

INFORMED

NEWSLETTER OF THE COLLEGE OF NATUROPATHS OF ONTARIO



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**Governance Report:
A Mandate for Change**

CEO's Message

As this edition of iNformed reaches your inboxes, we will be approaching the holiday season and, to put it bluntly, the end of 2020. For most, moving into to 2021 will be a welcomed change from the trials and tribulations of the past year.

Was 2020 our "Annus horribilis"?

For those that may not entirely recall that phrase, Her Majesty Queen Elizabeth called 1992 her "Annus horribilis"—or "a horrible year" for those like me not fluent in Latin. In her speech marking the 40th Anniversary of her succession to the throne, she said "1992 is not a year on which I shall look back with undiluted pleasure".

There were many challenges this year, from murder hornets to hurricanes, tornados, earthquakes and civil unrest. Without a doubt, however, COVID-19 will have been 2020's most difficult and painful challenge, especially due to the horrible impact of the virus, including the many who fell ill, the numerous lives lost and the unknown long-term impacts of the virus.

There are certainly a lot of negative things to reflect on when we think of 2020.

Despite these challenges we faced, there is a great deal that is positive to reflect on. Canadians across the country rallied and worked together to flatten the curve and keep the number of infected individuals as low as possible. Our front-line health care workers bravely put themselves and their families at risk caring for those who became ill. Other health care workers willingly gave up several months without work to prioritise care for those afflicted with the virus, like so many other Canadians had done as well.

Perhaps just as importantly, we innovated and found ways to carry on communicating with our families and friends from drive-by hellos to reaching out to touch a window that separated people. We learned how to use video conferencing to be with friends and family and, for so many of us, continuing to perform our professional roles and duties.

CEO'S MESSAGE

Much has changed in 2020, but was it all negative?

Not all challenges are necessarily negative. In fact, some are long overdue as our society begins to try to assess the impact systemic racism has had on people of colour, indigenous and black people and to find ways to fix a system that is unfair, discriminatory and rife with inequalities.

Certainly—for those of us at the College—we learned a great deal about ourselves, the people that we serve and our profession from the COVID-19 experience. We all pulled together to make things work for us. We maintained the key functions of the College effectively while working remotely. From our perspective, the profession has been the best that it can be during this challenging time. In fact, never before in the history of this College have we seen so many people reading our messages, responding to our inquiries, putting their own needs behind those of Ontarians, continuing to work with us remotely to enable our operations and our vital mission of protecting the public.

I for one will always be proud of the way all of us have responded to the difficulties and challenges posed by this pandemic. Ontarians, naturopaths, College volunteers and College staff have all done their part to make the best out of these circumstances.

While next year will undoubtedly have its own challenges, I am more confident than ever that together we can make it work. We will make it through this and anything else that comes our way.

Happy Holidays to all. I wish you the greatest of happiness and success in 2021!



Andrew Parr, CAE
Chief Executive Officer



Celebrating five years of the Council of the College

On July 1, 2020, the College of Naturopaths of Ontario completed its fifth year of service to the people of Ontario as the regulatory body governing naturopaths in Ontario. These past five years have been both exciting and challenging. We could not have been successful without the dedicated and hardworking people who have made up the Council during this time.

As we celebrate five years as the regulatory body, we also celebrate five years of dedicated Council members.

Council members

Appointed by Order in Council

Asifa Baig of Mississauga
June 18, 2020 to Present

Dr. Harpal Buttar, PhD of Ottawa
December 16, 2016 to December 15, 2018

Geneviève Boudreau of Ottawa
December 16, 2015 to March 31, 2017

William Dean Calderwood of Toronto
March 31, 2020 to Present

Dianne Delany of Oakville
January 15, 2016 to Present

Lisa Fenton of Toronto
May 16, 2019 to Present

R. Gail Goodman of Toronto
December 16, 2015 to December 27, 2018
March 28, 2019 – March 27, 2020

Chantelle Goldsmith of Toronto
December 16, 2015 to December 14, 2016

Deborah Haswell of Owen Sound
March 9, 2016 to March 8, 2019

Samuel Laldin of Kingston
October 18, 2017 to October 17, 2020

Scott Sawler of Ottawa
August 17, 2017 to July 26, 2019

Sarah Salvoline of Toronto
August 13, 2020 to Present

Barry Sullivan of Garson
December 16, 2015 to Present

Elected Professional Members

Dr. Kim Bretz, ND of Waterloo (District 1)
January 2016 to Present

Dr. Shelley Burns, ND of Toronto (District 4)
January 2016 to Present

Dr. Karim Dhanani, ND of Richmond Hill (District 5)
January 2016 to April 2019

Dr. Tara Gignac, ND of Collingwood (District 6)
January 2016 to Present

Dr. Rosemary Hnatiuk, ND of Toronto (District 3)
January 2016 to June 2019

Dr. Danielle O'Connor, ND of Burlington (District 2)
January 2016 to Present

Dr. Dielle Raymond, ND of North Bay (District 8)
January 2016 to April 2017

Dr. Brenda Lessard-Rhead, ND (Inactive) of Aurora (District 5)
April 2019 to Present

Dr. Jacob Scheer, ND of Toronto (District 3)
June 2019 to Present

Dr. Jordan Sokoloski, ND of Thunder Bay (District 8)
April 2017 to Present

Dr. George Tardik, ND of Cobourg (District 7)
January 2016 to Present



Governance Report

A Mandate for Change

In 2019–2020, the Council of the College of Naturopaths of Ontario undertook a review of the governance approach as a regulatory body. The Council had been monitoring discussions in several sectors and jurisdictions about self-regulation and the future of regulation itself.

This was important to the Council for two reasons. First, the Council includes, among its strategic goals, an objective that the College will demonstrate excellence and leadership in regulation. Second, with so much change being undertaken in so many jurisdictions, the Council wanted to be proactive and set out what it felt was important to help shape that change.

