
   (j) remove foreign body by direct techniques II, III
   (k) conduct percutaneous needle cricothyroidotomy III
   (l) conduct surgical cricothyroidotomy III
   (m) rapid sequence intubation N/A

2.2 Prepare oxygen delivery devices
   (a) recognize the indications for oxygen administration All
   (b) take appropriate safety precautions All
   (c) ensure adequacy of oxygen supply All
   (d) recognize different types of oxygen delivery systems All
   (e) use portable oxygen delivery systems All

2.3 Deliver oxygen and administer manual ventilation
   (a) administer oxygen using nasal cannula All
   (b) administer oxygen using low concentration mask All
   (c) administer oxygen using controlled concentration mask All
   (d) administer oxygen using high concentration mask All
   (e) administer oxygen using pocket mask All

2.4 Prepare mechanical ventilation equipment
   (a) provide oxygenation and ventilation using bag-valve-mask All
   (b) recognize indications for mechanical ventilation III
   (c) prepare mechanical ventilation equipment III
   (d) provide mechanical ventilation III

2.5 Implement measures to maintain hemodynamic stability
   (a) conduct cardiopulmonary resuscitation (CPR) All
   (b) control external hemorrhage through use of direct pressure and patient positioning All
   (c) maintain peripheral IV access devices and infusions of crystalloid solutions without additives All
   (d) maintain central IV access devices and infusions III
   (e) conduct peripheral IV cannulation All
   (f) conduct intraosseous needle insertion III
   (g) use direct pressure infusion devices with intravenous infusions III
   (h) administer volume expanders (colloid and non-crystalloid) III
   (i) administer blood and blood products III
   (j) conduct automated and semi-automated external defibrillation All
   (k) conduct manual defibrillation III
   (l) conduct cardioversion III
   (m) conduct transcutaneous pacing III
   (n) maintain transcutaneous pacing N/A
   (o) maintain intra-aortic balloon pumps N/A
   (p) provide routine care for patient with urinary catheter All
   (q) provide routine care for patient with ostomy drainage system All
(r) provide routine care for patient with non-catheter urinary drainage system  All
(s) monitor chest tubes III
(t) conduct needle thoracostomy III
(u) conduct oral and nasogastric tube insertion III
(v) conduct urinary catheterization III

2.6 Provide basic care for soft tissue injuries
(a) treat soft tissue injuries All
(b) treat burn All
(c) treat eye injury All
(d) treat penetration wound All
(e) treat local cold injury All
(f) provide routine wound care All

2.7 Immobilize actual and suspected fractures
(a) immobilize suspected fractures involving appendicular skeleton All
(b) immobilize suspected fractures involving axial skeleton All
(c) reduce fractures and dislocations III

2.8 Administer medications
(a) administer the following medications:
   (i) Acetylsalicylic Acid (ASA) All
   (ii) Adenosine III
   (iii) Amiodarone II, III
   (iv) Atropine II, III
   (v) Bicarb (Sodium Bicarbonate) II, III
   (vi) Calcium Chloride (CaCl2) III
   (vii) Dextrose 5% in water (D5W) All
   (viii) Dextrose 50% All
   (ix) Diazepam (Valium) II, III
   (x) Difenhydrinate (Gravol) All
   (xi) Diphenhydramine (Benadryl) All
   (xii) Dopamine III
   (xiii) Epinephrine (Adrenaline) All
   (xiv) Fentanyl II, III
   (xv) Furosemide (Lasix) III
   (xvi) Glucagon All
   (xvii) Haloperidol (Haldol) III
   (xviii) Heparin II, III
   (xix) Ipratropium (Atrovent) II, III
   (xx) Lidocaine (Xylocaine) II, III
   (xxi) Magnesium Sulphate III
   (xxii) Metoclopramide III
   (xxiii) Midazolam (Versed) II, III
   (xxiv) Morphine II, III
   (xxv) Naloxone (Narcan) II, III
   (xxvi) Nitroglycerin (N/G) All
   (xxvii) Oxygen All
   (xxviii) Oxytocin (Syntocinon) II, III
   (xxix) Pantoprazole II, III
   (xxx) Salbutamol (Ventolin) All
   (xxxi) Tranexamic Acid III
   (xxxii) Topical Anaesthetic Eye Drops (Tetracaine) All
   (xxxiii) Thiamine III
   (xxxiv) Tranquilizer (Valium) All

(b) administer the following medications during the transport of a patient between health facilities, on the order of a medical practitioner:
   (i) Antibiotics All
   (ii) Pantoprazole II, III
   (iii) Peripheral Parenteral Nutrition (PPN) and Total Parenteral Nutrition (TPN) All
   (iv) Potassium Chloride All

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4 to non-arrested patient on order from medical practitioner
5 to cardiac arrest patient
6 for seizures or sedation post ETI
7 All – for anaphylaxis; II & III – for cardiac arrest for near death asthma patients
8 All – for chest pain; II & III – for CHF/Pulmonary Edema
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<tr>
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<tbody>
<tr>
<td>(v) Sandostatin</td>
<td>II, III</td>
</tr>
<tr>
<td>(c) administer medications other than those listed in clause (b) during the transport of a patient between health facilities, on the order of a medical practitioner</td>
<td>III</td>
</tr>
<tr>
<td>(d) recognize principles of pharmacology as applied to the medications listed under clause (a) and (b)</td>
<td>All</td>
</tr>
<tr>
<td>(e) follow safe process for responsible medication administration</td>
<td>All</td>
</tr>
<tr>
<td>(f) administer medications via subcutaneous route</td>
<td>All</td>
</tr>
<tr>
<td>(g) administer medications via intramuscular route</td>
<td>All</td>
</tr>
<tr>
<td>(h) administer medications via intravenous route</td>
<td>All</td>
</tr>
<tr>
<td>(i) administer medications via intrasosseous route</td>
<td>III</td>
</tr>
<tr>
<td>(j) administer medications via endotracheal route</td>
<td>II, III</td>
</tr>
<tr>
<td>(k) administer medications via sublingual route</td>
<td>All</td>
</tr>
<tr>
<td>(l) administer medications via buccal route</td>
<td>All</td>
</tr>
<tr>
<td>(m) administer medications via topical route</td>
<td>II, III</td>
</tr>
<tr>
<td>(n) administer medications via oral route</td>
<td>All</td>
</tr>
<tr>
<td>(o) administer medications via rectal route</td>
<td>II, III</td>
</tr>
<tr>
<td>(p) administer medications via inhalation</td>
<td>All</td>
</tr>
<tr>
<td>(q) administer medications via intranasal route</td>
<td>All</td>
</tr>
</tbody>
</table>

3. INTEGRATION

3.1 Use differential diagnosis skills, decision-making skills and psychomotor skills in providing care to patients

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>(a) provide care to patient experiencing illness or injury primarily involving the cardiovascular system</td>
<td>All</td>
</tr>
<tr>
<td>(b) provide care to patient experiencing illness or injury primarily involving the neurological system</td>
<td>All</td>
</tr>
<tr>
<td>(c) provide care to patient experiencing illness or injury primarily involving the respiratory system</td>
<td>All</td>
</tr>
<tr>
<td>(d) provide care to patient experiencing illness or injury primarily involving the genitourinary or reproductive system</td>
<td>All</td>
</tr>
<tr>
<td>(e) provide care to patient experiencing illness or injury primarily involving the gastrointestinal system</td>
<td>All</td>
</tr>
<tr>
<td>(f) provide care to patient experiencing illness or injury primarily involving the integumentary system</td>
<td>All</td>
</tr>
<tr>
<td>(g) provide care to patient experiencing illness or injury primarily involving the musculoskeletal system</td>
<td>All</td>
</tr>
<tr>
<td>(h) provide care to patient experiencing illness or injury primarily involving the immunologic system</td>
<td>All</td>
</tr>
<tr>
<td>(i) provide care to patient experiencing illness or injury primarily involving the endocrine system</td>
<td>All</td>
</tr>
<tr>
<td>(j) provide care to patient experiencing illness or injury primarily involving the eyes, ears, nose or throat</td>
<td>All</td>
</tr>
<tr>
<td>(k) provide care to patient experiencing toxicologic syndromes</td>
<td>All</td>
</tr>
<tr>
<td>(l) provide care to patient experiencing non-urgent problem</td>
<td>All</td>
</tr>
<tr>
<td>(m) provide care to palliative patient</td>
<td>All</td>
</tr>
<tr>
<td>(n) provide care to patient experiencing signs and symptoms due to exposure to adverse environments</td>
<td>All</td>
</tr>
<tr>
<td>(o) provide care to trauma patient</td>
<td>All</td>
</tr>
<tr>
<td>(p) provide care to psychiatric patient</td>
<td>All</td>
</tr>
<tr>
<td>(q) provide care to obstetrical patient</td>
<td>All</td>
</tr>
</tbody>
</table>

3.2 Provide care to meet needs of unique patient groups

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>(a) provide care for neonatal patient</td>
<td>All</td>
</tr>
<tr>
<td>(b) provide care for pediatric patient</td>
<td>All</td>
</tr>
<tr>
<td>(c) provide care for geriatric patient</td>
<td>All</td>
</tr>
<tr>
<td>(d) provide care for physically impaired patient</td>
<td>All</td>
</tr>
<tr>
<td>(e) provide care for mentally impaired patient</td>
<td>All</td>
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<tr>
<td>(f) provide care for bariatric patient</td>
<td>All</td>
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</tbody>
</table>

