



The College of Naturopaths of Ontario

# **Council of the College of Naturopaths of Ontario**

## **Meeting #37**

## **Draft Agenda**

Date: September 27, 2023 (2023/24-03)

Time: 9:15 a.m. to 12:15 p.m.

Location: Omni King Edward<sup>1</sup>  
37 King Street E.  
Toronto, ON M5C 1E9

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<sup>1</sup> Pre-registration is required.

**Excerpt from the Health Professions Procedural Code  
Regulated Health Professions Act.**

COLLEGE

**College is body corporate**

2. (1) The College is a body corporate without share capital with all the powers of a natural person.

***Corporations Act***

(2) The *Corporations Act* does not apply in respect to the College. 1991, c. 18, Sched. 2, s. 2.

**Duty of College**

2.1 It is the duty of the College to work in consultation with the Minister to ensure, as a matter of public interest, that the people of Ontario have access to adequate numbers of qualified, skilled and competent regulated health professionals. 2008, c. 18, s. 1.

**Objects of College**

3. (1) The College has the following objects:

1. To regulate the practice of the profession and to govern the members in accordance with the health profession Act, this Code and the *Regulated Health Professions Act, 1991* and the regulations and by-laws.
2. To develop, establish and maintain standards of qualification for persons to be issued certificates of registration.
3. To develop, establish and maintain programs and standards of practice to assure the quality of the practice of the profession.
4. To develop, establish and maintain standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement among the members.
  - 4.1 To develop, in collaboration and consultation with other Colleges, standards of knowledge, skill and judgment relating to the performance of controlled acts common among health professions to enhance interprofessional collaboration, while respecting the unique character of individual health professions and their members.
5. To develop, establish and maintain standards of professional ethics for the members.
6. To develop, establish and maintain programs to assist individuals to exercise their rights under this Code and the *Regulated Health Professions Act, 1991*.
7. To administer the health profession Act, this Code and the *Regulated Health Professions Act, 1991* as it relates to the profession and to perform the other duties and exercise the other powers that are imposed or conferred on the College.
8. To promote and enhance relations between the College and its members, other health profession colleges, key stakeholders, and the public.
9. To promote inter-professional collaboration with other health profession colleges.
10. To develop, establish, and maintain standards and programs to promote the ability of members to respond to changes in practice environments, advances in technology and other emerging issues.
11. Any other objects relating to human health care that the Council considers desirable. 1991, c. 18, Sched. 2, s. 3 (1); 2007, c. 10, Sched. M, s. 18; 2009, c. 26, s. 24 (11).

**Duty**

(2) In carrying out its objects, the College has a duty to serve and protect the public interest. 1991, c. 18, Sched. 2, s. 3 (2).



The College of Naturopaths of Ontario

**COUNCIL MEETING #37**  
**September 27, 2023**  
**9:00 a.m. to 12:00 p.m.**  
**DRAFT AGENDA**

Sect/No.	Action		Item		Page	Responsible	
0	Pre-Meeting Networking (8:00 am to 9:00 am)						
		Networking	Information networking for Council members and breakfast.			--	All
1	Call to Order and Welcome						
	1.01	Procedure	Call to Order			--	J Sokoloski
	1.02	Discussion	"High Five" – Process for identifying consensus			4	J Sokoloski
2	Consent Agenda <sup>1</sup>						
	2.01	Approval	i.	a) Draft Minutes of July 27, 2023		5-11	J Sokoloski
			ii.	b) In-camera Minutes of July 27, 2023 <sup>2</sup>		12-13	
			iii.	Committee Reports		14-29	
			iv.	Information Items		30-63	
3	Main Agenda (9:20 am)						
	3.01	Approval	Review of Main Agenda			3	J Sokoloski
	3.02	Discussion	Declarations of Conflict of Interest			64-65	J Sokoloski
4	Monitoring Reports						
	4.01	Acceptance	Report of the Council Chair			66	J Sokoloski
	4.02	Acceptance	Report on Regulatory Operations			67-76	A Parr
5	Council Governance Policy Confirmation						
	5.01	Discussion	Review/Issues Arising		--	J Sokoloski	
			i.	Council-CEO Linkage Policies			
			ii.	Governance Process Policies			
			iii.	Ends Policies			
	5.02	Decision	Detailed Review Executive Limitations Policies (Part 2)			77-81	
6	Regular Business						
	6.01	Approval	Appointment of Auditors of next fiscal year			--	B Dyson
	6.02	Approval	Unaudited Financial Statement at Q1			82-90	A Kupny
	6.03	Approval	Committee Appointment			91	T. Lloyd
7	Council Education						
	7.01	Education	Council Governance Model			--	J. Sokoloski & B. Sullivan
	7.02	Education	Council Processes			--	A Parr
8	Other Business						
	8.01	TBD				--	J Sokoloski
9	Evaluation and Next Meeting						
	9.01	Discussion	Meeting Evaluation			On-line	J Sokoloski
	9.02	Discussion	Next Meeting – November 30, 2023			--	J Sokoloski
10	Adjournment						
	10.01	Decision	Motion to Adjourn			--	J Sokoloski

<sup>1</sup> Members of Council may request any item in the Consent Agenda to be added to the main agenda.

<sup>2</sup> In-camera minutes are redacted from the materials being released publicly for the Council meeting.



The College of Naturopaths of Ontario

**In-person Meeting  
Council of the College of Naturopaths of Ontario**

**Using “High Five” to Seek Consensus**



We will, at times, use this technique to test to see whether the Council has reached a consensus.

When asked you would show:

- 1 finger – this means you hate it!
- 2 fingers – this means you like it but many changes are required.
- 3 fingers – this means I like it but 1-2 changes are required.
- 4 fingers – this means you can live with it as is.
- 5 fingers – this means you love it 100%.

In the interests of streamlining the process, for virtual meetings, rather than showing your fingers or hands, we will ask you to complete a poll.

Image provided courtesy of Facilitations First Inc.

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The College of Naturopaths of Ontario

**Council Meeting  
July 26, 2023**

**Video Conference  
DRAFT MINUTES**

<b>Council</b>		
<b>Present</b>		<b>Regrets</b>
Dr. Shelley Burns, ND (2:2)		Dr. Jonathan Beatty, ND (0:2)
Mr. Dean Catherwood (2:2)		Mr. Brook Dyson (1:2)
Ms. Lisa Fenton (2:2)		
Dr. Anna Graczyk, ND (1:2)		
Ms. Sarah Griffiths-Savolaine (2:2)		
Ms. Tiffany Lloyd (1:2)		
Dr. Denis Marier, ND (2:2)		
Mr. Paul Phillion (1:2)		
Dr. Jacob Scheer, ND (2:2)		
Dr. Jordan Sokoloski, ND (2:2)		
<b>Staff Support</b>		
Mr. Andrew Parr, CAE, CEO		
Ms. Agnes Kupny, Director of Operations		
Ms. Erica Laugalys, Director, Registration & Examinations		
Ms. Monika Zingaro, Administration Coordinator		
<b>Guests</b>		
Ms. Rebecca Durcan, Legal Counsel		
Mr. Thomas Kriens, Auditor		
Ms. Sandi Verrecchia, Satori Consulting		

### 1. Call to Order and Welcome

The Chair, Dr. Jordan Sokoloski, ND, called the meeting to order at 9:16 a.m. He welcomed everyone to the meeting.

The Chair also noted that the meeting was being live streamed via YouTube to the College's website.

### 2. Consent Agenda

#### 2.01 Review of Consent Agenda

The Consent Agenda was circulated to members of Council in advance of the meeting. The Chair asked if there were any items to move to the main agenda for discussion. There were none.

MOTION:	To approve the Consent Agenda as presented.
MOVED:	Sarah Griffiths-Savolaine
SECOND:	Jacob Scheer
CARRIED.	

### 3. Main Agenda

#### 3.01 Review of the Main Agenda

A draft of the Main Agenda, along with the documentation in support of the meeting had been circulated in advance of the meeting. The Chair asked if there were any items to be added to the agenda. Item 9.01 – Health Canada NHP Changes was added to the agenda. In addition, Items 6.01 and 6.02 were switched, Item 5.03 was reworded to GP20 – Commitment to Strategic Planning and Item 8.01 was reworded to read as 'To move into the in-camera session'.

MOTION:	To approve the Main Agenda as amended.
MOVED:	Shelley Burns
SECOND:	Tiffany Lloyd
CARRIED.	

#### 3.02 Declarations of Conflicts of Interest

The Chair reminded the Council members of the updated Declarations of Conflict-of-Interest process. A summary of the Annual Conflict of Interest Questionnaires completed by Council members has been included to increase transparency and accountability initiatives, and to align with the College Performance Measure Framework Report (CPMF) launched by the Ministry of Health.

Dr. Denis Marier, ND, requested clarification about declaring a conflict, Ms. Rebecca Durcan, Legal Counsel, and Mr. Andrew Parr, CEO, provided a detailed explanation to all Council members.

#### 4. Monitoring Reports

##### 4.01 Report of the Council Chair

The Report of the Council Chair was circulated in advance of the meeting. The Chair reviewed the report briefly with Council. He welcomed and responded to questions from the Council.

MOTION:	To accept the Report of the Council Chair as presented.
MOVED:	Lisa Fenton
SECOND:	Tiffany Lloyd
CARRIED.	

##### 4.02 Report on Regulatory Operations from the Chief Executive Officer (CEO)

The Report on Regulatory Operations from the CEO was circulated in advance of the meeting. Mr. Parr provided highlights of the report and responded to questions that arose during the discussion that followed.

MOTION:	To accept the Report on Regulatory Operations from the CEO.
MOVED:	Jacob Scheer
SECOND:	Dean Catherwood
CARRIED.	

##### 4.03 Report on Operations – Year End Report

The Report on Operations – Year End Report was included within the materials distributed in advance of the meeting. Mr. Parr provided a thorough review of the Report and explained the information contained within the Report, highlighting the key performance indicators and whether the strategic objectives were met. He responded to questions that arose during the discussion that followed.