There has been a myriad of issues over the past five years and longer that, when viewed collectively, lead to a natural questioning of the governance model for a regulated health profession. These issues have included transparency, accountability, public trust and the

perspective held by many in the public that the regulatory organisations protect their own. Add to this the ever-growing research on regulation across the globe, we see a healthy and respectful questioning of key governance issues, including:

- The role and size of the Council/Board;
- The role of the Chair of the Council/Board;
- A separation between those who govern on the Board and those who regulate through the Committee structures; and
- The evolving nature of regulation (self-regulation vs. profession directed regulation).

GOVERNANCE REPORT

Beginning in April 2019, the Council heard from the College of Nurses of Ontario, the College of Physicians and Surgeons of Ontario and the Ontario College of Teachers about their respective review processes and outcomes. Staff of the College conducted research and the Council has received extensive briefings on the issues being debated in regulatory organisations. The Council took the opportunity to engage stakeholders, both in the professional and public domains, and, in January 2020, met to discuss and debate the issues.

The outcome of these discussions is represented in our *Governance Report: A Mandate for Change* which the Council approved in July 2020 after a brief delay due to the COVID-19 crisis. A copy of the full report is available on the [College's website](#). The following is a brief summary of the decisions that the Council has taken.

I am pleased to enclose a copy of the report and I have been asked by the Council to provide you with important recommendations from the Council that, when implemented, would move this process forward for this Council and all health regulatory Councils in Ontario.

The Council had been monitoring discussions in several sectors and jurisdictions about self-regulation and the future of regulation itself.



Regulatory Approach

In the current regulatory model, the regulatory body is primarily reactive. It establishes a series of rules that are implemented by the regulator and reacts to potential breaches of those rules when it receives complaints from the public.

The Council has decided that it would like to adopt a risk-based approach to regulation. Under this model, the Council will identify the risks within the profession and invest time and resources to try and reduce (or eliminate) those risks to the public. This will require the College to look at its data and the trends to identify the existing and emerging risks of harm to the public.

This approach also embodies the concept that not all complaints are equal. Those that do not entail a risk of harm would be given a lower priority than those that do demonstrate that harm was created or the patient was placed at risk of harm.

This will be accomplished by the College creating an Alternative Dispute Resolution or mediation process that would allow complaints, in particular those that do not pose a risk of harm, to be addressed in the alternative model rather than using the complaints resources to address it.

GOVERNANCE REPORT



Role of Council

Several issues that arise in regulation are based on conflicting roles, lack of clarity of roles and overlapping personnel. Current research suggests that there is a distinction to be made between the role of the governing body (the Council) and the adjudicative functions of the College. The Council decided that in order to inject clarity into the regulatory system, the role of the Council needs to be clearly defined in legislation. What is that role? As Harry Cayton set out in his report on the College of Dental Surgeons of British Columbia, the role of the Board or Council is to:

- ensure compliance with the regulator's mandate and the legislation;
- set strategy for the regulator and monitor performance; and
- appoint the Registrar/CEO and hold them accountable for their performance.

The Council of the College of Naturopaths of Ontario has recommended to the Minister of Health that the role of the Council be properly enshrined in the Code. The Council has also recommended that a Statutory Committee be vested with the responsibility of setting the Standards of Practice of the profession as this role does not properly fit within the role of the governing body of the College. This might be an independent Committee or the Quality Assurance Committee. Currently, the Council is responsible for setting those standards.

The College of Naturopaths of Ontario



Size and Composition of the Council

Given that the *Naturopathy Act, 2007* (the Act) is a newer piece of legislation, this Council benefits from modern approach to governing with a smaller Council. The Act allows for a Council of between 11 and 17 public appointees and elected professional members. Typically, the Council has been 15 members maximum, with seven public appointees and eight professional members.

The Council of the College of Naturopaths of Ontario has recommended that the size of the Council remain as it is, however, given the importance of the public voice and the public protection mandate, the Council has recommended that there be equality in the composition of the Council, that is, equal representation of public and professional members.

The Council has recommended to the Minister that she continue to appoint seven public members to the Council while, for its part, the Council will be undertaking a review of its By-laws to reduce the number of professional members from the current eight to seven members in order to achieve parity.

GOVERNANCE REPORT



Populating the Council

There is considerable research on how individuals should come to sit on the Council or Board of Directors of organisations. There have also been several recommendations, from within Ontario, Canada and from other international jurisdictions.

Presently, professional members of the Council are elected by the members of the profession. While highly skilled and very talented individuals, the election does not necessarily result in people who are equipped to sit on the Council being the ones elected. Similarly, public appointments come with a wide variety of skills and experiences, but not all of those are necessarily positioning them well for their role on the Council.

The Council's had recommended a number of changes in this area. First, it will be developing a set of competencies for both the Council and Council Committees. Second, it has recommended to the Minister that she adopt these competencies for use in her appointment of public members. Third, the Council has recommended that the election process be dismantled and replaced with an appointment process based on the Competency Framework.

As these recommendations will take some time to implement, the Council is also moving forward with the development of a framework for assessing volunteers against the competencies and will require anyone who wishes to run for Council to have successfully completed this assessment process.



Conflicting roles—Committee composition and Discipline

There is considerable research that identifies that a conflict may occur when an individual who sits on the governing board, in our case the Council, also sits on adjudicative Committees and Panels, such as the Inquiries, Complaints and Reports Committee or the Discipline Committee.

In its discussions, the Council was firm on the notion that all Discipline functions should be removed from this and all of Ontario's health regulatory Colleges, and that they should be centralised in a new provincial adjudicative body. In so doing, the College will no longer be both the standard setting body and the final arbiter of compliance with those standards.

Although research has also suggested that those who sit on the Council should not also sit on Committees of the Council, the Council itself was of the view that some linkage between the Committees and Council was valuable. It recommends that only one Committee member also be a member of the Council.

While not specifically noted in the Report, the Council has previously noted that for

GOVERNANCE REPORT

most Committees, it believes that there should be parity on the Committees between public representatives and professional members. This is not possible with number of public members appointed by the Minister; however, as Council now appoints public members directly to its Committees, this becomes a possibility.

This leads to a further recommendation to the Minister which noted that the Code should be amended to allow for any public representative appointed by the Council to be counted among the public representation on various panels.