3.3 Conduct ongoing assessments and provide care

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<tbody>
<tr>
<td>(a) conduct ongoing assessments based on patient presentation and interpret findings</td>
<td>All</td>
</tr>
<tr>
<td>(b) re-direct priorities based on assessment findings</td>
<td>All</td>
</tr>
</tbody>
</table>

9 up to 40 mEq/litre
EXECUTIVE COUNCIL _________________________________23 JULY 2013

SCHEDULE II

MINIMUM COMPETENCIES: PROFESSIONAL RESPONSIBILITIES, COMMUNICATION, HEALTH AND SAFETY, TRANSPORTATION, AND HEALTH PROMOTION AND PUBLIC SAFETY

1. PROFESSIONAL RESPONSIBILITIES

1.1 Function as a professional
   (a) maintain patient dignity at all times
   (b) reflect professionalism through use of appropriate language
   (c) dress appropriately and maintain personal hygiene
   (d) maintain appropriate personal interaction with patients
   (e) maintain patient confidentiality
   (f) participate in quality assurance and enhancement programs
   (g) use community support agencies as appropriate
   (h) promote awareness of EMS system and EMT profession
   (i) participate in professional association
   (j) behave ethically
   (k) function as a patient advocate

1.2 Participate in continuing education and professional development
   (a) develop personal plan for continuing professional development
   (b) self-evaluate and set goals for improvement in relation to professional practice
   (c) interpret evidence in medical literature and assess relevance to professional practice
   (d) make presentations

1.3 Possess an understanding of the medico-legal aspects of the profession
   (a) comply with scope of practice
   (b) recognize patient rights and their implications for the role of the provider
   (c) include all pertinent and required information on patient call reports

1.4 Recognize, function within and comply with relevant provincial and federal legislation, policies and procedures

1.5 Function effectively in a team environment
   (a) work collaboratively with a partner
   (b) accept and deliver constructive feedback
   (c) work collaboratively with other emergency response agencies
   (d) work collaboratively with other members of health care team

1.6 Make decisions effectively
   (a) employ reasonable and prudent judgment
   (b) practise effective problem-solving
   (c) delegate tasks appropriately

1.7 Manage scenes with actual or potential forensic implications
   (a) collaborate with law enforcement agencies in the management of crime scenes
   (b) comply with ethical and legal reporting requirements of situations of abuse

2. COMMUNICATION

2.1 Practise effective oral and written communication skills
   (a) deliver an organized, accurate and relevant report using telecommunication devices
   (b) deliver an organized, accurate and relevant verbal report
   (c) deliver an organized, accurate and relevant patient history
   (d) provide information to patients about their situation and how they will be cared for
   (e) interact effectively with patients, relatives and bystanders who are in stressful situations
   (f) speak in language appropriate to the listener
   (g) use appropriate terminology

2.2 Practise effective written communication skills
   (a) record organized, accurate and relevant patient information
   (b) prepare professional correspondence

2.3 Practise effective non-verbal communication skills
   (a) employ effective non-verbal behaviour
   (b) practise active listening techniques
   (c) establish trust and rapport with patients and colleagues
   (d) recognize and react appropriately to non-verbal behaviours
2.4 Practise effective interpersonal relations
   (a) treat others with respect
   (b) employ empathy and compassion while providing care
   (c) recognize and react appropriately to persons exhibiting emotional reactions
   (d) act in a confident manner
   (e) act assertively as required
   (f) employ diplomacy, tact and discretion
   (g) employ conflict resolution skills

3. HEALTH AND SAFETY
3.1 Maintain good physical and mental health
   (a) maintain balance in personal lifestyle
   (b) develop and maintain an appropriate support system
   (c) manage personal stress
   (d) practise effective strategies to improve physical and mental health related to career
   (e) exhibit physical strength and fitness consistent with the requirements of professional practice

3.2 Practise safe lifting and moving techniques
   (a) practise safe biomechanics
   (b) transfer patient from various positions using applicable equipment and techniques
   (c) transfer patient using emergency evacuation techniques
   (d) secure patient safely to applicable equipment
   (e) lift patient and stretcher in and out of ambulance with partner

3.3 Create and maintain a safe work environment
   (a) assess scene for safety
   (b) address potential occupational hazards
   (c) conduct basic extrication
   (d) exhibit defusing and self-protection behaviours appropriate for use with patients and bystanders
   (e) conduct procedures and operations consistent with WHMIS and hazardous materials management requirements
   (f) practise infection control precautions
   (g) clean and disinfect equipment
   (h) clean and disinfect work environment

4. TRANSPORTATION
4.1 Prepare ambulance for service
   (a) conduct vehicle maintenance and safety check
   (b) recognize conditions requiring removal of vehicle from service
   (c) utilize all vehicle equipment and vehicle devices within ambulance

4.2 Drive ambulance or similar type of vehicle
   (a) use defensive driving techniques
   (b) use safe emergency driving techniques
   (c) drive in a manner that ensures patient comfort and a safe environment for passengers

4.3 Transfer patient to air ambulance
   (a) create safe landing zone for rotary-wing aircraft
   (b) safely approach stationary rotary-wing aircraft
   (c) safely approach stationary fixed-wing aircraft

4.4 Transport patient in air ambulance
   (a) prepare patient for air medical transport
   (b) recognize the stressors of flight on patient, crew and equipment and the implications for patient care

5. HEALTH PROMOTION & PUBLIC SAFETY
5.1 Integrate professional practice into community care,
   (a) participate in health promotion activities and initiatives.
   (b) participate in injury prevention and public safety activities and initiatives.
   (c) work collaboratively with other members of the health care community.
   (d) utilize community support agencies as appropriate.
5.2 Contribute to public safety through collaboration with other emergency response agencies.

(a) work collaboratively with other response agencies.
(b) work within an incident management system (IMS).

5.3 Participate in the management of chemical, biological, radiological/nuclear, explosive (CBRNE) incident.

(a) recognize indicators of agent exposure.
(b) possess knowledge of personal protective equipment (PPE)
(c) perform CBRNE scene size-up.
(d) conduct triage at CBRNE incident.
(e) conduct decontamination procedures.
(f) provide care to patients involved in CBRNE incident.

EXPLANATORY NOTES

SECTION 1 provides a definition of “Act” for the purposes of these regulations.

SECTION 2 sets out the qualifications and requirements to obtain an EMT license. It also makes it a condition of the license that an EMT continue to meet requirements related to his or her driver’s license and requires the EMT to notify the Board if he or she ceases to meet those requirements.

SECTION 3 sets out the requirements to renew an EMT license. It requires that an application to renew a license be made before the license expires but permits the Board to accept applications made within three years after the license expired. It imposes conditions on a license that is renewed within a year after it expired and on a license renewed within one to three years after it expired.

SECTION 4 sets out the continuing education requirements an EMT who holds a license must meet and how continuing education units may be earned. It also requires an EMT who holds a license to keep a complete and accurate record of continuing education units earned and provide it to the Board on request.

SECTION 5 sets out the levels of EMT license and provides that the minimum competencies and scope of practice for each level are set out in schedules to the regulations.

SECTION 6 sets out actions or omissions of an EMT that constitute misconduct and defines conflict of interest.

SECTION 7 sets out the persons the Board is permitted to and required to inform when the Board imposes a condition on, suspends, or revokes the license of an EMT following a hearing.

SECTION 8 sets a $100 fee for the issuance or renewal of a license.

SECTION 9 revokes the Emergency Medical Services Regulations (EC472/00).

SECTION 10 provides for the commencement of these regulations.
EXECUTIVE COUNCIL _________________________________ 23 JULY 2013

EC2013-533
EXECUTIVE COUNCIL
MINISTERIAL RESPONSIBILITY
FOR THE
ADMINISTRATION AND SUPERVISION OF CERTAIN STATUTES
DESIGNATION BY THE LIEUTENANT GOVERNOR IN COUNCIL
AS AT JULY 23, 2013

1. ADVISORY COUNCIL ON THE STATUS OF WOMEN ACT
R.S.P.E.I. 1988, Cap. A-6, clause 1(a)
Minister of Community Services and Seniors

2. AGRICULTURAL PRODUCTS STANDARDS ACT
R.S.P.E.I. 1988, Cap. A-9, clause 1(i)
Minister of Agriculture and Forestry

3. APPRENTICESHIP AND TRades QUALIFICATION ACT
Minister of Innovation and Advanced Learning

4. ARCHIVES AND RECORDS ACT
Minister of Tourism and Culture

5. AREA INDUSTRIAL COMMISSION ACT
R.S.P.E.I. 1988, Cap. A-20, clause 1(e)
Minister of Innovation and Advanced Learning

6. AUTOMOBILE JUNK YARDS ACT
R.S.P.E.I. 1988, Cap. A-25, clause 1(d)
Minister of Environment, Labour and Justice and Attorney General

7. CHARITIES ACT
R.S.P.E.I. 1988, Cap. C-4, clause 1(c)
Minister of Environment, Labour and Justice and Attorney General

8. CHILD CARE FACILITIES ACT
R.S.P.E.I. 1988, Cap. C-5, clause 1(1)
Minister of Education and Early Childhood Development

9. CHIROPRACTIC ACT
R.S.P.E.I. 1988, Cap. C-7.1, clause 1(i)
Minister of Health and Wellness

10. CONSUMER REPORTING ACT
R.S.P.E.I. 1988, Cap. C-20, clause 1(1)(g)
Minister of Environment, Labour and Justice and Attorney General
11. CROWN BUILDING CORPORATION ACT
R.S.P.E.I. 1988, Cap. C-31, clause 1(d)
Minister of Transportation and Infrastructure Renewal