MOTION:	To approve the Operating Report – Year End Report from the CEO.
MOVED:	Sarah Griffiths-Savolaine
SECOND:	Denis Marier
CARRIED.	

##### 4.04 Annual Statutory Committee Reports

The annual Committee Reports submitted by each statutory Committee Chair were distributed in advance of the meeting. The Chair presented the Reports and Mr. Parr responded to any questions that arose during the discussion.

MOTION:	To accept the annual Committee Reports as presented.
MOVED:	Dean Catherwood

SECOND:	Paul Phillion
CARRIED.	

## **5. Council Governance Policy Confirmation**

### **5.01 Review/Issues Arising**

#### **5.01(i) Ends Policies Policies**

Council members were asked if they had any questions or matters to note with respect to the Council-CEO Linkage policies based on the reports received. No issues were noted at this time.

#### **5.01(ii) Council-CEO Linkage Policies**

Council members were asked if they had any questions or matters to note with respect to the Governance Process policies based on the reports received. No issues were noted at this time.

#### **5.01(iii) Governance Process Policies**

Council members were asked if they had any questions or matters to note with respect to the Ends policies based on the reports received. No issues were noted at this time.

### **5.02 Detailed Review (as per GP08) – Executive Limitations Policies (Part 1)**

Council members were asked if there were any members who wished to discuss the Executive Limitations Policies (Part 1). The Chair provided a detailed overview of the amendments being presented as outlined in the Memorandum included within the Council's package and responded to any questions that arose during the discussion.

MOTION:	To accept the recommendations of the Governance Policy Review Committee.
MOVED:	Lisa Fenton
SECOND:	Tiffany Lloyd
CARRIED.	

### **5.03 GP20 – Commitment to Strategic Planning – Amendments**

Council members were asked if there were any members who wished to discuss the proposed amendments to GP20 – Commitment to Strategic Planning. The Chair provided a detailed overview of the amendments being presented as outlined in the Memorandum included within the Council's package and responded to any questions that arose during the discussion.

After a detailed discussion, the Council requested to have this policy reviewed by the Governance Policy Review Committee again and brought back to the Council at the September 2023 meeting.

## **6. Business**

### **6.01 Auditor's Report and Audited Statements – Fiscal Year 2022-2023**

The Chair invited Mr. Thomas Kriens, Partner at Kriens~LaRose, LLP and Auditor, to present the Auditor's Report and the Audited Financial Statements to Council. Mr. Kriens presented his report and responded to questions that were brought forward from Council members.



MOTION:	To accept the Auditor's Report and approve the Audited Financial Statements for the period April 1, 2022, to March 31, 2023, as presented.
MOVED:	Paul Phillion
SECOND:	Dean Catherwood
CARRIED.	

The Chair thanked Mr. Kriens for presenting the reports to Council.

#### **6.02 Audit Committee Report on the 2022-2023 Audit**

A copy of the Audit Committee Report on the audit for the fiscal year April 1, 2022, to March 31, 2023, was circulated in advance of the meeting. Paul Phillion, Audit Committee member, reviewed the report with the Council members and responded to any questions that arose during the discussion.

MOTION:	To accept the Audit Committee Report as presented.
MOVED:	Lisa Fenton
SECOND:	Ms. Sarah Griffiths-Savolaine
CARRIED.	

#### **6.03 IVIT Examinations Blueprint – Proposed Amendments**

A Briefing Note and corresponding documentation highlighting the proposed changes to the IVIT Examinations Blueprint were circulated in advance of the meeting. Dr. Shelley Burns, ND, Registration Committee Vice Chair, on behalf of Dr. Danielle O'Connor, ND, Chair, Registration Committee, provided a detailed overview of the amendments and responded to any questions that arose during the discussion.

MOTION:	To approve the proposed changes to the IVIT Examination Blueprint as presented.
MOVED:	Paul Phillion
SECOND:	Jacob Scheer
CARRIED.	

### **7. Council Education**

#### **7.01 Council & Committee Evaluations – Update**

Ms. Sandi Verrecchia, of Satori Consulting Inc., provided the Council with a detailed summary of the Council's evaluation and highlighted the changes from the previous year's results and responded to any questions that arose during the discussion.

### **8. In-camera Session (Pursuant to paragraph (d) of section 7(2) of the HPPC)**

#### **8.01 Motion to Begin In-camera Session**

The Chair called the meeting to move to an in-camera session at 10:44 a.m.

MOTION:	To move to an in-camera session pursuant to paragraph (d) of section 7(2) of the Health Professions Procedural Code as the Council will be discussing personnel matters.
MOVED:	Denis Marier
SECOND:	Tiffany Lloyd
CARRIED.	

## 9. Other Business

### 9.01 Health Canada NHP Changes

Mr. Parr provided an overview of the various activities of the federal government relating to natural health products. He informed the Council member he has spoken with the CEOs of each of the OAND and CAND and that he was advised that currently this is not a regulatory matter and that they would reach out to the College should it be required. He responded to any questions during the discussion.

## 10. Meeting Evaluation and Next Meeting

### 10.01 Evaluation

The Chair advised the Council members that a link will be provided within the chat feature via Zoom for each member to copy and paste into a web browser to complete an evaluation form immediately following the end of the meeting.

### 10.02 Next Meeting

The Chair noted for the Council that the next regularly scheduled meeting is set for September 26 and 27, 2023. It was also noted that this two-day meeting would be in-person taking place downtown Toronto. Mr. Parr provided some detailed information in relation to the upcoming Council meeting.

## 11. Adjournment

### 11.01 Motion to Adjourn

The Chair asked for a motion to adjourn the meeting. The meeting adjourned at 11:56 a.m.

MOTION:	To adjourn the meeting.
MOVED:	Denis Marier
SECOND:	Paul Phillion

Recorded by: Monika Zingaro  
Administration Coordinator  
July 26, 2023



The College of Naturopaths of Ontario

Action Items List  
Council Meeting of July 26, 2023  
Meeting No. 36

Item #	Item	Description	Status
36.01	Executive Limitation Policies (Part 1)	Update the corresponding policies as presented and upload to Smartsheet and to the College's website.	Complete
36.02	Auditor's Report and Audited Statements – Fiscal Year 2022-2023	Upload the accepted Auditor's Report and Audited Statements for Fiscal Year 2022-2023 to the College's website.	Complete
36.03	Annual Statutory Committee Reports	Upload the accepted Annual Reports for 2022-2023 to the College's website.	Complete
36.04	IVIT Exam Blueprint	Update the IVIT Exam Blueprint as presented and upload to the College's website.	Complete



The College of Naturopaths of Ontario

**Minutes Redacted**

The Council moved to an in-camera session to discuss materials pursuant to paragraph (2) of section 7(2) of the Health Professions Procedural Code, Schedule 2 of the *Regulated Health Professions Act, 1991*. The minutes of that portion of the meeting are also protected under the same authority and have therefore been redacted from the Council meeting materials being disclosed.



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# MEMORANDUM

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**DATE:** September 27, 2023

**TO:** Members of Council

**FROM:** Andrew Parr, CAE  
Chief Executive Officer

**RE:** Committee Reports

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Please find attached the Committee Reports for item 2.01 (iii) of the Consent Agenda. The following reports are included:

1. Audit Committee.
2. Examination Appeals Committee.
3. Executive Committee.
4. Inquiries, Complaints and Reports Committee.
5. Governance Committee.
6. Patient Relations Committee.
7. Quality Assurance Committee.
8. Registration Committee.
9. Discipline Committee.
10. Inspection Committee.
11. Governance Policy Review Committee.
12. Standards Committee.
13. Equity, Diversity and Inclusion Committee.

In order to increase the College's accountability and transparency, all Committee Chairs were asked to submit a report, even if the Committee had not met during the reporting period. Please note the Discipline/Fitness to Practise Committee Chair was not required to submit a report in order to preserve the independent nature of these Committees; however, the Chair has voluntarily provided a report for Council's information.



The College of Naturopaths of Ontario

## **AUDIT COMMITTEE REPORT**

July 1, 2023 – August 31, 2023

During the reporting period the Audit Committee convened on July 12, 2023 to review and accept the Auditor's Report and draft Financial Statements for fiscal year April 1, 2022 to March 31, 2023, from Kriens-LaRose LLP. The Auditor, Thomas Kriens, *CPA, CA, LPA*, BBM, Partner NPO Audit was in attendance at this meeting to present the results of the audit. The Auditor's Report, Financial Statements and Audit Committee's recommendation were presented to Council on July 26, 2023.

Brook Dyson  
Chair  
Audit Committee  
September 14, 2023



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## **EXAM APPEALS COMMITTEE CHAIR REPORT**

July 1 - August 31, 2023

The Committee meets on an as-needed basis, based on received exam appeals, those that would require deliberation and decision, or needed appeals-related policy review.

The Exam Appeals Committee did not meet during the July 1 through August 31 reporting period.

Thank you,

Rick Olazabal, ND (Inactive)

Chair

Exam Appeals Committee

September 6, 2023





The College of Naturopaths of Ontario

## **EXECUTIVE COMMITTEE REPORT**

September 2023

This serves as the Chair report of the Executive Committee for the period of July 1 to August 31, 2023.

During the reporting period the Executive Committee was not required to undertake any activities, and therefore did not convene.

Respectfully submitted,

Dr. Jordan Sokoloski, ND

Council Chair

18 September 2023



The College of Naturopaths of Ontario

## **INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT**

September 2023

Between July 1 and August 31, 2023, the Inquiries, Complaints and Reports Committee held two regular online meetings – July 6 and August 3.

July 6, 2023: 11 matters were reviewed, ICRC members drafted 4 reports for ongoing investigation, and approved 1 Decision and Reasons.