Elimination of the Executive Committee and Vice-Presidency

Much of the research on regulatory models speaks to the reduction of the size of the Council or Board allowing for more frequent meetings. In turn, this removes the need for an Executive Committee as a small Board is nimbler and can meet more frequently. While the Council of the College is small enough, the legal requirement that there be an Executive Committee with broad ranging powers was seen as an impediment.

The Council has therefore recommended to the Minister that the requirement for there to be an Executive Committee be removed from the Code. As an interim measure, the Council will move to more frequent meetings (six annually instead of the current four) and it will review the Terms of Reference of the Executive Committee such that it will only exercise its powers in an emergency or urgent situation.

The Council focused a great deal on the confusion within the public about the role of the health regulatory body versus the role of educational institutions.

Similarly, the Council was of the view that the role of the Vice-President, which is primarily a substitute for the President when they were not available, was redundant. If the President is absent from a meeting, the Council could readily select someone from among its members to chair a meeting. The Council has therefore recommended that the role of the Vice-President be eliminated from the Code.

Terminology

The Council focused a great deal on the confusion within the public about the role of the health regulatory body versus the role of educational institutions. Many of the terms used in the regulatory framework are misleading to the public. The fact that this is the **College** of Naturopaths of Ontario does not convey or even relate to the role. The term College suggests that we are an educational institution. This is exacerbated by the reference to a "Registrar", a term also commonly used in educational institutions. That as a regulatory body we have "Members" suggests to the public that we are an association or club, further reinforcing the notion that the College is here to protect its own.

GOVERNANCE REPORT

These are not necessarily new concerns. However, given the need to modernise the regulatory framework, now would be the right time to address them.

As a result, the Council has recommended to the Minister that:

- ▶ The RHPA, Code and health profession legislation be amended to remove reference to the “College” and that it be replaced with “regulatory authority”.
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- ▶ The Code be reviewed to ensure that the references to an individual who performs statutory functions under the Code need not be referred to as a “Registrar”.
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- ▶ The Act and the Code be amended to remove any references to the position of “President” of the Council or College and that it be replaced with “Chair” of the Council.
-
- ▶ That the RHPA, the Code and the Act be amended to replace references to “Members” to “Registrants”.
-

For its part, the Council has directed that steps be taken by the staff to implement these approaches as soon as possible. For example, By-law amendments will be made to reflect language relating to the Chair of the Council, Registrants and a Chief Executive Officer (CEO) instead of a Registrar. College communication will be updated to reflect these new approaches even without regulatory amendments that may be required.

Next Steps

The Council and the College know that some change will take time. It is determined to do its part to move forward an agenda of regulatory change. Recognising that this article cannot convey all of the key information, all stakeholders are invited to review the *Council’s Governance Report: A Mandate for Change*, as well as the *Implementation Plan* approved by the Council in July.

Dr. Kim Bretz, ND
Council Chair

And

Andrew Parr, CAE
Chief Executive Officer

Providing Regulatory Guidance for Naturopaths

Have you gone on the College's website looking for something and can't find it? Or, have you had a situation with a patient and you aren't sure how the College's standards apply in that specific situation? The Regulatory Education Specialist (RES) can help.

The RES is only a call or e-mail away for Registrants, students, graduates, stakeholders and members of the public who have a question about the College's regulations and standards and how they apply in the day-to-day practice of naturopathy.

Since the College of Naturopaths of Ontario came into being five years ago the RES has responded to approximately 5,100 inquiries. We encourage

all Registrants to continue to use the resource of the RES whenever they are unsure about how the rules apply in a particular situation. Our goal is to increase the understanding of the College's requirements and to help people know where to look on the website when they have questions in the future.

Registrants may hesitate to contact the College for fear of "getting into trouble". The College is not looking to get naturopaths "into trouble", but rather to help them better understand how to put the regulations and standards into practice. While we can't guarantee that an inquiry might not result in further and more formal follow up if an issue of concern for patient safety arises, the intent is to educate and provide guidance.

What can you expect when you contact the RES?

The majority of inquiries come from Registrants with questions related to their practice. A typical response by the RES to a Registrant will involve all or a combination of the following:

1 Provide a clear "yes" or "no" answer to the question. For example:

- "Yes, you do have to release a copy of the patient record when consented to by the patient".
- "No, you cannot order that laboratory test because it is not on the list of allowed tests."

2 Clarify the meaning of a regulation or standard of practice or expanding on the "yes" or "no" response. For example:

- "You may conduct a visit via telepractice, however, there are a number of issues you should first consider such as privacy, jurisdictional authority and the patient's health status."
- "As a regulated health care professional, you cannot choose when you are acting as an ND and when you aren't when providing naturopathic advice. This includes working in a health food store even though you don't use your ND title."

 PROVIDING REGULATORY GUIDANCE FOR NATUROPATHS

3 Send them to a document with additional information regarding their question. For example:

- a. "You can find more information about providing care by telepractice in the [Telepractice Guideline](#)"
- b. "You can find the list of laboratory tests that naturopaths in Ontario can requisition [here](#) on our website."
- c. "For your specific questions about protecting the privacy of patients' personal health information you are best to contact the [Office of the Information and Privacy Commissioner](#)."

The RES, however, will not be able to replace the knowledge, skill and judgment of a Registrant by giving a clear answer relating to specific treatments for a patient. This is simply because the RES does not have access to the patient record and therefore will not know all of the facts of the situation to be able to provide the answer. In these situations, the RES will try to guide Registrants on where to find information to assist them.

The College also benefits from these inquiries by identifying the common issues and misunderstandings within the profession. Much of the information provided through *iNformeD*, *News Bulletins* and additional information posted

to the website is a result of inquiries received by the RES. If one or two people have the same question, then it is extremely likely that there are many others wondering the same thing.

The next time you are unsure of how the standards may apply or where to find something on the website, we invite you to give Dr. Mary-Ellen McKenna, ND (Inactive), our Regulatory Education Specialist a call or send an e-mail. We are confident that you will come away being glad you did.