12. DENTURISTS ACT
R.S.P.E.I. 1988, Cap. D-6.1, clause 1(f)
Minister of Health and Wellness

13. DOG ACT
R.S.P.E.I. 1988, Cap. D-13, clause 1(h)
Minister of Agriculture and Forestry

14. ELECTRONIC COMMERCE ACT
R.S.P.E.I. 1988, Cap. E-4.1, clause 1(d)
Minister of Environment, Labour and Justice and Attorney General

15. ELECTRIC POWER ACT
R.S.P.E.I. 1988, Cap. E-4, clause 1(d)
Minister of Finance, Energy and Municipal Affairs

16. ELEVATORS AND LIFTS ACT
R.S.P.E.I. 1988, Cap. E-5, clause 1(p)
Minister of Environment, Labour and Justice and Attorney General

17. EMERGENCY 911 ACT
R.S.P.E.I. 1998, Cap. E-5.1, clause 1(d)
Minister of Environment, Labour and Justice and Attorney General

18. EMERGENCY MEASURES ACT
R.S.P.E.I. 1988, Cap. E-6.1, clause 1(h)
Minister of Environment, Labour and Justice and Attorney General

19. EMPLOYMENT DEVELOPMENT AGENCY ACT
R.S.P.E.I. 1988, Cap. E-6.02, clause 1(c)
Minister of Fisheries, Aquaculture, and Rural Development

20. ENERGY CORPORATION ACT
R.S.P.E.I. 1988, Cap. E-7, clause 1(e)
Minister of Finance, Energy and Municipal Affairs

21. EXPROPRIATION ACT
R.S.P.E.I. 1988, Cap. E-13, clause 1(e)
Minister of Transportation and Infrastructure Renewal

22. FARM MACHINERY DEALERS AND VENDORS ACT
R.S.P.E.I. 1988, Cap. F-4.01, clause 1(e)
Minister of Agriculture and Forestry
23. **FINANCE PEI ACT**  
   R.S.P.E.I. 1988, Cap. F-8.1, clause 1(d)  
   Minister of Innovation and Advanced Learning

24. **FIRE PREVENTION ACT**  
   R.S.P.E.I. 1988, Cap. F-11, clause 1(e)  
   Minister of Environment, Labour and Justice and Attorney General  
   via clause 25(b) for Part VII only

25. **FISH INSPECTION ACT**  
   R.S.P.E.I. 1988, Cap. F-13, clause 1(f)  
   Minister of Fisheries, Aquaculture, and Rural Development

26. **FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT**  
   R.S.P.E.I. 1988, Cap. F-15.01, clause 1(f)  
   Minister of Environment, Labour and Justice and Attorney General

27. **FRENCH LANGUAGE SERVICES ACT**  
   R.S.P.E.I. 1988, Cap. F-15.1, clause 1(b)  
   President of the Executive Council  
   (as Minister responsible for Acadian and Francophone Affairs)

28. **HIGHWAY SIGNAGE ACT**  
   R.S.P.E.I. 1988, Cap. H-4.1, clause 1(g)  
   Minister of Tourism and Culture

29. **HUMAN RIGHTS ACT**  
   Minister of Environment, Labour and Justice and Attorney General

30. **INNOVATION PEI ACT**  
   R.S.P.E.I. 1988, Cap I-2.1, clause 1(m)  
   Minister of Innovation and Advanced Learning

31. **INSURANCE ACT**  
   R.S.P.E.I. 1988, Cap. I-4, clause 1(1.2)  
   Minister of Environment, Labour and Justice and Attorney General

32. **LABOUR MOBILITY ACT**  
   R.S.P.E.I. 1988, Cap. L-1.1, clause 1(e)  
   Minister of Innovation and Advanced Learning

33. **LANDS PROTECTION ACT, PRINCE EDWARD ISLAND**  
   R.S.P.E.I. 1988, Cap. L-5, clause 1(1)(h)  
   Minister of Finance, Energy and Municipal Affairs
34. LIQUOR CONTROL ACT  
R.S.P.E.I. 1988, Cap. L-14, subsection 87(1)  
Minister of Tourism and Culture

35. LOTTERIES COMMISSION ACT  
R.S.P.E.I. 1988, Cap. L-17, clause 1(b)  
Minister of Finance, Energy and Municipal Affairs

36. MUNICIPAL DEBENTURE GUARANTEE ACT  
R.S.P.E.I. 1988, Cap. M-12, clause 1(a)  
Minister of Finance, Energy and Municipal Affairs

37. NATIONAL PARK ACT  
Minister of Tourism and Culture

38. NATURAL GAS DISTRIBUTION ACT (when proclaimed)  
Stats. P.E.I. 1999, c. 37, clause 1(k)  
Minister of Finance, Energy and Municipal Affairs

39. NATURAL PRODUCTS MARKETING ACT  
Minister of Agriculture and Forestry

40. OCCUPATIONAL HEALTH AND SAFETY ACT  
R.S.P.E.I. 1988, Cap. O-1.01, clause 1(k)  
Minister of Environment, Labour and Justice and Attorney General

41. OFF-HIGHWAY VEHICLE ACT  
R.S.P.E.I. 1988, Cap. 0-3, clause 1(e)  
Minister of Transportation and Infrastructure Renewal

42. OIL AND NATURAL GAS ACT  
R.S.P.E.I. 1988, Cap. 0-5, clause 1(h.1)  
Minister of Finance, Energy and Municipal Affairs

43. PESTICIDES CONTROL ACT  
R.S.P.E.I. 1988, Cap. P-4, clause 1(f)  
Minister of Environment, Labour and Justice and Attorney General

44. POWER ENGINEERS ACT  
Minister of Environment, Labour and Justice and Attorney General

45. PRIVATE TRAINING SCHOOLS ACT  
R.S.P.E.I. 1988, Cap. P-20.1, section 1(d)  
Minister of Innovation and Advanced Learning
46. PROBATION ACT  
Minister of Environment, Labour and Justice and Attorney General

47. PROVINCIAL BUILDING CODE ACT  
R.S.P.E.I. 1988, Cap. P-24, clause 1(g)  
Minister of Environment, Labour and Justice and Attorney General

48. PROVINCIAL COURT ACT  
R.S.P.E.I. 1988, Cap. P-25, clause 1(d)  
Minister of Environment, Labour and Justice and Attorney General

49. REAL PROPERTY ASSESSMENT ACT  
R.S.P.E.I. 1988, Cap. R-4, clause 1(g)  
Minister of Finance, Energy and Municipal Affairs

50. RECREATION DEVELOPMENT ACT  
R.S.P.E.I. 1988, Cap. R-8, clause 1(d)  
Minister of Tourism and Culture

51. SMOKE FREE PLACES ACT  
Minister of Health and Wellness

52. TOURISM INDUSTRY ACT  
Minister of Tourism and Culture

53. TOURISM PEI ACT  
R.S.P.E.I. 1988, Cap. T-3.4, clause 1(c)  
Minister of Tourism and Culture

54. UNSIGHTLY PROPERTY ACT  
R.S.P.E.I. 1988, Cap. U-5, clause 1(e)  
Minister of Environment, Labour and Justice and Attorney General

Order-in-Council EC2011-558 of 15 November 2011 is hereby rescinded.
EXECUTIVE COUNCIL _________________________________ 23 JULY 2013

EC2013-534

EXECUTIVE COUNCIL ACT
MINISTER OF ENVIRONMENT, LABOUR AND JUSTICE
AND ATTORNEY GENERAL
AUTHORITY TO ENTER INTO AN AGREEMENT
(CONFEDERATION BRIDGE POLICING SERVICES
CONTRIBUTION AGREEMENT)
WITH
THE GOVERNMENT OF CANADA

Pursuant to clause 10(a) of the Executive Council Act R.S.P.E.I. 1988, Cap. E-12 Council authorized the Minister of Environment, Labour and Justice and Attorney General to enter into an agreement with the Government of Canada, as represented by the Minister of Transport, to set out terms and conditions whereby the province will be reimbursed for eligible costs for policing services provided by the Provincial Police Service on and within the area of the Confederation Bridge for the period April 1, 2013 to March 31, 2014, such as more particularly described in the draft agreement.

EC2013-535

FARM PRACTICES ACT
FARM PRACTICES REVIEW BOARD
APPOINTMENTS

Pursuant to subsection 3(1) of the Farm Practices Act R.S.P.E.I. 1988, Cap. F-4.1 Council made the following appointments:

<table>
<thead>
<tr>
<th>NAME</th>
<th>TERM OF APPOINTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>via clause (a)</td>
<td></td>
</tr>
<tr>
<td>Heather Dixon</td>
<td>23 July 2013</td>
</tr>
<tr>
<td>Cornwall</td>
<td>to</td>
</tr>
<tr>
<td>(vice Alan Coffin, term expired)</td>
<td>23 July 2016</td>
</tr>
<tr>
<td>Kenneth Monaghan</td>
<td>25 September 2012</td>
</tr>
<tr>
<td>South Melville</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>25 September 2015</td>
</tr>
<tr>
<td>via clause (b)</td>
<td></td>
</tr>
<tr>
<td>Barry Green</td>
<td>23 July 2013</td>
</tr>
<tr>
<td>Central Bedeque</td>
<td>to</td>
</tr>
<tr>
<td>(vice John MacDonald, term expired)</td>
<td>23 July 2016</td>
</tr>
<tr>
<td>Ronald MacWilliams</td>
<td>23 July 2013</td>
</tr>
<tr>
<td>West Cape</td>
<td>to</td>
</tr>
<tr>
<td>(vice Stewart MacRae, term expired)</td>
<td>23 July 2016</td>
</tr>
<tr>
<td>Edwin McKie</td>
<td>23 July 2013</td>
</tr>
<tr>
<td>Howe Bay</td>
<td>to</td>
</tr>
<tr>
<td>(vice Joanne Mutch, resigned)</td>
<td>23 July 2016</td>
</tr>
<tr>
<td>Kevin Simmons</td>
<td>23 July 2013</td>
</tr>
<tr>
<td>Irishtown</td>
<td>to</td>
</tr>
<tr>
<td>(vice Cynthia Frizzell, term expired)</td>
<td>23 July 2016</td>
</tr>
</tbody>
</table>
Further, Council designated Kenneth Monaghan as vice-chairperson of the Board in accordance with subsection 3(2) of the Act.