August 3, 2023: 8 matters were reviewed. ICRC members drafted 3 reports for ongoing investigations and approved 1 Decision and Reasons. An Oral Caution was also delivered to a registrant prior to the meeting.

Dr. Kim Bretz ND has stepped down from the ICRC and we would like to acknowledge her commitment and valuable contribution over the years. Her presence will be missed by all of the ICRC members.

Meetings continue to be well-attended and productive in the online format.

Dr. Erin Psota, ND  
Chair  
September 7<sup>th</sup>, 2023



The College of Naturopaths of Ontario

## **GOVERNANCE COMMITTEE CHAIR REPORT**

September 2023

The Governance Committee did not meet during the July 1, 2023 – August 31, 2023 reporting period.

As of the writing of this report, the Committee is scheduled to meet again on September 14, 2023.

Respectfully submitted,

Hanno Weinberger, Chair  
September 2023



The College of Naturopaths of Ontario

## **PATIENT RELATIONS COMMITTEE CHAIR REPORT**

July 1, 2023 – August 31, 2023

During the reporting period of July 1, 2023 – August 31, 2023, the Patient Relations Committee did not have a meeting scheduled. As per the Committee schedule, staff provided an electronic update on the amount of funding for therapy/counselling accessed to date.

The Committee's next scheduled meeting update is November 15, 2023.

Thank you,

Dr. Gudrun Welder, ND  
Chair September  
2023

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## QUALITY ASSURANCE COMMITTEE REPORT September 2023

### Meetings and Attendance

Since the date of our last report to Council in July, the Quality Assurance Committee has met on one occasion, via teleconference, on August 22<sup>nd</sup>. There was no concern regarding quorum.

### Activities Undertaken

At the August meeting, the Committee continued with its regular ongoing review and approval, where appropriate, of new and previously submitted CE category A credit applications.

Additionally, the Committee received a presentation from Sandi Verrecchia of Satori Consulting on the results of the evaluation of the Committee's performance for the past year. Committee members were generally satisfied with the results and discussed areas that could be improved to further enhance the Committee's work.

The Committee also reviewed and made decisions with respect to two CE Reporting Extension/Amendment requests, as well as two Peer and Practice Assessment Timeline Extension requests.

### Next Meeting Date

September 19, 2023.

Respectfully submitted by,

Barry Sullivan, Chair,  
September 14, 2023



The College of Naturopaths of Ontario

## REGISTRATION COMMITTEE REPORT (September 2023)

*At the time of this report, the Registration Committee met on July 19th and August 23rd.*

### **Applications For Registration**

The Committee reviewed applications for registration to determine eligibility for registration in Ontario under section 15(2)(a) of the Health Profession's Procedural Code (the Code). Grounds for referral included applicant good character (s.3(2) of the Registration Regulation), and currency to practise the profession (s.5(2)(b) and 5(4)(a) of the Registration Regulation).

### **Currency Audit Remediation**

The Committee continued to review and approve proposed refresher programs of training for General class Registrants who had not met practise hour requirements, as set out in 6(1) of the Registration Regulation and the Registration Policy.

### **Exam Remediation- Unsuccessful Exam Attempts**

The Committee also continued to set plans of remediation for candidates who had made two unsuccessful attempts at an examination. In this reporting period the Committee set plans of remediation related to the Ontario Clinical Sciences Exam (for entry to practise) and the Ontario Prescribing and Therapeutics examination (for meeting the post-registration Standard of Practise for Prescribing).

### **Policy Amendments**

Draft amendments to the Registration Policy, specifically related to currency, were reviewed and approved by the Committee in order to facilitate a consultation on the proposed draft changes this fall.

### **Exam Blueprint Amendments**

Draft amendments to the IVIT Examination Blueprint were reviewed and approved by the Committee (approved by Council in July 2023).

### **Committee Self-Evaluation**

The Committee met with Sandi Verrecchia of Satori Consulting to discuss the results of the Committee's annual self-evaluation.

Danielle O'Connor, ND  
Chair  
Registration Committee  
August 29, 2023

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## DISCIPLINE COMMITTEE REPORT

September 2023

*The Discipline Committee (DC) is independent of Council and is not obligated to submit bimonthly reports addressing matters of importance to the Committee. However, in the interest of transparency and to acknowledge Committee members' involvement in the discipline process, the Chair is pleased to provide this report to Council.*

This report is for the period from 1 July to 31 August 2023 and provides a summary of the hearings held during that time as well as any new matters referred by the Inquiries, Complaints and Reports Committee (ICRC) of the College. Committee meetings and training are also reported.

### Overview

As of August 31, 2023, there were two ongoing matters before the Committee (DC22-04, 22-05) and a Panel was working on its Decisions and Reasons for one completed hearing (22-06).

### Discipline Hearings

#### CONO vs. Colbran Marjerrison (DC22-06)

The following members of the Discipline Committee were appointed to a panel to hear the above-noted matter referred to the DC by the ICRC on 5 October 2022:

Dr. Jacob Scheer, ND - Chair  
 Dr. Denis Marier, ND  
 Dean Catherwood  
 Tiffany Lloyd

The Panel held a one-day uncontested hearing on 9 August 2023 and imposed an order:

1. Requiring the Registrant to appear before the panel to be reprimanded immediately following the hearing of this matter.
2. Directing the Chief Executive Officer ("CEO") to revoke the Registrant's certificate of registration effective immediately.
3. Requiring the Registrant to reimburse the College for funding for therapy and counseling provided to the Patient under the program required under section 85.7 of the Code, up to the maximum allowable amount of \$17,370.00.
4. Requiring the Registrant to pay costs to the College in the amount of \$7,5000.00 on a schedule to be determined by the CEO.

The Panel is finalizing its Decision and Reasons in this matter.

### **New Referrals**

No new referrals were made to the Discipline Committee from the ICRC during the reporting period.

### **Committee Meetings and Training**

There were no Committee meetings held during the reporting period.

Respectfully submitted,  
Dr. Jordan Sokoloski, ND, Chair  
18 September 2023





The College of Naturopaths of Ontario

## INSPECTION COMMITTEE REPORT July-August 2023

### Committee Update

Since the last update to Council, the Inspection Committee had one teleconference meeting on August 24, 2023.

### Inspection Outcomes

The Committee reviewed the Inspection Program Requirements Checklists used by the inspectors to record their observations during the inspections, and their Inspector's Reports for 13 premises.

The outcomes were as follows:

- Part I
  - 2 passes with 1 recommendation (in total)
  - 1 pass with 2 conditions and 13 recommendations (in total)
- Part II
  - 1 pass with 8 recommendations
  - 1 pass with 1 condition and 0 recommendations
  - 1 pass with 4 conditions and 19 recommendations (in total)
- Existing 5 Year Inspections
  - 3 passes with 9 recommendations (in total)
  - 2 passes with 1 condition and 15 recommendations (in total)
  - 2 passes with 2 conditions and 23 recommendations (in total)
- Fail
  - 0

Inspection outcomes in response to submissions received for outcomes of a pass with conditions:

- There were two Part I new premises, three Part II new premises, and two 5-year existing premises that made submissions, all had a final outcome of a pass.

### Type 1 Occurrence Reports

- There was one Type 1 occurrence reports which was a referral of a patient to emergency services within the five days following an IVIT. The Inspection Committee determined that no follow-up was required for the reporting premises.

### **Closing Remarks**

Sandi Verrecchia from Satori Consulting attended the meeting to facilitate a discussion on the evaluation of the Committee's performance over the previous year. The Committee was satisfied with the evaluation report and feels that it is a well functioning committee.

Best regards,

Submitted by Mary-Ellen McKenna on behalf of  
Dr. Sean Armstrong, ND  
Chair, Inspection Committee  
September 19, 2023



The College of Naturopaths of Ontario

**Governance Policy Review Committee (GPRC)  
Bi-Monthly Report  
September 2023**

**Meetings and Attendance**

The Governance Policy Review Committee met on one occasion (July 12, 2023) between July 1 and August 31, 2023, via video conference. Attendance was excellent with no concerns regarding quorum experienced.

**Activities Undertaken**

At its **July** meeting, as part of the mandated detailed annual review of all Policies, the Committee reviewed and discussed the Executive Limitations policies Part 1, namely EL01 to EL09. No direct Council member feedback was received, however members of the GPRC submitted their feedback, which was considered and discussed.

Additionally, the committee reviewed and discussed their own Terms of Reference Policy, as well as the various recommended edits brought forward for GP20. The committee continued to work on rewriting Policy E02 (Ends Priorities), and draft amendments will be further reviewed and discussed at the September committee meeting. Further discussion took place about amending the timeline for the Policy Review schedule from annually to bi-annually. This will be revisited at the September meeting, before presenting a proposed new schedule to Council.

Sandi Verrecchia of Satori Consulting Inc presented results from the Committee Evaluation and the committee discussed these findings. Ideas were discussed of ways to further Council members' knowledge and comprehension of the Council Policies, including presentations at Council meetings and surveys about understanding policy information. This item will be discussed in more detail at the September meeting.

The proposed amendments suggested by the Committee were submitted to Council for review and approval at their July Council meeting.

**Next Meeting Date**

September 12, 2023

Respectfully submitted by,

Dr Brenda Lessard-Rhead, ND (Inactive)

Chair

September 1, 2023



The College of Naturopaths of Ontario

## **STANDARDS REVIEW COMMITTEE REPORT**

July 1, 2023 – August 31, 2023

During the reporting period the Standards Committee met once on August 30, 2023. The Committee continued their review of potential updates and amendments to the Standards of Practice.

The Committee is next scheduled to meet on October 25, 2023 where it will review the completed updates and amendments to the Standards in order to finalize them for consultation.