Tel: 416-583-6020

E-mail:

MaryEllen.McKenna@collegeofnaturopaths.on.ca



For additional guidance, contact our Manager of Professional Practice, Dr. Mary-Ellen McKenna, ND (Inactive) at 416 583-6020 or maryellen.mckenna@collegeofnaturopaths.on.ca

DISCIPLINE OUTCOMES

Discipline Summary



MR. ELVIS AZAD ALI (RESIGNED) REGISTRATION #0617

Hearing Date: July 16, 2020

Discipline is a critical aspect of self-regulation and maintaining public trust. The College has the responsibility and the authority to investigate breach of a regulation or a professional standard by a naturopath and to take action and assess a range of appropriate penalties. Any decisions are made in the best interests of the public. Publishing summaries of the decisions in this newsletter is part of the transparency of the discipline process and is intended to help readers understand what may constitute professional misconduct.

SUMMARY OF ALLEGATIONS

- Commencing on or around April 30, 2019:
 - Failing to comply with an order of the Discipline Committee of the College.
 - Practising the profession while the Registrant's certificate of registration has been suspended.

- Inappropriately using a title or designation, in particular using protected titles "Doctor", "Naturopath" and/or "ND" while Mr. Ali's certificate of registration has been suspended.

- Commencing in or about March 2016:

- Contravening, by act or omission, the Conflict of Interest Standard of Practice and the Conflict of Interest Guideline, including but not limited to endorsing products using his professional status.
- Failing to comply with an undertaking to the Board of Directors of Drugless Therapy—Naturopathy.

The Agreed Statement of Facts and the Joint Submission as to Penalty and Costs had been agreed on before the hearing. The Discipline Panel found that the Registrant committed acts of professional misconduct as admitted by the Registrant.

DISCIPLINE OUTCOMES

CHRONOLOGY:

January 31, 2013:

The Registrant signed an undertaking with the Board of Directors of Drugless Therapy—Naturopathy (BDDT-N) to refrain from promoting products, including natural health products.

March 2016:

A Facebook page indicated that the Registrant recommended certain products.

April 30, 2019–October 30, 2019:

The Registrant's certificate of registration was suspended, as a result of an order from the Discipline Committee of the College. As a result of that suspension, the Registrant was not permitted to practise naturopathy, see or treat patients, act as a naturopathic advisor and/or use the title "Dr.", "Naturopath" or "Naturopathic Doctor" and/or the designation "ND" in Ontario.

May 6, 2019:

The College advised in a letter to the Registrant, that during his suspension he was not permitted to practise naturopathy, see or treat patients, act as a naturopathic advisor and/or use the restricted titles. The Registrant admittedly, did receive this letter, but did not read the complete letter and did not fully understand the restrictions.

August 16, 2019:

The Registrant presented in a webinar and was identified as "Dr. Elvis Ali, ND, BSc. RNCP, FIACA, Dipl. Ac." It was agreed that the Registrant during this webinar, used the protected titles and failed to indicate that he was suspended, therefore practising the profession.

August 29, 2019:

An undercover investigator of the College, reached out to the Registrant and asked him to recommend products to aid in digestions. The Registrant recommended products to the investigator.

August 30, 2019:

An undercover investigator of the College (using an alias), reached out to the Registrant to inquire if he was accepting new patients. The Registrant responded by advising he is not taking on new patients and provided the investigator with names of other naturopaths.

September 20, 2019:

The Registrant presented in a webinar and was identified as "Dr. Elvis Ali, ND, BSc. RNCP, FIACA, Dipl. Ac." It was agreed that the Registrant during this webinar, used the protected titles and failed to indicate that he was suspended, therefore practising the profession.

ADMISSION OF PROFESSIONAL MISCONDUCT

A Joint Submission as to Penalty and Costs had been agreed upon prior to the hearing. The parties submitted that the public was protected because the Registrant had accepted responsibility for his actions and had agreed to an appropriate penalty which provided for specific and general deterrence, rehabilitation and monitoring.

DISCIPLINE OUTCOMES

ORDER

The Discipline Panel imposed an order:

1. That the Registrant is to appear before the panel to be reprimanded immediately following the hearing of the matter.
2. That the Chief Executive Officer (CEO) be directed to suspend the Registrant's certificate of registration for a period of four months, on a schedule to be set by the CEO.
3. That the CEO be directed to impose the following specified terms, conditions and limitations on the Registrant's certificate of registration:
 - a. That the Registrant is required to successfully complete, and at his own expense, the PROBE course in ethics and boundaries, by December 31, 2020;
 - b. That the Registrant is required to successfully complete, to the satisfaction of the CEO and at his own expense, the College's Jurisprudence course, by August 31, 2020;
 - c. That the Registrant is required to write an essay between 500 and 1,000 words, that is deemed acceptable by the CEO, and provide it to the CEO, no later than January 29, 2021, to be published by the College at the discretion of and in a format determined by the CEO, on the following issues:
 - i. The lessons he learned in completing the PROBE course;
 - ii. The lessons he learned in completing the Jurisprudence course; and
 - iii. The importance of adhering to the College's standards and orders of Committees of the College.
4. The Registrant shall pay a fine in the amount of \$350 to be paid to the Minister of Finance within 30 days of the date of this order.
5. The Registrant shall pay the College's costs fixed in the amount of \$6,400 payable on a schedule determined by the CEO.

The Panel concluded that the proposed penalty was reasonable and in the public interest, and that it satisfied the principle of public protection.

COLLEGE'S COSTS

The following costs and expenses were incurred by the College in regard to this matter:

- Legal costs and expenses: \$14,171
- Investigation costs: \$4,017
- Other costs: \$2,958

As previously noted, the Panel ordered the Registrant to pay the College's costs fixed in the amount of \$6,400, which amounted to 30% of the College's costs.

(Editorial note: following this hearing, Elvis Ali voluntarily resigned his registration with the College having paid the costs ordered by the Panel)

Complying with Orders of College Committees



Every regulated health profession in Ontario has provisions outlined in Regulation¹ that articulate what behaviour or conduct would be considered professional misconduct by a regulated health professional. Some provisions for each health regulatory College tend to be slightly different while others can remain consistent regardless of the profession being regulated. One thing that is consistent between regulations is the provision for the requiring of Registrants to comply with an order made by a Committee of the College.