**EC2013-536**

FATHERS OF CONFEDERATION BUILDINGS ACT  
FATHERS OF CONFEDERATION BUILDINGS TRUST  
APPOINTMENTS

Pursuant to section 3 of the Fathers of Confederation Buildings Act R.S.P.E.I. 1988, Cap. F-6 Council made the following appointments:

<table>
<thead>
<tr>
<th>NAME</th>
<th>TERM OF APPOINTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>via subsection (1)</strong></td>
<td></td>
</tr>
<tr>
<td>Jim Travers, Q.C.</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>Charlottetown</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 July 2016</td>
</tr>
<tr>
<td>Bob Sears</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>Charlottetown</td>
<td>to</td>
</tr>
<tr>
<td>(vice Danny Murphy, resigned)</td>
<td>31 July 2016</td>
</tr>
<tr>
<td><strong>via subsection (2)</strong></td>
<td></td>
</tr>
<tr>
<td>Richard Homburg</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 July 2016</td>
</tr>
<tr>
<td>Naomi Z. Levine</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>Manitoba</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 July 2016</td>
</tr>
<tr>
<td>Louis W. MacEachern</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>Alberta</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 July 2016</td>
</tr>
<tr>
<td>Dan Mathieson</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>Ontario</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 July 2016</td>
</tr>
<tr>
<td>Claude Métras</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>Quebec</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 July 2016</td>
</tr>
<tr>
<td>Janis Sobey-Hames</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 July 2016</td>
</tr>
<tr>
<td>Jeffrey D. Symons</td>
<td>31 July 2013</td>
</tr>
<tr>
<td>New York</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 July 2016</td>
</tr>
</tbody>
</table>
EC2013-537

FINANCIAL ADMINISTRATION ACT
DEPARTMENT OF FINANCE, ENERGY AND MUNICIPAL AFFAIRS
AUTHORITY TO CANCEL
PROVINCIAL INCOME TAX ACCOUNT
(APPROVED)

Pursuant to subsection 26(1) of the Financial Administration Act R.S.P.E.I. 1988, Cap. F-9, Council authorized the cancellation, discharge and release of provincial income tax owing by Reginald Porter in the amounts of $520.47, $520.07, $229.03 and $217.48 and all relevant interest on those amounts, for the 1992, 1998, 1999 and 2000 taxation years, respectively.

EC2013-538

FINANCIAL ADMINISTRATION ACT
CERTAIN ACCOUNTS RECEIVABLE OF
DEPARTMENT OF COMMUNITY SERVICES AND SENIORS
AUTHORITY TO WRITE-OFF
(APPROVED)


Further, Council noted that this amount is offset by provision for doubtful accounts in the Department of Community Services and Seniors.

EC2013-539

FINANCIAL ADMINISTRATION ACT
PRINCE EDWARD ISLAND GRAIN ELEVATORS CORPORATION
GUARANTEE OF LOAN

Having under consideration the recommendation of Treasury Board (reference Minute TB#165/13 of July 10, 2013), pursuant to subsection 32(1) of the Financial Administration Act R.S.P.E.I. 1988, Cap. F-9 Council agreed to guarantee payment of a revolving line of credit loan by Prince Edward Island Grain Elevators Corporation (hereinafter referred to as "the borrower") in an amount not exceeding eight million dollars ($8,000,000.00) (hereinafter referred to as the "guaranteed indebtedness") together with interest thereon at prime minus zero decimal two five (0.25) percent, plus a standby fee of zero decimal zero six two five (0.0625) percent on the daily unused portion of the line of credit to the Bank of Nova Scotia in Summerside, Prince Edward Island (hereinafter referred to as "the lender"), from the 23rd day of July 2013 through to and including 1700 hours on the 31st day of July 2014, the said guarantee to be subject to and conditional upon the following terms and conditions:

1. The guaranteed indebtedness, including interest, shall be due and payable in full by the borrower no later than the 31st day of July 2014.

2. Any advances made by the lender after the 31st day of July 2014 shall not form part of the guaranteed indebtedness.

3. The guarantee shall absolutely expire and be null and void without notice to the lender at 1700 hours on the 31st day of July 2014 regardless of any advances that may have been made by the lender to the borrower unless on or before the
31st day of July 2014, notice has been given to the Government of Prince Edward Island, as represented by the Minister of Finance, Energy and Municipal Affairs that the borrower has defaulted in repayment of the guaranteed indebtedness to the lender, and calling upon the Minister of Finance, Energy and Municipal Affairs to pay the lender pursuant to the guarantee. The written notice shall include a copy of the written demand given by the lender to the borrower calling upon the borrower to pay the balance in full.

4. Government shall be entitled at any time to terminate the guarantee by paying to the lender such amount of the guaranteed indebtedness as may be owing by the borrower to the lender and the lender shall assign to the government all security the lender holds in connection with the guaranteed indebtedness.

5. The Minister of Finance, Energy and Municipal Affairs may add such further terms and conditions to the guarantee as he considers appropriate.

6. The guarantee shall not become effective until the lender has agreed in writing to the terms and conditions herein contained and those imposed by the Minister of Finance, Energy and Municipal Affairs pursuant to paragraph 5 above. The guaranteed indebtedness shall not include any advances made by the lender prior to the agreement by the lender with the terms and conditions herein contained and those imposed by the Minister of Finance, Energy and Municipal Affairs.

Order-in-Council EC2012-561 of September 25, 2012 is hereby rescinded.

EC2013-540

ISLAND REGULATORY AND APPEALS COMMISSION ACT

Pursuant to sections 2 and 3 of the Island Regulatory and Appeals Commission Act R.S.P.E.I. 1988, Cap. I-11, Council made the following appointments:

<table>
<thead>
<tr>
<th>NAME</th>
<th>TERM OF APPOINTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Broderick</td>
<td>31 December 2012</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>31 December 2017</td>
</tr>
<tr>
<td>Michael David Campbell</td>
<td>18 May 2013</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>to</td>
</tr>
<tr>
<td>(reappointed)</td>
<td>18 May 2016</td>
</tr>
</tbody>
</table>
Pursuant to section 4 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Murray Gordon Coleman of Calgary, Alberta to acquire an interest in a land holding of approximately thirty-five decimal nine two (35.92) acres of land in Lot 21, Queens County, Province of Prince Edward Island, being acquired from John Douglas Foster of Calgary, Alberta.

Further, Council noted that the said land holding, being Provincial Property Nos. 458430, 906248 and 906255, was previously subject to a condition preventing subdivision in accordance with section 9 of the said Act. This subdivision restriction continues to apply.

Pursuant to section 4 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Mark Czajkowski and Wendy Czajkowski, both of St. Mary’s, Ontario to acquire a land holding of approximately sixty-five (65) acres of land in Lot 55, Kings County, Province of Prince Edward Island, being acquired from Sherri Doherty of Morell, Prince Edward Island PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

Pursuant to section 4 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Timothy John James of Edmonton, Alberta to acquire a land holding of approximately sixteen decimal two nine (16.29) acres of land in Lot 63, Kings County, Province of Prince Edward Island, being acquired from Robert F. Johnston and Stefanie H. Johnston, both of Strafford, Vermont.

Further, Council noted that part of the said land holding, being Provincial Property No. 251959, was previously identified for non-development use in accordance with section 2 of the Land Identification Regulations (EC606/95) made under the said Act. Identification continues to apply.
EC2013-544
PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
101208 P.E.I. INC.
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to 101208 P.E.I. Inc. of North Rustico, Prince Edward Island to acquire a land holding of approximately zero decimal seven (0.7) acres of land in Lot 24, Queens County, Province of Prince Edward Island, being acquired from Cavendish Sweater Inc. of North Rustico, Prince Edward Island.

EC2013-545
PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
ATLANTIC SHELLFISH PRODUCTS INC.
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Atlantic Shellfish Products Inc. of Charlottetown, Prince Edward Island to acquire a land holding of approximately one decimal zero five (1.05) acres of land in Lot 40, Kings County, Province of Prince Edward Island, being acquired from Abegweit First Nations Band of Scotchfort, Prince Edward Island.

EC2013-546
PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
APPLICATION TO LEASE LAND
COMPTON BROS. INC.
(TO RESCIND)

Council, having under consideration Order-in-Council EC2012-223 of May 2, 2012, rescinded the said Order forthwith, thus rescinding permission for Compton Bros. Inc. of Morell, Prince Edward Island to acquire, by lease, an interest in a land holding or land holdings of up to six hundred and seventy-six decimal five (676.5) acres of land as part of the said corporation's aggregate land holdings.
Pursuant to section 5 and clause 5.3(1)(b) of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Compton Bros. Inc. of Morell, Prince Edward Island to acquire, by lease, an interest in a land holding or land holdings of up to six hundred (600) acres of land as part of the said corporation's aggregate land holdings PROVIDED THAT the said Compton Bros. Inc. files a statement with the Island Regulatory and Appeals Commission within one year of the date of this Order and prior to 31 December in every subsequent year disclosing the parcel number, the acreage and the term of lease for each parcel leased during the reporting period covered by the statement.