Respectfully submitted,  
Dr. Elena Rossi, ND  
Chair  
September 2023



The College of Naturopaths of Ontario

## **EQUITY, DIVERSITY AND INCLUSION COMMITTEE REPORT**

July 1, 2023 – August 31, 2023

For the reporting period of July 1, 2023 to August 31, 2023 the Equity, Diversity and Inclusion Committee (EDIC) had one meeting scheduled for August 21, 2023. The Committee agreed at their previous meeting to defer the meeting as staff finalize, prepare and schedule the EDI Lens Tool training for the various College Committees to be used in the review of their policies and processes.

The Committee is scheduled to meet on October 23, 2023 to review the EDI Lens Tool feedback.

Dr. Jamuna Kai, ND  
Co-Chair  
September 2023

Dr. Shelley Burns, ND  
Co-Chair  
September 2023



The College of Naturopaths of Ontario

# MEMORANDUM

**DATE:** September 27, 2023

**TO:** Council members

**FROM:** Andrew Parr, CAE  
Chief Executive Officer

**RE:** Items Provided for Information of the Council

As part of the Consent Agenda, the Council is provided a number of items for its information. Typically, these items are provided because they are relevant to the regulatory process or provide background to matters previously discussed by the Council.

To ensure that Council members, stakeholders and members of the public who might view these materials understand the reason these materials are being provided, an index of the materials and a very brief note as to its relevance is provided below.

As a reminder, Council members have the ability to ask that any item included in the Consent Agenda be moved to the main agenda if they believe the items warrants some discussion. This includes the items provided for information.

No.	Name	Description
1.	Grey Areas (No. 281 & 282)	Gray Areas is a monthly newsletter and commentary from our legal firm, Steinecke Maciura LeBlanc on issues affecting professional regulation. The issues for this past quarter are provided to Council in each Consent Agenda package.
2.	Legislative Update (July and August 2023)	This is an update provide by Richard Steinecke to the members of the Health Profession Regulators of Ontario (HPRO), formerly the Federation of Health Regulatory Colleges of Ontario (FHRCO). The updates identify legislation or regulations pertaining to regulations that have been introduced by the Ontario Government. The updates for the past quarter are provided to Council in each Consent Agenda Package.
3.	Council Meeting Evaluation	Graphs summarizing the responses of Council member's feedback from July 2023 Council meeting.



# GREY AREAS NEWSLETTER

A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

[sml-law.com/resources/grey-areas/](http://sml-law.com/resources/grey-areas/)

## Addressing Indigenous-Specific Racism

by Julie Maciura  
August 2023 - No. 281

In recent years, many Canadian regulators have taken preliminary steps to address the racism facing Indigenous people. The [reports](#) of the Truth and Reconciliation Commission of Canada have contributed enormously to these activities. Initial steps by regulators have included public acknowledgements of the role of professions in the oppression of Indigenous peoples, education of regulatory staff and committees on the topic, voluntary and mandatory continuing professional development for registrants in the area, providing resources for registrants and the public, specifically identifying Indigenous-specific racism as a category of serious professional misconduct, and land acknowledgements.

What, then, are the next steps for regulators? While there are developments across the country, some regulators in British Columbia have taken significant next steps that are worthy of note. This is particularly (but not exclusively) true for health regulators. In part this is due to the ground breaking [In Plain Sight](#) report released there in November 2020, and the enactment of the *Health Professions and Occupations Act* ([Bill 36](#)) in that province two years later. As a case

study, this article provides a brief overview of some of the [next steps taken by the British Columbia College of Nurses and Midwives](#) (BCCNM).

### Key Documents

On May 11, 2021, the BCCNM joined with three other health regulatory Colleges to issue [An Apology to Indigenous People and a Pledge to Be Anti-Racist](#). The Colleges stated:

Indigenous people (First Nations, Métis and Inuit) have waited far too long for their legal rights to be recognized. And they have waited too long for health-system leaders to dismantle the racism that was built into our colonial health-care system—racism that continues to cause harm to this day.

As the leaders of the four largest health regulatory colleges in British Columbia, we offer our apology to the Indigenous people and communities who have experienced racism while

engaging with us and with the health professionals we regulate.

The following September, the BCCNM published a [commitment to action](#) to help facilitate “constructive disruption to Indigenous-specific racism amongst B.C. Nurses and Midwives”. Updates were published, in conjunction with other Colleges, in [2022](#) and [2023](#).

In December of 2022 a 120-page [report of an external review](#) of the BCCNM’s inquiry, discipline and monitoring process was released containing 13 recommendations.

In April of 2023 the BCCNM updated its commitment to action with a description of the next steps it had taken and intended to take. That document is entitled [Redressing Harm to Indigenous Peoples in the Health Care System](#).

The information below is based on these documents.

### **Organizational**

The BCCNM is taking steps to ensure that its physical and virtual presence provides a safe space. Consultation with local First Nations has resulted in recognition of the traditional lands upon which the BCCNM office sits and the use of artwork and signage as educational tools. Further, “most of BCCNM’s important events are opened and closed by Indigenous Knowledge Keepers from Musqueam, Squamish, and Tsleil-Waututh Nations.”

The BCCNM, in advance of the proclamation of Bill 36, is developing processes for engaging with Indigenous audiences for its regulatory activities and policy development. This will include developing partnerships with relevant bodies such as the Office of the Ombudsperson, Patient Care Quality Offices, Ministry of Health, other health regulators, B.C. Health Authorities, Métis Nation, and the First Nations Health

Authority. Significant progress has already been reported.

### **Board, Committees, and Staff**

The BCCNM is developing “a culturally safe data collection process to determine numbers of registrants, staff, board, and committee members who are Indigenous”. Targets for recruitment and retention of Indigenous people are being set. One target is that 10% of members of all BCCNM committees identify as Indigenous. As of June 2023, the BCCNM is close to meeting that target for committee composition. Also, as of that date, two of the ten BCCNM board members have Indigenous heritage.

Recruitment strategies will include changing the “language in existing job descriptions to ensure candidates are being considered with lived experience as an Indigenous person or other equity seeking or marginalized groups with the same weight as is used for formal colonial education.”

Enhanced mandatory training will be provided to all board, committee, staff members and contractors. Additional training will be provided to those in direct interactions with Indigenous people or groups. Training will include “Indigenous-specific racism, cultural safety and humility, anti-racism, disability awareness, trauma- and violence-informed practice, and other intersectionalities.”

The BCCNM is also “developing a speak-up culture policy to foster an environment within BCCNM where stereotypes, discrimination, and racism are recognized and addressed. To support this initiative and ensure the organization will be well equipped to know when and how to speak up, relevant training will be sourced and provided. We have hired an Executive Director of Reconciliation, Equity, Diversity, and Inclusion (ED-REDI) to provide strategic leadership in this area and to move BCCNM forward.”



## Registrants

On February 25, 2022, the BCCNM, in conjunction with other regulators, implemented a stand-alone practice standard on [Indigenous cultural safety, cultural humility, and anti-racism](#). The standard expects all registrants to:

- Reflect on their privileges, biases, values, belief structures, behaviours and positions of power;
- Undergo ongoing relevant education;
- Intervene when observing Indigenous-specific racism;
- Actively create safe health care experiences for Indigenous clients;
- Work collaboratively with Indigenous clients to meet their health and wellness goals; and
- Apply trauma-informed practice to their interactions with Indigenous clients.

This standard goes further than the traditional “don’t discriminate” approach to addressing racism. The standard was accompanied by a video series and companion guide.

Feedback has been obtained from registrants through the quality assurance program as to the implementation of the standard and the experience of registrants with Indigenous-specific racism.

In addition to ensuring that these competencies are incorporated into BC programs, the BCCNM will assess applicants for registration from other jurisdictions for these competencies. The College’s process of approving educational programs will also be revised to ensure a culturally safe approach when reviewing programs for Indigenous practitioners.

The BCCNM is also creating “a barrier-free name-changing process for Indigenous registrants reclaiming their names.”

## Complaints and Discipline

The BCCNM is in the process of implementing the recommendations of the external review of its complaints and discipline processes including:

- Using language (e.g., “feedback” rather than “complaint”) that is more applicable to Indigenous cultures;
- Establishing “a distinct, integrated, and accessible entry point for Indigenous individuals” to enter the process and to provide meaningful responses;
- Addressing “barriers for Indigenous reporting by creating multiple pathways to capture a reporter’s healthcare experience through written, oral, audio, and/or video truths, with the option to have staff go to communities and obtain reports, if invited”;
- Ensuring that a “reporter’s concern is provided, verbatim, to investigators and committees as part of the inquiry and discipline process”;
- Establishing “a process to provide a culturally safe opportunity for reporters or registrants to self-identify Indigeneity during the reporting process”;
- Recruiting and retaining Indigenous representatives for the relevant committees and utilizing Indigenous subject matter experts in the process;
- “Create, document, and implement a process for culturally safe investigations and hearings when the client or registrant is Indigenous”; and
- Recognizing the role of Indigenous-specific racism in the process and considering methods of addressing this, including using Gladue-type reports [i.e., individualized reports of the registrant’s life experiences and community input into appropriate remedies] when sanctioning registrants who are Indigenous. Further than that, consideration will

be given to negotiating consent resolutions that are respectful of Indigenous protocols for registrants who are Indigenous.

More significantly, the BCCNM is exploring the renaming and reframing of “the complaints process (deficit-based) to health care feedback process (strengths-based).”

These developments should be read in conjunction with the [report](#) adopted on July 14, 2023, by the BC legal regulator which included recommendations for effective communication about its process, using trauma-informed and culturally sensitive investigation techniques, employing a “navigator” to assist individuals who are Indigenous participate in the regulatory process, to enhance use of informal resolution techniques, and to employ non-adversarial hearing processes where feasible.

## Conclusion

Of course, initiatives will not matter if they do not result in meaningful changes, both in the results achieved by the regulator and in the treatment of members of the public. In the UK the regulator for physicians has gone to great lengths to address racism and has reportedly made significant progress: <https://www.gmc-uk.org/-/media/gmc-site/about/how-we-work/edi-targets---progress-and-priorities-for-2023.pdf>. On the other hand, the UK Doctors’ Association says that inequitable treatment of racialized registrants is still a significant issue: <https://fitnesstopractisenews.co.uk/are-ethnic-minority-doctors-still-treated-differently/>.