The *Regulated Health Professions Act, 1991* outlines the powers and authority of Committees such as Quality Assurance, Registration, Inquiries, Complaints, and Reports, Fitness to Practise and Discipline. These Committees have the authority to order a Registrant to undergo remedial activities such as Specified Continuing Education and Remediation Programs or attend for an Oral Caution. These Committees may also order that Terms, Conditions or Limitations be placed on a Registrants Certificate of Registration. Additionally, the Discipline Committee may also reprimand, order costs for proceedings be paid, suspend a Registrant or even revoke a certificate of registration. Most orders are not punitive in nature but rather aim at helping NDs to improve the quality of care

provided, including but not limited to the areas of communication, advertising or record keeping skills.

The goal of these outcomes is to ensure that Ontarians receive safe, competent and ethical naturopathic care and to hold the professional accountable for the decisions they make.

Regulated health professionals need to be mindful that if a Committee of the College orders a remediation program or other outcomes, failing to comply with the requirements is an act of professional misconduct and will likely result in further disciplinary action.

Any order or outcome ordered by a Committee of a health regulatory College must be taken seriously and complied with. Failing to comply with remediation, limitations or disciplinary orders is professional misconduct in and of itself, and the failure to comply with the orders by a College Committee will likely result in a greater disciplinary action. While complying with an order is the Registrant's responsibility, staff of the College are always happy to clarify the requirements and provide assistance wherever possible.

ICRC: Non-compliance with an order

There are 26 health regulatory Colleges in Ontario regulating 28 health professions. Each of these regulatory authorities set the entry-to-practice requirements for the profession, ensure on-going competency of the professions, set the standards of practice of the professions and hold the professions accountable for their conduct. This regulatory regime is designed to serve and protect the public interest and ensure patient safety.

The regulatory regime relies heavily on the ability of the regulatory authorities to make orders with which their Registrants will comply. Orders are made by Committees of the College and are an important tool for ensuring accountability of Registrants for their actions. While they may have penalties associated with them, they are

often based on working to inform and educate health professionals to prevent future matters coming before the College.

Five Committees of the College can make orders, including the Discipline Committee, Fitness-to-Practise Committee, Registration Committee, Quality Assurance Committee, and the Inquires, Complaints and Reports Committee (ICRC).

In 2019 and 2020, of the eight matters the ICRC referred to the Discipline Committee, three were related to the respective Registrant's failure to comply with an order of a panel of the College. To demonstrate the importance of compliance, this article takes a closer look at the three matters and how each resulted in an investigation, a referral to the Discipline Committee and a hearing.

1

First matter: continuing to practise the profession while suspended

In 2019, a Registrant of the College appeared before a panel of the Discipline Committee. The Registrant was found to have engaged in acts of professional misconduct which resulted in an order made by a panel of the Discipline Committee of the College. One of the requirements outlined in the order, was that the Registrant be suspended for a period of eight months. The Registrant was reminded that as a suspended Registrant of the College they are not

authorised to practise naturopathy, see or treat patients, act as a naturopathic advisor or use the title "Naturopath", "Naturopathic Doctor" and/or "ND" in the province of Ontario. The Registrant was also reminded to update all their advertising to ensure compliance with the order.

Following this order, information was brought to the attention of the College suggesting that the Registrant was still practising as a naturopath

ICRC CORNER

and inappropriately using the protected titles “Doctor”, “Naturopath” and/or “ND” while their registration had been suspended.

A formal investigation was launched and was given to a panel of the ICRC (the Panel) for their review. The Panel was disappointed to learn that a Registrant, who they had dealt with in a previous matter, was before them again. Based on the results of the investigation into this matter, the Panel concluded that the Registrant had knowingly mislead the public and had not taken their obligation to comply with the order of the Discipline Committee seriously, therefore, putting the public at risk.

In determining an outcome, the Panel considered the allegations of professional misconduct to be very serious and found they had sufficient information to support the allegations of the matter. Additionally, the Panel took into consideration the aggravating and mitigating factors and the significant use of College resources. The Panel decided that it was in the public’s best interest to refer the matter to the Discipline Committee, so that a clear message could be sent about the importance of complying with orders.

2

Second matter: continuing to perform and/or supervise IVIT

In 2014, a Registrant of the College signed an undertaking and was ordered by a panel of the Discipline Committee to comply with the terms of that undertaking. One of the terms the Registrant agreed to, was to successfully complete the next available IV Therapy Certification course and the IV Therapy Examination prior to performing and/or supervising IV Therapy.

Following the signing of the undertaking, concerns that the Registrant was not complying with the terms of the undertaking, were brought to the attention of a Panel of the ICRC among a number of other issues, which resulted in a formal investigation. Based on the results of the investigation, the Panel was alarmed by the Registrant’s conduct, specifically that they offered to perform and/or supervise Intravenous

Therapy to multiple patients despite knowing they had not completed the necessary prerequisites to provide such services. The Panel was of the opinion that the Registrant blatantly disregarded the terms of their undertaking, therefore, putting themselves before the health and safety of their patients.

The Panel determined that they had a significant amount of evidence to support breach of the undertaking. It was concluded that in addition to the Registrant not prioritising the health and safety of their patients, that the nature of the misconduct also put the College’s ability to regulate its Registrants and protect the public at risk. Therefore, the Panel decided to refer the matter to the Discipline Committee.

Third matter: failure to complete inspection of patient records

In 2018, a Registrant of the College failed to comply with an order of the ICRC. In particular, the Registrant failed to complete an inspection of patient records as per the ICRC's Decision and Reasons. As a result of failing to comply with this order, the Chief Executive Officer (CEO) had reasonable and probable grounds to initiate a formal investigation.

The Panel had previously ordered that the Registrant undergo an inspection of patient records, as there were concerns that the Registrant may not have been maintaining their records in accordance with the Standard of Practice for Record Keeping of the College.

The Panel was extremely disappointed to learn that the Registrant had not completed the

inspection of patient records as ordered, as they believed they had clearly expressed their concerns to the Registrant, specifically, how inadequate records can compromise patient care.