Pursuant to section 5 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Compton Bros. Inc. of Morell, Prince Edward Island to acquire a land holding of approximately ninety-two (92) acres of land in Lot 39, Kings County, Province of Prince Edward Island, being acquired from Preston Coffin of Morell, Prince Edward Island PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Bell Aliant Regional Communications Inc. (successor to Aliant Telecom Inc. and Aliant Inc.) of Halifax, Nova Scotia to acquire, by lease, an interest in a land holding of approximately zero decimal zero two (0.02) acres of land in Lot 48, Queens County, Province of Prince Edward Island, being acquired from Great Hobbies Inc. of Stratford, Prince Edward Island.
EC2013-550

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
ELWIN JAY HOLDINGS INC.
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act*
R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Elwin Jay Holdings Inc. of Charlottetown, Prince Edward Island to acquire a land holding of approximately one decimal three nine (1.39) acres of land at Charlottetown, Queens County, Province of Prince Edward Island, being acquired from Ellis and Birt, Limited of Charlottetown, Prince Edward Island.

EC2013-551

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
HOWMAC FARMS LTD.
(APPROVAL)

Pursuant to section 5 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Howmac Farms Ltd. of North Wiltshire, Prince Edward Island to acquire a land holding of approximately fourteen decimal five (14.5) acres of land in Lot 23, Queens County, Province of Prince Edward Island, being acquired from Sterling MacRae of North Wiltshire, Prince Edward Island PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

EC2013-552

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
HOWMAC FARMS LTD.
(APPROVAL)

Pursuant to section 5 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Howmac Farms Ltd. of North Wiltshire, Prince Edward Island to acquire a land holding of approximately one hundred and twenty-six decimal eight three (126.83) acres of land in Lot 23, Queens County, Province of Prince Edward Island, being acquired from Sterling MacRae and Jean MacRae, both of North Wiltshire, Prince Edward Island PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.
EC2013-553

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
MARWOOD PROPERTIES INC.
(APPROVAL)

Pursuant to section 5 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Marwood Properties Inc. of Georgetown, Prince Edward Island to acquire a land holding of approximately eighty-nine (89) acres of land in Lot 44, Kings County, Province of Prince Edward Island, being acquired from Ivor Sargent of Sainte-Adèle, Quebec PROVIDED THAT identification for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act shall apply to each of the four lots that has received planning approval and also to the remaining land of approximately fifty-five decimal three (55.3) acres.

EC2013-554

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
SUMMERFIELD FARMS LTD.
(APPROVAL)

Pursuant to section 5 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Summerfield Farms Ltd. of Norboro, Prince Edward Island to acquire a land holding of approximately one hundred and sixty-three (163) acres of land in Lot 25, Prince County, Province of Prince Edward Island, being acquired from G. Morris Caseley of Summerside, Prince Edward Island PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

EC2013-555

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
SUMMERFIELD FARMS LTD.
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Summerfield Farms Ltd. of Norboro, Prince Edward Island to acquire a land holding of approximately two hundred and twenty-nine (229) acres of land in Lot 67, Queens County, Province of Prince Edward Island, being acquired from G. Morris Caseley of Summerside, Prince Edward Island.

Further, Council noted that part of the said land holding, being Provincial Property Nos. 626531 and 762930, was previously identified for non-development use in accordance with section 2 of the Land Identification Regulations (EC606/95) made under the said Act. Identification continues to apply.
EXECUTIVE COUNCIL _________________________________ 23 JULY 2013

EC2013-556

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
TRIPLE “W” ENTERPRISES INC.
(APPROVAL)

Pursuant to section 5 and section 9 of the Prince Edward Island Lands Protection Act R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Triple “W” Enterprises Inc. of Winsloe, Prince Edward Island to acquire a land holding of approximately one decimal five (1.5) acres of land in Lot 35, Queens County, Province of Prince Edward Island, being acquired from the Estate of Roger D.H. Black, c/o Hugh Kenneth Black, Executor, of London, Ontario PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

EC2013-557

PUBLIC HEALTH ACT
DECLARATION RE

Under authority of section 77 of the Public Health Act, Stats. P.E.I. 2012, c. 20 Council ordered that a Proclamation do issue proclaiming the said "Public Health Act" to come into force effective September 1, 2013.

EC2013-558

PUBLIC HEALTH ACT
EATING ESTABLISHMENTS AND LICENSED PREMISES
REGULATIONS
AMENDMENT

Made by the Lieutenant Governor in Council under section 72 of the Public Health Act R.S.P.E.I. 1988, Cap. P-30.1:

1. The Introduction of the Public Health Act Eating Establishments and Licensed Premises Regulations (EC16/79) is revoked and the following substituted:

Pursuant to section 72 of the Public Health Act R.S.P.E.I. 1988, Cap. P-30.1, Council made the following regulations:

2. Section 1 of the regulations is amended
   (a) by the revocation of clauses (a) and (a.1) and the substitution of the following:
      (a) “Act” means the Public Health Act R.S.P.E.I. 1988, Cap. P-30.1;
      (a.1) “approved” means approved by the Director;
      (a.2) “bed and breakfast” means a private residence occupied by the owner or operator in which overnight accommodations and food service are provided to guests for compensation;
   (b) by the revocation of clause (b) and the substitution of the following:
      (b) “Chief Public Health Officer” means the Chief Public Health Officer appointed under section 4 of the Act;
   (c) in clause (e), by the addition of the word “food” after the word “any”;
   (d) by the revocation of clause (g);
(e) by the revocation of clause (h) and the substitution of the following:

(h) “inspector” means a public health officer appointed pursuant to section 6 of the Act;

(h.1) “license” means a license issued by the Minister under subsection 10(3) of the Act;

(h.2) “license holder” means a person who holds a license to operate a food premises and, for the purposes of these regulations, includes an agent of the license holder and a person to whom that license holder has delegated responsibility for the day-to-day operation of the food premises;

(f) in clause (k), by the addition of the words “and Wellness” after the word “Health”.

3. The heading immediately before section 40 and sections 40 to 43 of the regulations are revoked and the following substituted:

LICENSING

40. (1) The Minister shall not issue or renew a license for the operation of a food premises unless an application in respect of the license is received by the Minister, in the form required by the Minister, containing,

(a) in respect of a new license, a description and plan of the site, building and equipment and information respecting the food to be served in the food premises and the cleaning protocols to be implemented by the applicant; and

(b) in respect of a renewal of a license, information respecting any changes to the information provided for the issuance of the existing license that have not been reported to the Minister pursuant to subsection (6).

(2) In addition to the requirements of subsection (1), an applicant for a license or a renewal of a license shall comply with the applicable requirements of the Act and these regulations and pay the licensing fee set out in subsection (5).

(3) A license shall be issued by the Minister in the form established by the Minister.

(4) A license issued by the Minister under this section expires on March 31.

(5) The fee for a license or the renewal or reinstatement of a license is as follows:

(a) for a Type I Establishment $100
(b) for a Type II Establishment $35
(c) for a Type III Establishment no charge
(d) for a Type IV Establishment $25
(e) for a Type V Establishment $50.

(6) A license holder shall report any change to the information provided by the license holder for the license or renewal of the license that occurs within the term of the license to the Minister as soon as practicable.

(7) A food premises license is not transferable.

(8) A license holder shall display the license in a location in the food premises where it can easily be seen by the public.

(9) The Minister may revoke a license containing information that has changed as referred to in subsection (6) and may, on payment of the required fee set out in subsection (5), issue a new license to the license holder based on the new information provided.

41. (1) Where the Minister imposes terms and conditions on a license in accordance with subsection 11(2) of the Act, the Minister shall notify the license holder in writing respecting the terms and conditions.

(2) The terms and conditions referred to in subsection (1) may be, but are not limited to, limitations or conditions respecting food preparation, handling and storage practices that the license holder is
42. (1) The Minister may refuse to issue or renew or may suspend a food premises license for a term of up to 30 days where
(a) the food premises, its equipment or its operation do not meet the requirements of the Act or these regulations;
(b) the license holder fails to comply with the provisions of the Act or these regulations;
(c) the Minister has reason to believe that the public will be endangered if the food premises is allowed to continue operating; or
(d) the license holder has failed or is unable to take immediate corrective measures, as referred to in clause (2)(b), to remedy a contravention or failure to meet the requirements of the Act or these regulations.

(2) The Minister shall not suspend a license under subsection (1) unless
(a) a public health official has, at the time of inspection, notified the license holder of the failure to comply with the relevant provision of the Act or these regulations;
(b) a public health official has provided the license holder with a copy of an inspection report prepared by the public health official that sets out the failure to comply with the relevant provision of the Act or these regulations, the required corrective measures and the dates by which these measures shall be implemented in order to avoid suspension; and
(c) a notice of suspension of license is delivered to the license holder.

(3) A suspension of a license under subsection (1) shall remain in effect
(a) until the required corrective measures have been taken by the license holder and have been verified by a public health official; or
(b) throughout the period referred to in subsection (1) or a longer period imposed by the Minister under subsection (5).