The steps taken by Canadian regulators to redress Indigenous-specific racism will no doubt vary widely. However, the significant action taken by the BCCNM may provide a valuable model for others.

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## FOR MORE INFORMATION

This newsletter is published by Steinecke Maciura LeBlanc, a law firm practising in the field of professional regulation. If you are not receiving a copy and would like one, please visit our website to subscribe: <https://sml-law.com/resources/grey-areas/>

## WANT TO REPRINT AN ARTICLE

A number of readers have asked to reprint articles in their own newsletters. Our policy is that readers may reprint an article as long as credit is given to both the newsletter and the firm. Please send us a copy of the issue of the newsletter which contains a reprint from Grey Areas.



# GREY AREAS NEWSLETTER

A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

[sml-law.com/resources/grey-areas/](http://sml-law.com/resources/grey-areas/)

## Addressing Gender-Based Violence

by Rebecca Durcan  
September 2023 - No. 282

While Canadian [politicians spar](#) over whether gender-based violence, particularly intimate partner violence (IPV), is an epidemic, regulators are assessing their role.

Regulators of professions, particularly in the [health](#) and [law enforcement](#) domains, treat IPV in a registrant's private life as serious professional misconduct. While important, questions arise as to whether regulators can and should do more.

In 2022, a Renfrew County inquest looked into the 2015 murders of three women, making [86 recommendations](#). None were directed specifically at regulators of professions (although some recommendations aimed at educating service providers to perpetrators or survivors of IPV apply to practitioners of some professions). However, some of the recommendations might be adapted by regulators when dealing with registrants with the potential, or reality, of gender-based violence, including the following:

- Using “a trauma-informed approach to interacting and dealing with survivors and perpetrators”;

- “Explore incorporating restorative justice and community-based approaches in dealing with appropriate IPV cases to ensure safety and best outcomes for survivors”;
- Sharing of information with law enforcement agencies in appropriate cases;
- Safety planning for survivors;
- Professional education and training for staff and investigators dealing with IPV matters, including risk assessment training, trauma-informed practices, indicators of IPV, and crisis management coaching;
- Guidance for registrants who support survivors or counsel, treat or otherwise intervene with perpetrators;
- Track and study decisions made in matters involving IPV for relevant information including on “longitudinal studies for recidivism, violence escalation, and future victims”; and
- Policies for monitoring and responding appropriately to non-compliance with terms, conditions, and limitations imposed on a

perpetrator, such as non-participation in counselling.

In contrast, the Nova Scotia Mass Casualty Commission [report](#) specifically addresses professional regulators. The Commission investigated Canada's worst-ever mass casualty crime spree that lasted 13 hours and resulted in 22 deaths.

The perpetrator was a dentist who had faced discipline for various billing and angry interactions with clients. During the process, the perpetrator also verbally attacked a member of the complaints screening committee and an expert witness who had filed a report critical of his work. Eventually there was a joint submission to the discipline panel that included a requirement to attend counselling, which he apparently completed. Unbeknownst to the regulator at the time, the perpetrator had engaged in a pattern of behaviour involving financial, emotional, and sexual abuse of several vulnerable and marginalized patients.

Many of the recommendations of the Commission related to police and emergency services. However, several recommendations relate to community entities that might have identified "red flags" and perhaps intervened to enhance community safety. Some of those recommendations are applicable to regulatory bodies. One, in particular, is directed specifically at regulatory bodies:

Recommendation C.19

PROACTIVE MONITORING BY  
PROFESSIONAL LICENSING BODIES

The Commission recommends that  
All professional licensing bodies should:

- (a) Monitor their members proactively to better ensure the safety and well-being of their licensees' clients/patients;
- (b) Through careful monitoring, track and proactively demand accountability when discernible patterns of

unethical or illegal behaviour are uncovered; and

- (c) Take steps to promote awareness of complaints mechanisms, including by requiring that licensees prominently display the Code of Ethics and information about the complaints process in their offices/clinic and online.

Implementation points:

- Practice audits and quality control systems can assist in proactive monitoring
- Professional licensing bodies should:
  - acknowledge that marginalized communities face barriers to reporting concerning behaviour; and
  - take steps to minimize these barriers through engagement with these communities.

In addition, recommendation V.14 states that:

- (b) Non-governmental bodies, including learning institutions, professional and trade associations, and business, declare gender-based, intimate partner, and family violence to be an epidemic that warrants a meaningful and sustained society-wide response.

The Mass Casualty report ([vol. 4, p. 501](#)) also commented favourably on the [changes that the College of Nurses of Ontario has made](#) to address nurses who intentionally harm patients (which is not limited to gender-based violence) through raising awareness and developing a risk assessment process for complaints and reports.

The Commission did not, however, provide much guidance on how regulators can access external resources if they identify red flags.

Raising awareness of its role and providing alternative methods of communication

(besides a formal written letter of complaint) in a safe space is consistent with initiatives by several regulators in recent years. For example, in our July 2023 issue of Grey Areas we discuss efforts being made by regulators to engage with Indigenous communities as part of redressing anti-Indigenous racism.

These recommendations also tie in with risk-based regulation activities of many regulators. Identifying the most serious (as well as the most frequent) forms of harm to the public helps regulators focus on activities that matter. For example, enforcing compliance with continuous professional development requirements and advertising rules might be accorded lesser regulatory resources, even if they are not completely abandoned, compared to abuse and violence concerns. Risk-based regulation also contemplates a proactive and multi-pronged approach to these risks (e.g., identifying registrants at risk of causing harm and proactively engaging with them, often with supportive measures). Risk-based regulation also involves providing support to vulnerable registrants and complainants or witnesses.

These recommendations will have to contend with competing considerations. For example, the concept of gathering all available information to look for “red flags” is not entirely consistent with a regulator’s tendency to only rely on reliable and relevant evidence. For example, recently a tribunal held that complaints investigators can reasonably choose to not look at online internet ratings of registrants: [Complainant v.](#)

[College of Physicians and Surgeons of British Columbia \(No. 1\)](#), 2023 BCHPRB 48 (CanLII). While the trustworthiness of such information is doubtful, it can still provide some data that, combined with other data, might be able to identify registrants who are at risk and who might warrant special attention, as recommended by the Mass Casualty report. [Research has shown](#), and the example provided in the Mass Casualty report indicates, that a prior history of complaints is a fairly reliable predictor of future concerns.

Similarly, procedural fairness requirements, including full disclosure of evidence about reporters of concerning behaviour, may pose challenges for regulators.

Another challenge for regulators is that their intervention with a potentially violent registrant might provoke the very behaviour that is sought to be addressed. Regulators may not have the expertise to mitigate that risk effectively.

Fortunately, the work of regulators in analogous areas of concern (e.g., sexual abuse, discrimination, and abuse of colleagues) will provide significant synergies in addressing gender-based violence by registrants.

*Disclosure: One of the SML team was a Commission Counsel for the Nova Scotia Mass Casualty Commission. The opinions expressed in this article are those of the author and not of the Commission.*

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*From Julie Maciura*

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## Ontario Bills

([www.ola.org](http://www.ola.org))

The Legislature was in recess.

## Proclamations

([www.ontario.ca/search/ontario-gazette](http://www.ontario.ca/search/ontario-gazette))

There were no relevant proclamations this month.

## Regulations

(<https://www.ontario.ca/laws> Source Law - Regulations as Filed)

***Regulated Health Professions Act, Various Profession-Specific Acts, Public Hospitals Act, Fixing Long-Term Care Act, Laboratory and Specimen Collections Centre Licensing Act,*** and various other statutes – Regulations enable certain practitioners registered in other provinces to perform controlled acts, use protected titles, and otherwise practise their professions in Ontario pursuant to the As of Right legislation. (O.Reg. 196/23 through to O.Reg. 213/23)

***Regulated Health Professions Act, and various other statutes*** – Regulations implement the *Integrated Community Health Services Centres Act, 2023*, replacing independent health facilities. (O.Reg. 215/23 through to O.Reg. 218/23)

***Psychology and Applied Behaviour Analysis Act*** – The General and Registration regulations are overhauled to include behaviour analysts within the College. (O.Reg. 193/23 and 194/23)

## Proposed Regulations Registry

([www.ontariocanada.com/registry/](http://www.ontariocanada.com/registry/))

***Police Record Checks Reform Act*** – The government is conducting a five-year review of the police records checks system. Many regulators use a police records check as a component of their suitability review for applicants for registration and, sometimes, existing registrants. Comments are due by September 11, 2023.

### Bonus Features

*These include some of the items that appear in our blog:*  
([www.sml-law.com/blog-regulation-pro/](http://www.sml-law.com/blog-regulation-pro/))

#### ***Undertakings Do not Preclude Further Investigations***

Entering into an undertaking with a regulator does not constitute a binding conclusion to all future concerns. That is the message from [\*Binance Holdings Limited v The Ontario Securities Commission\*](#), 2023 ONSC 3825 (CanLII).

A major online crypto asset trading platform operated in Canada, including Ontario, without registering with the regulator. The company agreed to cease trading in Ontario and wind down its Ontario operations. It also agreed to provide regular reports from a third-party monitor. The regulator agreed to not initiate proceedings in respect of the specific matters in issue so long as the company fulfilled its obligations.

However, the regulator became concerned that the company was not complying with the undertaking. It also became aware of other concerns about the company. The regulator initiated an investigation and issued a summons for information about the company's communications about operating in Canada, in particular Ontario. The company sought an interim order staying the investigation and summons until it could challenge the investigation on judicial review.