The Panel considered all relevant information and determined that the Registrant's apparent failure to comply with their order was unacceptable. The Panel was concerned that the Registrant did not fulfil their professional responsibility and as a result, put their patients at risk. Additionally, they noted that the Registrant's non-compliance might jeopardize the public's confidence in the profession's ability to govern itself. The Panel decided it was in the best interest of the Registrant and the public, to refer the matter to the Discipline Committee.

The takeaway

The College and its Registrants have important roles to play in ensuring the best interests of the public are met. One of the most significant ways in which the College can act in the public's interest is by holding its Registrants accountable for their conduct and practice. Registrants on the other hand, have an obligation to conduct themselves in a manner that justifies public trust and confidence. Compliance with all governing legislation, standards of practice, policies, by-laws, guidelines, and orders given by a College Committee is essential to serving the public's interest, as well as maintaining the integrity of the profession.



Understanding the difference between the regulatory College and the professional associations

It is not often that you find something that most people can agree on. If there's one thing most regulated health professionals can find common ground on, it would be that the difference between respective regulatory authorities and their professional associations is not always easily understood.

The simplest way to differentiate the two comes down to the question "for whom does the organisation work?" Your professional association works and advocates for you, the

members of the profession. The regulatory authority—the College—works and advocates for the people of Ontario.

Need more clarification on the role of the College versus a professional association? The following table offers a number of examples of questions and who you should contact for more information, as well as an outline of the main differences between the College and the professional associations.

STUDENTS' CORNER

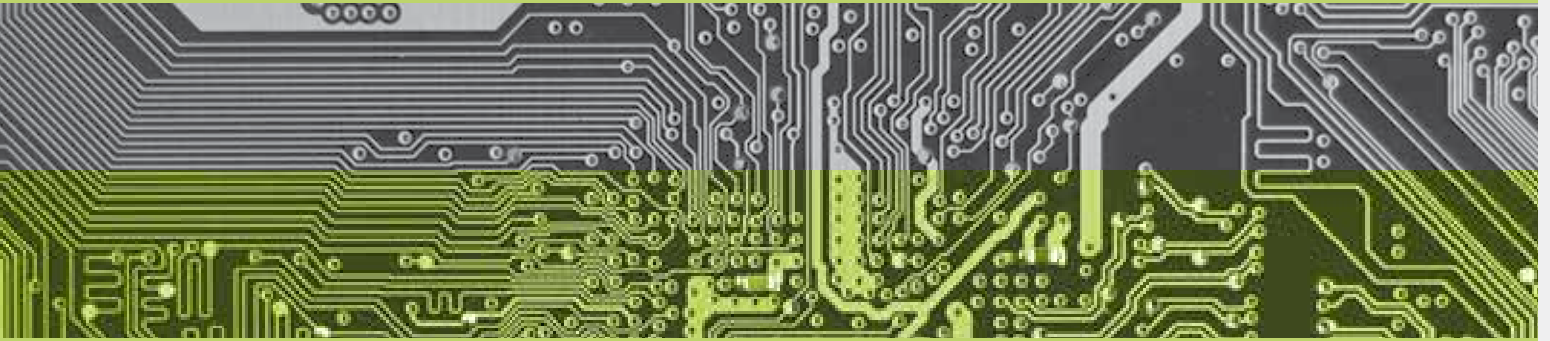
Query	Who you should contact
Where do I find the courses that have been approved for Category A continuing education credits?	The College
How many continuing education credits do I need if I am IVIT qualified?	The College
Where can I sign up for courses to get my continuing education credits?	Professional association
What is the amount of Professional Liability Insurance coverage that I need to have?	The College
Does my Professional Liability Insurance policy cover me for telepractice visits with patients located outside of Ontario?	Professional association (or your insurance provider if it is not purchased through the association)
What electronic records apps or software do you recommend?	Professional association
What laboratory tests can I order and from which lab?	The College
How can I access a supplier for a laminar air flow hood?	Professional association
I am moving to a new clinic, what are my obligations about notifying my patients?	The College
Is there a typical range for the consultation fee charged by naturopaths?	Professional association
Can I charge a markup on the supplements I sell from my dispensary?	The College
What am I supposed to charge HST on?	Professional association
I have had a request to provide a copy of a patient's records to a third party, what should I do?	The College

STUDENTS' CORNER

Regulatory authorities and professional associations have very distinct roles and mandates, both of which are required for the development of a profession. This chart points out the main differences between the two:

Regulatory Authority (the College)	Professional Associations
Acts in the interest of the public by ensuring naturopaths provide safe, competent and ethical care.	Acts in the interest of the profession by providing practice-based support and promoting the profession of naturopathy.
Required to have a complaints process to respond to Registrants who do not practise according to the set standards.	Does not have a member-based complaints process in place.
Governed by a Council of elected Registrants* (naturopaths) and government-appointed Public Members.	Governed by a Board of Directors consisting of naturopaths and possibly public members chosen by the membership at the Annual General Meeting.
Council meetings are mandated by law to be open to the public.	Board meetings of the Association are not legally required to be open to the public.
Registration is mandatory in order to use protected titles, perform controlled acts authorised to the profession and practice naturopathy in Ontario.	Membership is voluntary.
Naturopathic graduates become registered with the College having demonstrated they meet the legislated criteria.	Accepts members based on association-determined criteria.
Requires Registrants to participate in legislated quality assurance programs, such as continuing education and professional development.	Offers courses to its members (and non-member naturopaths) to support them in meeting the College's continuing education requirements.
Ensures minimum standards of practice are met for safe and competent service to the public.	Provides opportunities for members to access additional training and implement best practices.
Provides accessible information to the public regarding the profession, the registry of naturopaths authorised to practise in Ontario, expected practice standards, and the complaints process.	Provides accessible information to its members regarding professional development opportunities, changes in the professional field, and political developments that affect the profession. It also provides an online searchable list of its members.
Accountable to the public, the government and Registrants.	Accountable to its members.

*Although they are elected by College Registrants, Registrants elected to Council do not represent any Registrant or constituency. All Council members have a fiduciary duty to the College. They are required to make careful, good-faith decisions in the best interest of the organisation, consistent with the College's goal to protect the public.