(4) A license holder whose license has been suspended shall pay the reinstatement fee set out in subsection 40(5) prior to reinstatement of the license.

(5) If it is not possible for the license holder to implement the required corrective measures within the period referred to in subsection (1), the Minister may impose a longer period of time that the Minister considers adequate to implement those measures if, in the opinion of the Minister, the longer period does not create a significant risk to human health.

43. (1) A person who is aggrieved by the decision of the Minister under subsection 42(1) or (5) or the imposition of terms and conditions on his or her license under subsection 11(2) of the Act may appeal the decision or imposition to the Supreme Court within 30 days after being served with notice of the decision or imposition.

(2) On hearing an appeal, the Supreme Court may
(a) confirm, revoke or vary the terms and conditions imposed by the Minister or the decision appealed from;
(b) refer the matter, or any issue, back to the Minister for further consideration; or
(c) provide any direction that it considers appropriate.

(3) The Supreme Court may make any order as to the costs of an appeal that it considers appropriate.

4. The regulations are amended in the following provisions by the deletion of the words “Chief Health Officer” wherever they occur and the substitution of the words “Chief Public Health Officer”:
(a) clause 5(a);
(b) clause 26(d);
(c) section 27.

5. These regulations come into force on September 1, 2013.
EXPLANATORY NOTES

SECTION 1 corrects a reference to the regulation-making authority in the Introduction to the regulations.

SECTION 2 amends section 1 of the regulations for consistency with the terminology used in the new Public Health Act.

SECTION 3 revokes sections 40 to 43 of the regulations and substitutes new sections 40, 41, 42 and 43.

Section 40 deals with licensing of eating establishments, including the information to be provided by an applicant, the fees to be paid, and the requirement to display the license where it can be seen by the public.

Section 41 authorizes the Minister to impose terms and conditions on a license in accordance with subsection 11(2) of the Act.

Section 42 authorizes the Minister to refuse to issue or renew a license, or to suspend a license for up to 30 days in the circumstances set out in clauses 42(1)(a) to (d). The license holder must be notified of the suspension and the reasons for it, but if the license holder is unable to rectify the problem within the term of the suspension, the Minister may impose a longer period during which the corrective measures must be implemented.

Finally, section 43 authorizes an appeal to the Supreme Court by a person who is aggrieved by a decision of the Minister under subsection 42(1) or (5) or to impose terms and conditions on a license pursuant to subsection 11(2) of the Act.

SECTION 4 amends several provisions of the regulations by changing references to the Chief Health Officer to the Chief Public Health Officer, for consistency with the terminology used in the Act.

SECTION 5 provides for the commencement of these regulations.
license that have not been reported to the Minister pursuant to subsection (6).

(2) In addition to the requirements of subsection (1), an applicant for a license or the renewal of a license for a milk processing plant shall comply with the applicable requirements of the Act and these regulations and pay the licensing fee set out in subsection (4).

(3) A license for a milk processing plant shall be issued by the Minister in the form established by the Minister.

(4) The fee for a license or the renewal of a license is $300.

(5) A milk processing plant license issued under this section expires on December 31.

(6) A license holder shall report any change in the information provided by the license holder for the purposes of subsection (1) that occurs within the term of the license to the Minister as soon as practicable.

(7) A milk processing plant license is not transferable.

(8) The Minister may revoke a license that contains information that has changed as referred to in subsection (6) and may issue a new license to the license holder, based on the new information provided, on payment of the licensing fee set out in subsection (4).

(9) Where the Minister imposes terms and conditions on a license issued under this section in accordance with subsection 14(4) of the Act, the Minister shall notify the license holder in writing respecting the terms and conditions being imposed.

(10) The terms and conditions referred to in subsection (9) may be, but are not limited to, limitations or conditions respecting
(a) production processes;
(b) products that may be processed;
(c) use of equipment;
(d) employment in production processes of persons who are not fully qualified; or
(e) storage of raw materials prior to processing.

4. Section 3 of the regulations is amended

(a) in subsection (1),
(i) by the deletion of the words “renew or may suspend the license for a milk processing plant” and the substitution of the words “renew, or may suspend a milk processing plant license for a term of up to 30 days,”; and
(ii) in clause (d), by the addition of the words “as referred to in clause (2)(b) after the words “corrective measures”;

(b) in clause (2)(c), by the deletion of the word “operator” and the substitution of the words “license holder”; and

(c) by the revocation of clause (3)(b) and the substitution of the following:
(b) throughout the period referred to in subsection (1) or a longer period imposed by the Minister under section 4.

5. Subsection 4(3) of the regulations is revoked.

6. Subsection 5(1) of the regulations is amended by the deletion of the words “section 11(6)” and the substitution of the words “subsection 14(4)”.

7. Subsection 8(11) of the regulations is amended by the deletion of the words “within one hour”.

8. Section 21 of the regulations is amended by renumbering it as subsection 21(1).

9. The regulations are amended in the following provisions by the deletion of the words “Chief Health Officer” wherever they occur and the substitution of the words “Chief Public Health Officer”:

(a) section 26;
(b) subsections 27(1) and (2);
(c) subsections 28(1) and (2);
(d) section 29.

10. The regulations are amended in the following provisions by the deletion of the words “health officer” wherever they occur and the substitution of the words “public health official”:

(a) subsections 3(2) and (3);
(b) clause 4(3)(a);
(c) subsections 21(1) and (2);
(d) subsections 22(1) and (2);
(e) section 24;
(f) clause 25(d).

11. These regulations come into force on September 1, 2013.

EXPLANATORY NOTES

SECTION 1 corrects a reference to the regulation-making authority in the Introduction to the regulations.

SECTION 2 amends clause 1(a) of the regulations to refer to the chapter number of the current Public Health Act. It also amends clause 1(k) of the regulations to delete a reference to section 11 of the former Public Health Act in the definition of “license”. The reference should be to section 14 of the current Public Health Act.

SECTION 3 revokes section 2 of the regulations and substitutes a new section 2 that establishes a new licensing process for milk processing plants based on the authority and organization provided in the new Act. An applicant for a license or a renewal of a license is required to provide detailed information respecting the proposed milk processing plant and its intended operations, including the products to be processed, and to pay the license fee of $300. A license holder is required to report changes in the information on which the license is based to the Minister as soon as practicable, and the minister may revoke a license where the information has changed and issue a new license based on the new information provided, on payment of the fee. Where terms and conditions are imposed on a license in accordance with subsection 14(4) of the Act, the Minister is required to notify the license holder in writing of that fact. Terms and conditions may relate to
- production processes;
- products that may be processed;
- use of equipment;
- employment in production processes of persons who are not fully qualified; or
- storage of raw materials prior to processing.

SECTION 4 amends the opening words of subsection 3(1) to clarify that a suspension of a milk processing plant license under that subsection may be for a term of up to 30 days. The section amends clause 3(2)(b) to delete the term “operator” and substitute the term “license holder”, for consistency. The section revokes clause (3)(b) and substitutes a new clause (b) to clarify the term of a suspension that may be imposed on a license holder.

SECTION 5 revokes subsection 4(3) of the regulations. The Act now provides an appeal process for persons whose licenses are revoked.

SECTION 6 amends subsection 5(1) of the regulations to delete a reference to section 11(6) of the former Act and substitute a reference to 14(4) of the current Act.

SECTION 7 amends subsection 8(11) by deleting the words “within one hour”. The imposition of this time period was found to be unnecessary.
SECTION 8 amends section 21 of the regulations to correct an error in numbering.

SECTION 9 amends a number of provisions to change the title “Chief Health Officer” to “Chief Public Health Officer”, for consistency with the terminology of the Act.

SECTION 10 amends a number of provisions to change the title “health officer” to “public health official”, for consistency with the terminology of the Act.

SECTION 11 provides for the commencement of these regulations.

EC2013-560

PUBLIC HEALTH ACT
NOTIFIABLE DISEASES AND CONDITIONS AND COMMUNICABLE DISEASES REGULATIONS

Pursuant to section 72 of the Public Health Act R.S.P.E.I. 1988, Cap. P-30.1, Council made the following regulations:

1. In these regulations


(b) “carrier” means a person who, without apparent symptoms of a disease, harbours and may disseminate the infectious agent;

(c) “control measure” means a procedure or condition applied in order to contain or prevent the spread of communicable disease, and may include restricting a person’s work, school or other community activity, detaining, hospitalizing, isolating or quarantining a person, providing public notification of risk, and disinfection or disposal of articles and substances;

(d) “health practitioner” means a health practitioner as defined in the Consent to Treatment and Health Care Directives Act R.S.P.E.I. 1988, Cap. C-17.2.

2. (1) The Chief Public Health Officer

(a) shall have overall responsibility for the control of communicable diseases in the province, including the investigation, management and follow-up of cases and agents of transmission;

(b) shall be the final medical authority on all matters pertaining to control of communicable diseases;

(c) may provide instructions to health practitioners involved in the treatment, follow-up and control of communicable diseases;

(d) may require the reporting of notifiable diseases and conditions by any person with knowledge of an occurrence of the notifiable disease or condition; and

(e) shall be responsible for the monitoring of notifiable diseases or conditions and may by order specify procedures, including frequency and form, for the reporting of them.

(2) Where the Chief Public Health Officer has delegated a power or duty of the Chief Public Health Officer under these regulations to a person or agency, including a public health official, medical practitioner and a unit of a government or health-system organization such as a laboratory or office for the compiling of information, references in the applicable provisions of these regulations to the Chief Public Health Officer shall be read as references to the person or agency, as the case may be.