In refusing to halt the investigation or hold up the summons, the Court noted that the company's proposed arguments challenging the investigation and summons were weak and lacked merit. The Acknowledgement and Undertaking did not "settle" the matters between the company and the regulator. There was no abuse of process in the regulator pursuing the non-compliance with the Undertaking or looking into the new concerns. The summons, when read as a whole, was not overbroadly worded. The foundation for an argument of unreasonable search and seizure offending s. 8 of the *Canadian Charter of Rights and Freedoms* was not established. In any event, the privacy interests in the context were minimal.

The Court also found that the company being required to produce the required documents did not constitute irreparable harm even if the company were later to succeed in quashing the summons. The summons was relatively unintrusive, in terms of individual privacy rights, and the company could then argue that any improperly obtained information should not be used against it in any subsequent prosecution.

The Court also held that the balance of convenience favoured the regulator:



A bare claim that responding to a summons implicates constitutional rights to privacy and requires investigative activity to come to a halt pending further proceedings challenging the decision to investigate and collect documents via summons would frustrate the enforcement of securities laws in the public interest. It would also defeat the legislative principle directing the Commission to enforce and administer the [Act](#) in a timely, efficient manner.

The motion for a stay was refused and the regulator was permitted to proceed with its investigation, including seeking compliance with the summons.

### ***No Back Door to Obtaining Disclosure***

It is only natural for people participating in regulatory investigations to want to know what the regulator knows before answering questions. However, regulators often want to know what the witness knows without the witness being influenced by the then-available evidence. In [British Columbia \(Securities Commission\) v Brar](#), 2023 BCSC 1122 (CanLII), the Court limited a possible back door route for participants to obtain early disclosure.

In that case two witnesses (who were not the subject of the investigation) were summoned to provide information to the regulator. The witnesses failed to attend. The regulator brought contempt proceedings to court to compel the cooperation of the witnesses.

The main part of the decision deals with the witnesses' attempt to have the contempt enforcement provisions declared unconstitutional primarily on the basis that provisions enabling contempt orders usurped the constitutional role of the courts. The Court rejected those arguments.

The witnesses also sought disclosure of all the non-privileged information in the possession of the regulator relied upon to issue the original summons. The witnesses argued that they were entitled to full disclosure because they were subject to significant sanction should they be found in contempt. The Court accepted that the witnesses were entitled to *Stinchcombe*-type disclosure in the proceedings. However, only relevant information needed to be disclosed. The information about the investigation leading up to the summons was irrelevant. Only the information related to the content and delivery of the summons itself and the failure to cooperate was relevant to the contempt proceedings. That information had been disclosed.

Thus, the regulator was not required to disclose its information on the merits of the investigation in advance of the witnesses' cooperation. The matter will now proceed to a hearing of the application for contempt itself.

### ***So Many Unanswered Questions***

For the impatient among us, interim stay applications can be frustrating. These applications only determine whether a decision is to be put on “hold” without deciding the main issues. An example of this is found in the case of [\*FS Insurance Brokers, Inc. v Insurance Council of British Columbia\*](#), 2023 BCSC 1190 (CanLII).

The regulator made a rule preventing licensed insurance brokers benefitting from insurance contracts for condo-type properties managed by an affiliate of the broker. This type of relationship was viewed as a conflict of interest. The rule was apparently directed at one broker whose business model was to provide proactive measures for properties managed by an affiliate to reduce their insurance claims (and, thus, presumably, its premiums). The broker sought, and obtained, a temporary injunction to prevent enforcement of the rule pending a determination of its validity on an application for judicial review.

In doing so, the Court indicated that the following arguments could be made by the broker at the ultimate application hearing, even if the arguments would not necessarily be successful:

- The rule should not be permitted to close a perceived loophole within the enabling legislation.
- The rationale for the new rule was not adequately explained when enacted. While policy decisions do not need the level of explanation that an adjudicative decision requires, where a policy targets one licensee, a greater explanation may be necessary.
- The regulator did not adequately consider the broker’s comments on the proposed rule during the consultation process. For example, only a high-level summary of all of the submissions received was provided to the decision makers.

The Court also noted that there was an obligation on the regulator in these circumstances to give the broker guidance as to the application of the new rule to its business model (even if that guidance did not amount to an advance ruling).

The Court found that there was sufficient evidence to conclude that allowing the rule to be enforced pending the court proceedings would cause the broker irreparable harm by leaving the legality of its business model in limbo. While there was also a presumption that there was irreparable harm to the regulator in not being able to enforce its public interest rule, the balance of convenience favoured the broker. This determination was made partly on the basis that the regulator did not provide evidence of the specific harm to the public that it felt that the broker’s continued operations posed and because the injunction was narrowly tailored to only affect the regulator’s enforcement activities against the broker to a limited extent.

The upcoming decision on the merits of the rule will be of interest to regulators, particularly if it addresses the policy making obligations when making rules directed at a specific registrant.

### ***The Importance of Public Representation on Panels***

In a divided decision, the majority of the Ontario Divisional Court has held that having a public member on a discipline panel can be essential to the legitimacy of its decision: [\*Law Society of Ontario v Schulz\*](#), 2023 ONSC 3943 (CanLII).

The facts are straightforward. The lawyer was convicted criminally of possession of child pornography. An allegation of conduct unbecoming of a licensee was referred to discipline. The Chair of the tribunal appointed a three-person hearing panel consisting of only professional members. No one objected to the composition of the panel. A finding of conduct unbecoming was made on the basis of agreed facts. The Law Society of Ontario (LSO) sought revocation of the lawyer's licence. The hearing panel ordered a nine-month suspension. The LSO appealed to the appeal panel. On the appeal the LSO raised, for the first time, that the hearing panel was improperly constituted because it did not have the required public member. The appeal panel concluded that the composition argument should be dismissed as it was not raised at the hearing and because there was no loss of jurisdiction or procedural unfairness. The appeal panel upheld the nine-month suspension. The LSO appealed to the Divisional Court.

The legislation requires that hearing panels have at least one lay adjudicator. However, the legislation also provides that the Chair of the tribunal can depart from the required composition in specific circumstances, such as where compliance with the usual rule would result in undue delay. In this case, no explanation was offered as to why the usual composition requirements were not followed.

In the past, courts have held that composition and quorum requirements are jurisdictional and cannot be waived: [\*Connor v. Law Society of British Columbia\*](#), 1980 CanLII 2992 (BC SC). As a result, many enabling statutes provide some flexibility on the point, especially where panel members can no longer continue to sit mid-hearing. In addition, in Ontario, the [\*Statutory Powers Procedure Act\*](#) has several saving provisions (although none applied on these facts).

The majority of the Court held that the composition of the panel was a jurisdictional duty requiring compliance. While exceptions could be made, there was nothing to suggest that the criteria for doing so was met. In the circumstances, the Chair of the tribunal, or the hearing panel itself, should have indicated which of the specific exceptions applied to reassure the parties and the public that the statutory requirements had been met.

The majority of the Court emphasized the importance of public representation on hearing panels in general:

The regulatory requirement that they sit on every hearing panel is prescribed by a government-promulgated [Regulation](#). As independent representatives of the public, who are neither elected nor subject to re-election by their professional colleagues, lay adjudicators serve to legitimize the tribunal's decisions in the eyes of the public.

The majority indicated that public representation was particularly important in this case:

In the circumstances of this case, where the misconduct related to a conviction for possession of child pornography, the presence of a lay adjudicator on the panel was essential to ensure that the hearing panel included a public interest perspective regarding the profession to maintain confidence in the administration of justice. Moreover, the absence of a lay adjudicator in a case of this nature gives rise to a concern that the public could potentially perceive the hearing panel as lacking the necessary degree of impartiality or independence.... Moreover, the absence of a lay adjudicator on a hearing panel could give rise to the perception that the Tribunal, in disciplining a fellow member of the profession, was inappropriately or unjustifiably lenient in imposing a penalty.

The majority also stated that since this was a jurisdictional issue, it was appropriate for the LSO to raise the issue for the first time before the appeal panel.

The majority also said that, in the alternative, there was procedural unfairness in not having a public representative on the hearing panel in this case:

Given the societal harms that arise from child pornography and the exploitation of children, it was crucial that the public interest perspective be incorporated in this proceeding. The [Regulation](#) contemplates that this be done through the participation of a lay adjudicator on every hearing panel where a lawyer is subject to discipline. In my view, in this case, the absence of a lay adjudicator on the hearing panel raises an issue as to the fairness of the proceeding from a public interest perspective.

The majority returned the matter for a new discipline hearing before a properly constituted panel.

The dissenting Justice was particularly concerned about the LSO raising the composition issue only after it did not achieve its desired result at the discipline hearing. According to the dissenting reasons, the legislation permitted panels with no lay adjudicators and there was no obligation for the Chair of the tribunal to explain their exercise of discretion. The LSO made no attempt to supplement the record to clarify that the composition was made in accordance with the exception

provision. In terms of procedural fairness, the lawyer had already been put through two proceedings and should not be put through another.

Tribunals should be careful to strictly follow their composition and quorum requirements and explain their reliance on any applicable exceptions. Even where an exception is possible, tribunals should consider whether the legitimacy of their proceedings might be affected if there are no public representatives on a particular panel.

*This article was originally published by Law360 Canada, part of LexisNexis Canada Inc, at [Law360 Canada](#).*

### ***Rescinding Registration***

Can a regulator rescind a person's licence once it has been issued? This complex question received a partial answer in [Amendola v. Law Society of Ontario](#), 2023 ONSC 4123 (CanLII).

In that case a paralegal was issued a licence after declaring on their application that they had not been disciplined by a professional organization and had never had a penalty imposed by an administrative tribunal. More than ten years later the regulator learned that the paralegal had been disciplined and ordered to pay an administrative penalty of \$10,000 by the discipline committee of the Real Estate Council of Ontario, the licensing body for Ontario real estate professionals. Rather than sending the matter for a conduct (discipline) hearing, the legal regulator referred the matter for a registration hearing, which determined that the paralegal had deliberately failed to disclose the sanction.