The following fact sheet is a reprinted article earlier posted by the Information and Privacy Commissioner of Ontario in July 2020.

TECHNOLOGY FACT SHEET

Protect Against Phishing

Phishing is a common method hackers use to attack computer systems. Successful phishing attacks pose a serious threat to the security of electronic records and personal information.

Ontario's privacy laws require public and healthcare organizations to have reasonable measures in place to protect personal information in their custody or control.

Phishing attacks pose a serious threat to the security of electronic records and personal information

WHAT IS PHISHING?

Phishing is a type of online attack in which an attacker — using both technological and psychological tactics — sends one or more individuals an unsolicited email, social media post, or instant message designed to trick the recipient into revealing sensitive information or downloading malware.

Malware (malicious software) is any software intentionally designed to disrupt, damage, or gain unauthorized access to a computer system.

Phishing attacks can be generic or customized, and can target both individuals and entire organizations. Attacks that target a specific individual or organization are commonly referred to as spear phishing attacks.

The main goal of a phishing attack is to get the individual to do something that compromises the security of their organization. Attackers achieve this when recipients:

- reply to phishing emails with confidential information



- open email attachments that contain malware
- click on a link that leads to a fake website or page that installs malware
- enter usernames and passwords or other sensitive information on a fake website

IMPACTS OF PHISHING

The immediate effects of a successful phishing attack can include:

- unauthorized access to computer systems, networks and online accounts
- theft, loss and unauthorized use or disclosure of sensitive information, including personal information
- the destruction of or damage to records
- system failure and disruption of services

The effects of phishing are often not immediately apparent. Victims may not even be aware of an attack until the breach becomes more serious. Once the attacker gains access to confidential information, compromised accounts or computing devices, they may use other techniques to move throughout the network and collect more information. Ultimately, this can lead to crimes such as fraud, theft, or extortion.

Successful attacks can affect any organization, leading to negative consequences such as the loss of time, money, and reputation.

EXAMPLES OF PHISHING

Phishing attacks often imitate legitimate sources and work by exploiting people's trust, curiosity, fear, and desire to be helpful and efficient.

Phishing messages are often disguised as genuine messages and can include:

- emails that look like official work-related items, such as full mailbox notifications, spam quarantines, password reset alerts, building evacuation plans, benefits enrollment, invoices, and confidential documents
- emails about business-related topics such as shipping confirmations, wire transfer requests, invitations to download documents from cloud storage services or to access an online file-sharing service to retrieve, create, or edit a document
- emails that try to replicate offers or accounts that people already have, such as bank, income tax or frequent flyer accounts, photo tagging, social networking, gift card notifications, and online shopping security updates

The main goal of a phishing attack is to get the recipient to do something that compromises the security of their organization

Phishing attacks imitate legitimate sources and exploit people's trust, curiosity, fear and desire to be helpful and efficient

HOW TO RECOGNIZE PHISHING MESSAGES

Phishing messages can range from very basic to highly sophisticated. Common “red flags” include (see illustration on page 7):

- Suspicious sender or reply-to address: always treat messages from unknown or unfamiliar senders or accounts with extra caution.
- Unexpected message: messages from recognized senders that are unrelated to normal communications or job responsibilities can signal an account has been compromised or is fake.
- Suspicious attachment: messages with unexpected or unusual attachments can contain malware.
- Suspicious link: messages that encourage recipients to click and follow embedded hyperlinks may point to websites unrelated to the message and under the control of the attackers.
- Poor spelling: spelling and grammar errors may indicate a phishing attack since legitimate organizations typically avoid these mistakes in their communications.

Messages with unexpected or unusual attachments can contain malware

HOW TO PROTECT AGAINST PHISHING ATTACKS

You can protect your organization from phishing attacks by adopting the following best practices.

- Filter incoming messages: ensure that your IT systems screen incoming messages to reduce spam and other unwanted content. “Anti-spoofing” controls can verify the authenticity of senders and make it difficult for attackers to hit their target.
- Install malware detection and filters: your IT systems should automatically block or quarantine messages that contain viruses, ransomware or other malicious code. Use software that prevents, detects, and removes malware and performs real-time scans.
- Keep browsers and other software up to date: malicious attachments and malware often exploit security vulnerabilities made possible by outdated browsers and other software. Ensure that your IT staff regularly update all software and operating systems if it is not possible to set up automatic updates.
- Lock down workstations: hackers can exploit computers that allow software to be installed and settings to be configured by individual users. Restrict or disable administrative rights for normal users and limit the number of computers or accounts with high-level privileges or access to sensitive information. Individuals with high-level privileges should not share accounts or use them for non-work purposes.

- Require employees to use unique, complex passwords: the reuse of stolen passwords is a major phishing threat. Stronger authentication methods, such as one-time password tokens, cryptographic credentials, or biometric traits should be required for system administrators, users that handle sensitive information, and users with remote access to corporate resources.
- Identify external messages: you can detect phishing messages more easily if all external messages are clearly labeled as coming from outside the organization with a prominent message.

CAUTION: EXTERNAL MAIL. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS YOU DO NOT TRUST

- Segment networks that contain sensitive data from other networks. You can limit the impact of compromised computers and accounts by restricting their access to other networks or systems. For example, public-facing webmail servers should be isolated from intranet systems or human resources databases.
- Use threat intelligence and endpoint protection tools. Advanced tools can detect, and in some cases, prevent attackers from gaining a foothold inside your network by flagging unusual patterns of system behaviour, such as irregular login attempts and large file downloads.
- Enable encryption on documents, devices, and databases that contain sensitive information, by default, to provide an extra layer of defence against unauthorized access, use, and disclosure by attackers.
- Conduct regular phishing awareness and training. Send simulated phishing attacks to employees to test their awareness and knowledge of how to respond. Routine tests raise awareness of security issues and help identify employees who need additional training.
- Enable users to report phishing and to request help. Organizations benefit from real-time feedback from employees on phishing threats. Make it easy for all your employees to report suspected phishing messages, and to request and get help in case of a possible attack.

Employees are often the last line of defence against phishing attacks. Awareness and training can and does improve security. In your guidance, include information about phishing red flags and instructions on how to manage suspicious messages.