3. Every person is required to comply with the provisions of these regulations as applicable, and with any particular order the Chief Public Health Officer may issue in accordance with these regulations.

4. A person who is, or is suspected of being, infected with a communicable disease, including a suspected carrier or contact, shall

(a) if the person suspects an infection or is informed by a medical practitioner or public health official that he or she is or is suspected of being infected, place himself or herself under the care of a medical practitioner or direction of a public health official;
(b) submit to diagnostic examination, treatment and control measures as directed by the medical practitioner or Chief Public Health Officer; and
(c) identify any contact, and provide any other relevant information that may be required, to the medical practitioner or Chief Public Health Officer.

5. The owner of an animal, substance or any thing which is a suspected or known transmitter of a communicable disease shall comply with any direction by the Chief Public Health Officer for the purpose of preventing spread of the communicable disease.

6. When a person infected with a communicable disease is known to be relocating, the Chief Public Health Officer shall forward information concerning the case to the public health authority of the district of destination.

7. A person directed by the Chief Public Health Officer shall submit reports of notifiable diseases or conditions, with any further information as may be required, as directed to the Chief Public Health Officer and to the appropriate agencies of the Government of Canada for purposes of national disease surveillance.

8. The following are designated as institutions for the purposes of section 34 of the Act:
   (a) a camp;
   (b) a community care facility;
   (c) a university or college.

9. (1) For the purposes of section 35 of the Act, the following persons shall report to the administrator of a health facility at the times and in the manner required by the administrator:
   (a) a health practitioner, with respect to information respecting an occurrence or suspected occurrence of a notifiable disease or condition that comes to the health practitioner’s attention in the course of carrying out his or her functions in the health facility;
   (b) the Director of Laboratory Services, Queen Elizabeth Hospital, with respect to laboratory findings pertaining to a notifiable disease or condition.

   (2) In addition to the requirements of clause (1)(b), the Director of Laboratory Services, Queen Elizabeth Hospital, shall report directly to the Chief Public Health Officer with respect to laboratory findings pertaining to a notifiable disease or condition.

10. A medical practitioner or the Chief Public Health Officer may provide information concerning the condition of a person who is or is suspected of being infected with a communicable disease to members of the person’s family for the protection of their health.

11. Responsibility for the costs or losses which may result from control measures rests with the person or persons affected by those measures, not with the Chief Public Health Officer or other person who may impose or supervise the carrying out of the measures.

12. (1) The following are notifiable diseases or conditions, the occurrence of which, in humans, may be required to be reported to the Chief Public Health Officer in the manner directed by the Chief Public Health Officer:

   (a) any occurrence of the following
      (i) enteric, food and waterborne diseases, including but not limited to:
         (A) Amoebiasis,
         (B) Botulism,
         (C) Campylobacteriosis,
         (D) Cholera,
         (E) Cryptosporidiosis,
         (F) Cyclosporiasis,
         (G) Giardiasis,
         (H) Hepatitis A,
         (I) Listeriosis,
         (J) Paralytic Shellfish Poisoning,
         (K) Salmonellosis,
         (L) Shigellosis,
         (M) Typhoid,
(N) Verotoxig Escherichia coli,
(O) Haemolytic uremic syndrome,
(P) Vibrio parahaemolyticus,
(Q) Yersiniosis,

(ii) diseases transmitted by respiratory routes, including but not limited to:
(A) Hantavirus,
(B) Invasive Group A Streptococcal Disease,
(C) Invasive Meningococcal Disease,
(D) Invasive Pneumococcal Disease,
(E) Influenza,
(F) Legionellosis,
(G) Leprosy,
(H) Severe Acute Respiratory Syndrome,
(I) Tuberculosis,

(iii) diseases spread by direct contact or through the provision of health care, including but not limited to:
(A) Clostridium difficile,
(B) Creutzfeld-Jacob Disease, Classic,
(C) Creutzfeld-Jacob Disease, Variant,
(D) Extensively drug-resistant Enterobacteriaceae,
(E) Group B Streptococcal Disease of the Newborn,
(F) Herpes (neonatal),
(G) Methicillin Resistant Staphylococcus aureus (including colonizations),
(H) Vancomycin Resistant Enterococci (infections only),

(iv) disease preventable by routine vaccination, including but not limited to:
(A) Poliomyelitis,
(B) Varicella,
(C) Diphtheria,
(D) Invasive Haemophilus influenzae Serotype B,
(E) Invasive Haemophilus influenzae non-B (non-vaccine preventable),
(F) Hepatitis B,
(G) Measles,
(H) Mumps,
(I) Pertussis,
(J) Rotavirus,
(K) Rubella,
(L) Congenital Rubella syndrome,
(M) Tetanus,

(v) sexually transmitted and bloodborne pathogens, including but not limited to:
(A) Chlamydia,
(B) Gonorrhea,
(C) Hepatitis C,
(D) Herpes Simplex,
(E) Human Immunodeficiency Virus,
(F) Lymphogranuloma Venereum,
(G) Syphilis,

(vi) vectorborne and other zoonotic diseases, including but not limited to:
(A) Anthrax,
(B) Brucellosis,
(C) Malaria,
(D) Plague,
(E) Rabies,
(F) Tularemia,
(G) West Nile Virus,
(H) Yellow Fever,
(I) Lyme Disease,

(vii) other diseases and conditions, including but not limited to:
(A) Cancer,
(B) Viral Hemorrhagic Fevers,
(C) Smallpox,
(D) novel organisms deemed as having pandemic potential by the World Health Organization,
(E) adverse events following immunization (AEFI),
(F) Acute Flaccid Paralysis,
(G) severe acute respiratory disease of unknown etiology;

(b) any occurrence of any of the following if the disease appears epidemic or the case shows unusual features:
(i) enteric outbreaks (includes Norovirus), and
(ii) outbreaks of
   (A) Influenza-like illness,
   (B) Impetigo,
   (C) Ringworm,
   (D) Pediculosis,
   (E) Scabies.

(2) The notifiable diseases specified in subsection (1) are communicable diseases for the purposes of the Act, with the exception of the following diseases and conditions:
   (a) Paralytic Shellfish Poisoning;
   (b) Haemolytic uremic syndrome;
   (c) Congenital Rubella syndrome;
   (d) Cancer;
   (e) adverse events following immunization (AEFI); and
   (f) Acute Flaccid Paralysis.

13. The Notifiable and Communicable Diseases Regulations (EC330/85) are revoked.

14. These regulations come into force on September 1, 2013.

EXPLANATORY NOTES

SECTION 1 establishes definitions for the purposes of the regulations.

SECTION 2 establishes the functions of the Chief Public Health Officer under the regulations and clarifies that where the Chief Public Health Officer has delegated a function or power to a person or agency, the applicable references in the regulations to the Chief Public Health Officer are to be read as references to the person or agency.

SECTION 3 requires compliance with the provisions of the regulations and any directions given by the Chief Public Health Officer in accordance with the regulations.

SECTION 4 requires a person who is, or is suspected of being, infected with a notifiable disease or condition, including a carrier or a contact, to place himself or herself under the care of a medical practitioner or the direction of a public health official, to submit to diagnostic examination, treatment and control measures as directed by the medical practitioner or the Chief Public Health Officer, and to identify any contact and provide other relevant information as required to the medical practitioner or the Chief Public Health Officer.

SECTION 5 requires the owner of an animal, substance or any thing which is a suspected or known transmitter of a notifiable disease or condition to comply with a direction by the Chief Public Health Officer for the purpose of preventing spread of the notifiable disease or condition.

SECTION 6 provides that, where a person with a notifiable disease or condition is moving, the Chief Public Health Officer shall forward information concerning the case to the public health authority of the person’s district of destination.

SECTION 7 requires a person directed by the Chief Public Health Officer to submit reports of notifiable diseases and conditions and accompanying information to the Chief Public Health Officer and to the appropriate agencies of the Government of Canada for the purpose of national disease surveillance.

SECTION 8 designates camps, community care facilities and universities or colleges as institutions for the purposes of section 34 of the Act.

SECTION 9 establishes the persons who are required to report to the administrator of a health facility for the purposes of section 35 of the Act as health practitioners, with respect to information about an occurrence or suspected occurrence of a notifiable disease or condition that comes to their attention in the course of carrying out their functions in the health
facility, and the Director of Laboratory Services of the Queen Elizabeth Hospital, with respect to laboratory findings pertaining to a notifiable disease or condition.

SECTION 10 provides that a medical practitioner or the Chief Public Health Officer may provide information concerning the condition of a person who is or is suspected of being infected with a notifiable disease or condition to members of the person’s family for the protection of their health.

SECTION 11 provides that responsibility for costs or losses which may result from control measures rests with the persons affected by those measures and not with the Chief Public Health Officer or other person who may impose or supervise the carrying out of the measures.

SECTION 12 establishes the notifiable diseases or conditions whose occurrence in humans may be required to be reported to the Chief Public Health Officer and specifies which of those diseases are communicable diseases.

SECTION 13 revokes the Notifiable and Communicable Diseases Regulations (EC330/85).

SECTION 14 provides for the commencement of the regulations.

EC2013-561

PUBLIC HEALTH ACT
TANNING FACILITY REGULATIONS

Pursuant to section 72 of the Public Health Act R.S.P.E.I. 1988, Cap. P-30.1, Council made the following regulations:


2. The following forms of identification are prescribed for the purposes of subsection 18(2) of the Act:
   (a) a P.E.I. driver’s license;
   (b) a provincial photographic identification card;
   (c) a passport, Certificate of Canadian Citizenship or permanent resident certificate issued by the federal government; or
   (d) any other document issued by the federal government or the government of a province or territory that contains the person’s photograph, date of birth and signature.