The regulator's enabling statute stated that an applicant who made a false representation or declaration "is deemed thereafter not to meet, and not to have met, the requirements for the issuance of any licence under the Act". The regulator's hearing and appeal panels employed that provision to deem the paralegal inadmissible as a licensee. They did not consider whether the paralegal was currently of good character.

The paralegal challenged the jurisdiction of the regulator to reverse a decision to issue a licence once it had been issued. The Court accepted as reasonable the statutory interpretation that the deeming provision authorized the reversal of the licensing decision taken ten years previously.

Whether an applicant's false statement is discovered before or after licensing, its bearing on the applicant's integrity and character, and the risk to the public, is the same. The interpretation that the Applicant urges would provide the LSO with authority to address the false statements in licence applications only if discovered before a licence is granted. As the majority of the Appeal Division found, such an interpretation would "[pave] the

way for applicants to falsify information the Law Society considers critical to an application for a licence, in the hope that they can get away with the lie, become a member of the legal professions and continue to practise, effectively with impunity”: Appeal Decision, at para. 14. That situation would frustrate the legislative purpose of the licensing regime and impede the LSO’s ability to fulfill its statutory duty of public protection, maintenance of high ethical standards, and maintenance of public confidence in the legal professions.

The Court rejected the statutory interpretation arguments of the paralegal, especially given the phrase “deemed ... not to have met”. The Court also rejected the argument that the result of automatic licence revocation was too harsh to have been intended. The Court also rejected the argument that this result was also not intended because it would raise questions as to the validity of the services already rendered by the paralegal during the past decade, such as commissioning documents.

The Court held that since a hearing was provided as to whether the false declaration was deliberately made, procedural fairness was provided. The fact that the paralegal could not attempt to prove that they were now of good character was not unfair, especially since it was open for the paralegal to make a fresh application for licensure based on any changed circumstances. The holding of a hearing distinguishes this case from that of [Haramic v. College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario \(Registrar\)](#), 2017 ONSC 5668 (CanLII).

Questions remain about rescinding registration in other circumstances (e.g., where the regulator made an error about an applicant’s meeting an education or examination requirement). However, where the enabling legislation provides for rescission of registration based on a false declaration, such action is within the regulator’s jurisdiction.

### ***Cooperating with the Police***

The subject of when regulators should cooperate with police investigations raises complex policy and legal issues. On a policy level, regulators can be criticized for keeping secret information they possess about serious criminal conduct. On the other hand, immediate, automatic, and full disclosure might jeopardize regulatory investigations and may traumatize complainants and witnesses who do not wish for this disclosure to be made, such as in sexual abuse matters. Some regulators have developed policies to guide the timing and extent of any such disclosure.

In terms of legal aspects, many regulators have confidentiality obligations that may limit their ability to disclose information to the police voluntarily (e.g., in the absence of a search warrant), at least until the matters otherwise become public (e.g., through the discipline process). The reasons provided in [R. v. El-Azrak](#), 2023 ONCA 440 (CanLII), provide some guidance.

There, a pharmacist was under investigation by the regulator for their management of narcotics, specifically fentanyl patches. At the same time, police were investigating the source of those narcotics as part of a drug trafficking investigation. The police investigation raised the possible involvement of the pharmacist and the police sought information from the regulator. The regulator provided some contact information about the pharmacist and a redacted drug usage report. The drug usage report essentially indicated that the pharmacist was dispensing a high volume of fentanyl patches but did not indicate to whom. Not all the information requested by the police was provided, in particular, information about third parties was not provided.

The police used the information from the drug usage report, along with other information they had obtained independently, to obtain a search warrant for the pharmacist's home. That search discovered cell phones containing incriminating information. The pharmacist was convicted criminally of fentanyl trafficking and possession for the purposes of trafficking. The pharmacist sought to appeal the conviction on the basis that the search warrant, in particular the police reliance on the regulator's information to obtain the warrant, breached the pharmacist's constitutional protection against unreasonable search and seizure. The Court of Appeal upheld the validity of the search warrant and dismissed the pharmacist's appeal of the conviction.

In doing so, the Court found that this regulator's statute contained an exception to the confidentiality requirements permitting (but not requiring) disclosure to aid in a law enforcement investigation or proceeding, so long as the disclosure did not contain information about third parties. The regulator had discretion as to whether and to what extent it would make such disclosure. The pharmacist practised in a highly regulated environment. The pharmacist knew that the regulator "would be highly engaged, indeed, concerned with narcotic distribution, would be watching such distribution closely, and would be in a position to share information with the police". As such, the pharmacist had a low expectation of privacy in the information disclosed.

The Court also found that the regulator exercised independent and informed judgment when deciding what information it would disclose to the police.

### ***Clients Don't Dictate Practitioner Ethics***

In brief reasons, the Ontario Divisional Court upheld a disciplinary decision finding that a realtor had breached the Code of Ethics by failing to disclose that there were multiple offers and that the realtor was in a multiple representation situation. The realtor argued that their actions were dictated by the seller client's wishes and not motivated by financial considerations. The Court was unimpressed, stating: "As a professional, the applicant was required to follow the Code of Ethics in the face of pressure to the contrary from her client: such is the nature of professionalism."

See: [Day v. Real Estate Council of Ontario](#), 2023 ONSC 4233 (CanLII).



*From Julie Maciura*

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## Ontario Bills

([www.ola.org](http://www.ola.org))

The Legislature was in recess.

## Proclamations

([www.ontario.ca/search/ontario-gazette](http://www.ontario.ca/search/ontario-gazette))

***As of Right Amendments*** – July 24, 2023, was the date that these amendments to various health statutes came into force.

***Integrated Community Health Services Centres Act*** – September 25, 2023, is when these related pieces of legislation come into force.

***Psychology and Applied Behaviour Analysis Act*** – July 1, 2024, is when these changes to the College of Psychologists of Ontario come into force.

## Regulations

(<https://www.ontario.ca/laws> Source Law - Regulations as Filed)

***Regulated Health Professions Act*** – The controlled acts regulation is amended to permit out-of-province respiratory therapists to perform tracheal suctioning pursuant to the As of Right legislation. (O.Reg. 301/23)

***Health Professions Specific Acts*** – The registration regulations of the health regulatory Colleges have been enacted, implementing the emergency class of registration amendments. (O.Reg. 275/23 through to O.Reg. 300/23)

***Real Estate and Business Brokers Act*** – This includes various amendments to alter registrants' responsibilities to clients and others. (O.Reg. 233/23 through to O.Reg. 235/23)

***Ontario College of Teachers Act and Early Childhood Educators Act*** – Alternate eligibility requirements for therapy and counselling are revoked, some registration categories are adjusted, and, for teachers, registration timelines with discretionary extensions, are specified. (O.Reg. 225/23 through to O.Reg. 230/23)

### Proposed Regulations Registry

([www.ontariocanada.com/registry/](http://www.ontariocanada.com/registry/))

**Fair Access to Regulated Professions and Skilled Trades Act** – Proposed regulations would prescribe criteria for alternatives to Canadian experience and acceptance of Canadian immigration language proficiency testing for non-health professions. Comments are due by October 10, 2023.

**Community Safety and Policing Act** – Several consultations have been initiated to implement the new regulation and discipline of police officers under this Act including disciplinary rules of procedure. Comments are due over various dates in late September to mid-October.

### Bonus Features

*These include some of the items that appear in our blog:*

([www.sml-law.com/blog-regulation-pro/](http://www.sml-law.com/blog-regulation-pro/))

### Case Study on Addressing Anti-Indigenous Racism

As noted in the August issue of [Grey Areas](#), many regulators are still in the early stages of learning how to engage with anti-Indigenous racism. In that article we describe some of the groundbreaking work done by the health regulators in British Columbia, with a special focus on the nursing and midwifery, physician, and pharmacy regulators. A case study about that learning can be found in two Ontario Health Professions Appeal and Review Board (Board) decisions relating to the handling of a complaint against a physician providing emergency care.

A seven-year-old girl presented with pain on urination. Her parents, both Indigenous, anticipated care would be focused on a possible urinary tract infection. They were concerned that the physician pursued screening for sexual abuse and pressed for an insensitive examination of the patient's genital area without genuine consent. The family indicated that they went along with the examination for fear of otherwise being drawn into child protective processes, which has had tragic consequences within their community. They also expressed concern about the physician's rude manner and lack of concern for their privacy. They believed racial profiling influenced the physician's actions.

The screening committee accepted a remedial agreement from the physician that addressed processes for paediatric genital examinations and treatment of urinary tract infections in children.

The committee also stated expectations about sensitive communications including for families from a different culture than that of the physician.

The family sought a review before the Board: [A.D-S v N.M.N.](#), 2020 CanLII 67103 (ON HPARB). The Board returned the matter for further investigation on the basis that the screening committee had not addressed the fundamental aspect of the complaint:

The Board finds that, in not properly framing the true nature of the Applicants’ complaint, the Committee’s investigation is inadequate and should be re-investigated .... Where the complaint is founded on allegations of racial/cultural bias, the Committee has an obligation to assess a member’s conduct and actions through that lens and to obtain such further information as may be necessary to assist it in understanding how cultural/racial bias may affect a physician’s conduct and actions, whether conscious or unconscious.

Of interest was the discussion that the physician’s experience in care for immigrant and refugee groups in Toronto was not an adequate substitute for understanding the specific experience of Indigenous peoples in Canada.

The screening committee rendered a second decision which provided specific advice to the physician, including the following:

- i. [to] approach clinical encounters with an awareness of the impact of unconscious bias and to apply a trauma-informed lens that recognizes the deep and wide-ranging experience and effect of anti-Indigenous racism within the health care system;
- ii. [to] move a conversation with a patient’s family to a more secure and private area once a discussion turns to concerns about possible abuse, recognizing this is particularly important for Indigenous families given the historical and ongoing inter-generational trauma in Indigenous communities related to separation of children from their families.