Detecting phishing messages is easier if all external messages are clearly labeled

Enable users to report phishing and to request help

- Verify the sender by carefully examining the “From” address, which should be consistent with the display name and the context of the message. For example, an email message claiming to be from a bank should not have an “xbox.com” address domain (the domain is everything after the @). Some phishing attacks use a sender’s email address that is similar to, but not the same as, an organization’s official email address. An example would be “omtario.ca” instead of “ontario.ca.”
- Do not provide usernames, passwords, or other access codes in response to an email request or unsolicited popup windows. Legitimate organizations never ask for this information via email and only collect it through their official websites or applications. When in doubt, follow up with the sender by phone.
- Do not open suspicious file attachments. If you receive an unexpected attachment, contact the sender (preferably by phone) to confirm that the attachment is legitimate. If you cannot confirm its legitimacy, report the attachment to your IT department, or delete it.
- Never click on suspicious links. Hover your mouse over parts of the message without clicking on anything. If the underlying hyperlink looks strange or does not match what the link description says, do not click on it — report it. Note that images can also contain suspicious links.
- Do not respond to suspicious or unwanted messages. Attackers benefit from learning more about potential targets. For example, asking to have an email address removed from a malicious party’s mailing list confirms that email is active, potentially leading to additional attacks. Downloading missing images confirms that the message was viewed. The best practice is to flag the message as spam or delete it.
- Report suspicious messages. When you receive a suspicious message, and especially if you click on questionable links or attachments, notify your IT department immediately. The IT department can confirm the threat and take action to minimize any risks to your organization.

Good planning and design can minimize risk and ensure that individual privacy is protected

Never click on suspicious links

RESPONDING TO PHISHING INCIDENTS

You should have a detailed incident response plan, which outlines how your organization will respond to a suspected data breach or cyberattack. A good incident response plan will help limit potential damage and ensure a swift return to normal operations.

Your plan should:

- designate key senior management, IT and legal staff contacts as part of the response team, and specify how each staff member will respond when incidents are reported

- identify potential threats. The plan should seek to quickly capture key evidence to determine the scope and severity of the threat. This may involve careful analysis of the phishing message, any attachments or embedded links, and the behavior of your staff and computer networks.
- prescribe steps to contain and remove any threats. Depending on the nature of the threat, your plan may include the following remedial measures:
 - o disconnect infected computers from operational networks
 - o change employee usernames and passwords
 - o purge copies of infected messages or files from inboxes or servers
 - o reinstall “clean” software or restore files from backup
 - o heighten monitoring of computer and network activity
 - o notify staff and report the incident to external parties (law enforcement, professional bodies, insurance companies)
 - o update your preventative measures to address the weakness in security exposed by the incident.

You should communicate the incident response plan throughout your organization and practice it regularly so that when incidents occur, response will be quick and effective.

If a successful phishing attack has occurred, public and healthcare organizations should contact the Office of the Information and Privacy Commissioner of Ontario for advice and further guidance. You can reach us at 1-800-387-0073 or info@ipc.on.ca.

For information on protecting your organization from privacy and security breaches, and for guidance on responding to breaches, visit our website at www.ipc.on.ca

ADDITIONAL RESOURCES

- **Canadian Anti-Fraud Centre - Phishing**
- **Canadian Radio-Television and Telecommunications Commission (CRTC) – How to protect yourself from scammers**
- **Ontario Consumer Protection - Report a scam or fraud**



COMMON PHISHING “RED FLAGS”

FROM:

- The email appears to be sent from **someone inside the organization** and is **very unusual or out of character**
- The sender’s email address is **from a suspicious domain**

TO:

- The email was sent to a group of people, but you **don’t personally know** the other people it was sent to
- The email was sent to an **unusual mix of people**. For example, a seemingly random group of people at your organization whose names start with the same letter

SUBJECT:

- Subject line is **irrelevant, has bad grammar, poor spelling, or does not match** the message content

From: "Executive" <no-reply@Omtario.ca>
To: "You", "Yousef", "Yasmin", "Yves", "Yvonne"
Date: Sunday June 12, 3:01am
Subject: My money got stolen

Hi, I'm on vacation in London and my money and passport were stolen out of my bag. Could you wire me \$300 via Western Union? They gave me a special link so this goes right into my account and I can buy a ticket home:

[Click here](#) --> <http://www.western-onion.com/jhvfz9oq.exe>

Thanks so much, this really helps out!

Your CEO



DATE:

- Email was **sent outside of regular business hours, or at an unusual time**

ATTACHMENTS:

- Message includes an attachment that **you were not expecting** or that **makes no sense** in relation to the email message

CONTENT:

- Sender is asking you to click on a link or open an attachment to **avoid a negative consequence** or to **gain something of value**

HYPERLINKS:

- When you hover your mouse over a hyperlink in the email message, the **link to address is for a different website**
- Email has a **hyperlink that is a misspelling** of a known website

NEWS AND EVENTS

Upcoming Exam Dates

February 21, 2021

Ontario Clinical Practical Exams

Registration Opens December 15, 2020

February 11, 2021

Ontario Clinical Sciences Exam

Registration Closes December 10, 2020

March 9, 2021

Ontario Biomedical Exam

Registration Opens January 7, 2021

Exam cancellation watch

The 2021 exam schedules for all College examinations have been posted. Those seeking to sit one or more examinations in 2021 are cautioned to monitor College notifications and communications as some examinations may need to be cancelled out of necessity due to COVID-19. If a cancellation is imminent or has occurred, the notification on the website will be updated from a “watch” to a “warning”. If the College is required to cancel an examination after registration for that session has occurred, candidates will be refunded their examination fee. Wherever possible, we will try to offer an alternative date as soon as possible, and that information will be posted on our website.

Next Council meeting

January 27, 2021. Meetings are open to the public and College Registrants. Please register in advance if you would like to attend. This meeting will be held via Zoom videoconferencing.

New Publications

Read our Annual Report 2019–2020. In a hurry? Read the 1-page infographic summary.



Read our latest blog posts!

Professional vs. Personal Opinions— Being cautious in these troubled times

Providing immune support to patients during COVID-19