3. The following information is prescribed for the purposes of section 20 of the Act:
   (a) the business name, telephone number and address, and e-mail address, if any, of the tanning facility;
   (b) the name and mailing address of the owner of the tanning facility;
   (c) a list of all tanning equipment on location at the tanning facility, including the name of the manufacturer, model name and number, if applicable, and serial number of the equipment.

4. (1) The sign prescribed for the purposes of section 21 of the Act shall be in the form and contain the information specified in the Schedule to these regulations.
   (2) The owner of a tanning facility is responsible for ensuring that signs that comply with the requirements of subsection (1) are
      (a) located
         (i) within one metre of each cash register where access to tanning equipment is sold and in an unobstructed position where customers can easily view the sign before purchasing access to tanning equipment, and
         (ii) within one metre of each item of tanning equipment and in an unobstructed position where customers can easily view the sign before using the tanning equipment; and
      (b) maintained so as to be readily legible.

5. (1) The registration fee for a tanning facility is $100.
(2) The registration for a tanning facility expires three years after the
date of registration.

(3) The registration for a tanning facility is not transferable.

6. These regulations come into force on September 1, 2013.

Schedule

TANNING EQUIPMENT EMITS
ULTRAVIOLET RADIATION!

Exposure to ultraviolet radiation contributes to skin cancer and skin
ageing and repeated exposure further increases risk.

It is illegal for persons under 18 years
of age to access tanning equipment in
Prince Edward Island.

EXPLANATORY NOTES

SECTION 1 establishes the definition of “Act” for the purposes of these
regulations.

SECTION 2 prescribes the information required for the purposes of
subsection 18(2) of the Act.

SECTION 3 prescribes the information required for the purposes of
section 20 of the Act.

SECTION 4 prescribes the signage required for the purposes of section
21 of the Act.

SECTION 5 establishes a registration fee of $100 for a tanning facility.
It also provides that the registration is valid for 3 years from the date of
registration and is not transferable.

SECTION 6 provides for the coming into force of these regulations.
EXECUTIVE COUNCIL 23 JULY 2013

EC2013-562
PUBLIC DEPARTMENTS ACT
ACTING MINISTERS
APPOINTMENTS

Under authority of subsection 4(2) of the Public Departments Act, R.S.P.E.I. 1988, Cap. P–29 the following appointments were made:

1. Honourable Wes Sheridan to be Acting Minister of Education and Early Childhood Development commencing on the 24th day of July 2013, and continuing for the duration of the absence from the Province of Honourable Alan McIsaac.

2. Honourable Robert Henderson to be Acting Minister of Innovation and Advanced Learning commencing on the 28th day of July 2013, and continuing for the duration of the absence from the Province of Honourable Allen Roach.

EC2013-563
WILDLIFE CONSERVATION ACT
FUR HARVESTING REGULATIONS
AMENDMENT

Pursuant to section 28 of the Wildlife Conservation Act R.S.P.E.I. 1988, Cap. W-4.1, Council made the following regulations:

1. Schedule C of the Wildlife Conservation Act Fur Harvesting Regulations (EC663/04) is revoked and Schedule C as set out in the Schedule to these regulations is substituted.

2. These regulations come into force on August 3, 2013.

SCHEDULE

SCHEDULE C

List of Approved Body-Gripping Traps (Certified under the Canadian Trap Certification Program and Approved for use as Killing Traps for Beaver, Muskrat and Raccoon in Prince Edward Island)

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<th>Beaver</th>
<th>Traps approved for use underwater and on land:</th>
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<td></td>
<td>B.M.I. 220 Body Girpper</td>
</tr>
<tr>
<td></td>
<td>B.M.I. 280 Body Girpper</td>
</tr>
<tr>
<td></td>
<td>B.M.I. 280 Magnum Body Girpper</td>
</tr>
<tr>
<td></td>
<td>Bridge 160</td>
</tr>
<tr>
<td></td>
<td>Bridge 220</td>
</tr>
<tr>
<td></td>
<td>Duke 160</td>
</tr>
<tr>
<td></td>
<td>Duke 220</td>
</tr>
<tr>
<td></td>
<td>Koro #2</td>
</tr>
<tr>
<td></td>
<td>LDL C 160</td>
</tr>
</tbody>
</table>
EXPLANATORY NOTES

SECTION 1 amends the Schedule C to reflect the most recent trap certification list pertaining to the list of approved body-gripping traps approved for use as killing traps for beaver, muskrat and raccoon in the province.

SECTION 2 provides for the commencement of these regulations.

WILDLIFE CONSERVATION ACT
HUNTING AND TRAPPING SEASONS REGULATIONS
AMENDMENT

Pursuant to section 28 of the Wildlife Conservation Act R.S.P.E.I. 1988, Cap. W-4.1, Council made the following regulations:

1. Schedules I and II of the Wildlife Conservation Act Hunting and Trapping Seasons Regulations (EC330/99) are revoked and the following substituted:

SCHEDULE I
HUNTING SEASONS AND LIMITS

<table>
<thead>
<tr>
<th>Game</th>
<th>Open Season</th>
<th>Daily Possession</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pheasant</td>
<td>No open season</td>
<td>-</td>
</tr>
<tr>
<td>Ruffed Grouse</td>
<td>September 30 - December 31</td>
<td>3</td>
</tr>
<tr>
<td>Hungarian (Grey) Partridge</td>
<td>October 14 - November 9*</td>
<td>3</td>
</tr>
<tr>
<td>Snowshoe Hare*** (Rabbit)</td>
<td>October 1 - February 28</td>
<td>5</td>
</tr>
<tr>
<td>Fox</td>
<td>November 1 - January 31</td>
<td>-</td>
</tr>
<tr>
<td>Coyote</td>
<td>October 1 - March 31**</td>
<td>-</td>
</tr>
<tr>
<td>Red Squirrel</td>
<td>No closed season</td>
<td>-</td>
</tr>
</tbody>
</table>

NOTE:
* There will be no open season for Hungarian (Grey) Partridge in Lots 1-10 inclusive, and lots 43-47 inclusive, in 2013/2014.

** Hunting with hounds is permitted from October 1 – March 31. The running of hounds for training or any other purpose will not be permitted from April 1 - September 30, except by permit.

*** A Snowshoe Hare Snaring License is required to snare snowshoe hare.
SCHEDULE II

TRAPPING SEASONS

<table>
<thead>
<tr>
<th>Furbearing Animals</th>
<th>Open Season</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beaver</td>
<td>8:00 a.m., October 31 - March 31*</td>
</tr>
<tr>
<td>Mink</td>
<td>8:00 a.m., October 31 - February 28*</td>
</tr>
<tr>
<td>Muskrat</td>
<td>8:00 a.m., October 31 - March 31*</td>
</tr>
<tr>
<td>Weasel</td>
<td>8:00 a.m., October 31 - February 28*</td>
</tr>
<tr>
<td>Fox (snaring &amp; trapping)</td>
<td>November 15 - January 31</td>
</tr>
<tr>
<td>Fox (modified foothold only)**</td>
<td>November 1 - November 14</td>
</tr>
<tr>
<td>Raccoon</td>
<td>October 15 - March 31</td>
</tr>
<tr>
<td>Coyote (snaring &amp; trapping)</td>
<td>November 15 - January 31</td>
</tr>
<tr>
<td>Coyote (modified foothold only)**</td>
<td>November 1 - November 14</td>
</tr>
<tr>
<td>Red Squirrel</td>
<td>No closed season</td>
</tr>
<tr>
<td>Skunk</td>
<td>No closed season</td>
</tr>
</tbody>
</table>

NOTE:
* During the months of February and March, trap sets for beaver, muskrat and mink are restricted to those set in or over water. Weasel traps are restricted to Victor rat traps.
** A “modified foothold trap” is a foothold trap that has been altered to improve the humaneness of the trap by laminating the jaws, offsetting the jaws or padding the jaws.

2. These regulations come into force on August 3, 2013.

EXPLANATORY NOTES

SECTION 1 amends the Schedules to the regulations that outline hunting seasons and limits and trapping seasons for game and furbearing animals in the province.

SECTION 2 provides for the commencement of these regulations.

EC2013-565

NATURAL PRODUCTS MARKETING ACT
PRINCE EDWARD ISLAND MARKETING COUNCIL
APPOINTMENTS

Pursuant to subsection 2(2) of the Natural Products Marketing Act R.S.P.E.I. 1988, Cap. N-3 Council made the following appointments:

<table>
<thead>
<tr>
<th>NAME</th>
<th>TERM OF APPOINTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Derwin Clow</td>
<td>27 January 2012 to</td>
</tr>
<tr>
<td>Freetown</td>
<td></td>
</tr>
<tr>
<td>(reappointment)</td>
<td>27 January 2015</td>
</tr>
<tr>
<td>Calvin Jollimore</td>
<td>26 July 2013 to</td>
</tr>
<tr>
<td>French River</td>
<td></td>
</tr>
<tr>
<td>(vice John Sullivan, term expired)</td>
<td>26 July 2016</td>
</tr>
<tr>
<td>Layton Wallace</td>
<td>13 January 2012 to</td>
</tr>
<tr>
<td>Cascumpec</td>
<td></td>
</tr>
<tr>
<td>(reappointment)</td>
<td>13 January 2015</td>
</tr>
</tbody>
</table>