The family sought a second review before the Board: [AD-S v Nitti](#), 2023 CanLII 65769 (ON HPARB).

In finding the decision of the screening committee to be reasonable, the Board made the following points:

- The screening committee had obtained additional information about the education of the physician on addressing anti-Indigenous racism.
- The screening committee had also obtained additional information about education and resources within the regulator and its recent guidance to the profession on addressing anti-Indigenous racism.

- The screening committee expressly addressed in their reasons awareness of the possibility of anti-Indigenous racism affecting the thinking of both the physician and of the committee in considering the complaint. On this point, the Board stated:

The Committee at the outset noted that the Applicants had raised questions about the efficiency of training for the Committee around anti-Indigenous bias and racism in the healthcare system as well as whether the College's EDI lead necessarily had the Indigenous-specific knowledge applicable to the situation. The Committee noted that it had received important and relevant training in the two years since this matter was previously considered and had benefited from the extensive experience of the EDI lead as well as EDI resources, and the specific area of anti-Indigenous bias and racism in the healthcare system.

- The screening committee provided detailed reasons that addressed each of the concerns identified by the family.

The Board concluded that the screening committee's decision was reasonable.

This case study assists in understanding how professions and regulators can continue to improve their awareness and performance in this area.

### ***Delay Duties***

What duty does a discipline panel have when there is a lengthy delay before the concerns come on for a hearing? In [Burgener v Law Society of Alberta](#), 2023 ABCA 227 (CanLII), Alberta's highest court says that procedural fairness requires creating an explicit process to address the issue.

In that case, a lawyer was investigated for a broad range of significant concerns including "breach of confidence, conflict of interest, bribery, extortion, uttering false documents, breach of trust, counselling an improper purpose". It took almost four years to investigate and refer the matter to a hearing, almost eight years to begin the hearing, and almost nine years from the initial complaint to complete the hearing. During that time the lawyer had health issues, including a heart attack, that he attributed, at least in part, to the ongoing proceedings.

At the discipline hearing the lawyer was unrepresented. He raised, informally, concerns about the delay. The panel deferred the issue to later in the hearing, but it was never formally addressed. The allegations were found to have been proved and the lawyer was disbarred. During the internal appeal, the lawyer attempted to introduce fresh evidence about the delay, but the request was denied. The appeal panel denied the appeal including finding that the delay

argument should have been raised by the lawyer at the discipline hearing and it was too late to raise it now.

On further appeal, the Court concluded that there was an insufficient record to make a ruling on whether the delay amounted to an abuse of process. In particular, there was insufficient evidence as to the causes of the delay, the degree of prejudice it caused, and whether in the circumstances it brought the administration of justice into disrepute.

However, the Court found that there was procedural unfairness in how the issue of delay was handled by the hearing panel. It was obvious that there had been a significant delay, and during the hearing the lawyer and others, including witnesses, expressed concerns about the impact of the delay on their ability to participate in the hearing. The lawyer regularly mentioned the stress of the process, its impact on his life, and his heart attack. The Court said:

In our view, the manner in which the appellant's delay concerns were handled constituted a breach of the common law duty of procedural fairness. Indeed, the situation facing the appellant verged on the Kafkaesque. It is true that the appellant is a lawyer, but it is no answer. He was a self-represented party at disciplinary proceedings facing serious allegations with serious potential consequences, including disbarment and the loss of his livelihood. He raised concerns about delay at the outset of the proceedings. The delay was lengthy and called out for an explanation. That there had been a lengthy delay in the process would have been apparent to all participants; the Law Society and the Chair of the Hearing Committee both acknowledged as much during the course of the proceedings. The Chair told the appellant the issue of delay could be dealt with later in the proceedings, but the appellant was never told, by the Hearing Committee or otherwise, when or how that could occur. In the end, the concerns about delay were never addressed by the Hearing Committee....

In our view, in these circumstances it was incumbent on the Hearing Committee to at least advise the appellant of the process they proposed be followed in the event he wished to make the argument on delay. Had that occurred, and had the issue not been abandoned, it could have been addressed in a substantive fashion by the Hearing Committee and there would have been a record to permit appellate review before the Appeal Panel and before this Court.

The Court indicated that the duty on the hearing panel was not just to the lawyer, but also to the public who might lose confidence in the regulation of the profession in these circumstances.

However, having found that there was a denial of procedural fairness, the Court was not prepared to set aside the findings and restore the professional status of the lawyer. The allegations were quite serious and had been established. A new hearing now, some sixteen years after the events

in issue, was also not in the public interest. Instead, the Court set aside all of the orders for costs payable by the lawyer during the process.

This case, if applied in other jurisdictions, may impose a duty on hearing panels to raise delay issues on their own initiative, especially where the registrant is unrepresented.

### ***Language Proficiency Requirements Are Not Discriminatory***

Ever since the notorious decision of [\*Brar and others v. B.C. Veterinary Medical Association and Osborne\*](#), 2015 BCHRT 151 (CanLII), regulators have been uncertain as to when their language proficiency requirements could be seen as discriminatory towards internationally trained applicants.

An application for registration by a teacher hopeful to practice in British Columbia indicates that language proficiency requirements, absent evidence to the contrary, can constitute valid registration requirements.

The matter began with a decision of the British Columbia Human Rights Tribunal: [\*Harun-ar-Rashid v. Ministry of Education \(Teacher Regulation Branch\)\*](#), 2021 BCHRT 75 (CanLII). The applicant applied for a certificate in BC. Initially he was told that he would not have to demonstrate language proficiency because of his five years of teaching experience elsewhere in Canada. However, communications between representatives of the regulator and the applicant raised concerns about his English-language proficiency. He was required to pass a proficiency test. The applicant refused. He initiated a series of challenges culminating in a human rights complaint. He argued that the language proficiency requirement was used as a pretext to discriminate against him on several bases including ancestry, colour, place of origin, and race.

The Tribunal dismissed the complaint. Even though other provinces did not require such evidence of language proficiency, there was no evidence that the requirement was based on stereotypes or that it was unduly onerous or unattainable by certain groups of people. The applicant was assessed individually and there was a basis for credible concerns about his language proficiency. There was also no evidence of bias by the regulator; the applicant's case was based on speculation.

The applicant sought judicial review, which was dismissed on the basis that it disclosed no reasonable claim for judicial review: [\*Harun-ar-Rashid v British Columbia \(Human Rights Tribunal\)\*](#), 2022 BCSC 965 (CanLII). On further appeal on various grounds, including that the Superior Court Judge was biased, the matter was also dismissed: [\*Harun-ar-Rashid v. British Columbia \(Human Rights Tribunal\)\*](#), 2023 BCCA 276 (CanLII).

Language proficiency requirements are not necessarily discriminatory.

### ***Soft Complaints***

A report commissioned by the British Columbia College of Physicians and Surgeons, entitled [Critical Review of the Formal Complaints Process](#), contains a number of innovative recommendations to make the process more accessible and accountable, particularly for First Nations, Inuit and Métis peoples. The entire report is worth reading. However, one proposal, relating to soft complaints, is particularly groundbreaking. The term, “soft complaint” is not part of Canada’s legal system. In a search of the [CanLII](#) database of hundreds of thousands of cases, the term is [only used once](#) and in an entirely different context (i.e., symptoms that cannot be objectively measured in a workers’ compensation matter).

A soft complaint is one that is made with no intent of there being formal action taken. It is an opportunity for a recipient of a service to communicate with a regulator about the recipient’s experience. The report says:

Many people who feel as though they have experienced harm want to share their story without going through a long, drawn-out process that takes time, energy, attention, and often requires a patient to relive painful experiences. However, there is no mechanism for a patient to simply register a complaint or tell their story without going through the entire intensive process....

The purpose behind this type of option would be to ensure patients know that even if they choose to not go through the entire complaints process—interviews, written forms, and often painful conversations about the harm caused—they still have an alternative avenue through which they will feel heard and validated in their experience. “Some people just want to be heard, give the information to the College and leave it there,” said one expert....

This option is intended as a means of provide [sic] patients with a platform to share their experience to ‘get it off their chest,’ which means that except for extenuating circumstances (i.e. criminal activity has taken place), there will likely not be formal consequences or disciplinary action enforced for the physician or surgeon involved, and this will need to be made clear to patients who choose to submit a soft complaint. [citation omitted]

Soft complaints can be made by communities as well as individuals. It is expected that the soft complaints process would generally take place in one sitting. It would be offered as an in-person meeting, as well as in other formats.



While a record would be kept of the soft complaint, it would be anonymized.

The regulator is expected to make records of the soft complaints and report on them annually to provide a public window into the concerns that are being expressed informally. This is tied in with another aspect of the report encouraging the regulator to collect, on a voluntary basis and through a sensitive process, data on how those coming forward identify themselves. The regulator is also expected to use this information to contribute suggestions for addressing anti-Indigenous racism within the health care system generally, within the profession, and within its own regulatory processes.

As is expected with any new proposal, there are many unanswered questions about it including:

- How can the process be structured so that those coming forward do not feel that they are being “steered” away from the formal process?
- What if the person coming forward later changes their mind and wishes to commence a formal complaint?
- What criteria will be used to determine if the information is too serious to keep confidential, who will make that decision, and what rights does the person coming forward then have?
- Will the information be used by the regulator for other purposes, such as part of the prior history when considering future formal complaints against the registrant or to identify higher risk registrants for more intensive quality assurance screening?
- Will the registrant be informed? Will the information be subject to disclosure if the registrant faces a discipline hearing on related or unrelated matters?
- Can measures be taken to prevent the misuse of the process (e.g., by “competitors” or “personal adversaries” of the registrant)?

Regulators will undoubtedly be monitoring this development with interest.

### ***Beware of Expedited Processes***

Regulators, understandably, wish to avoid the legal complexity and expense of discipline hearings whenever possible. For example, many regulators can administratively suspend or revoke the registration of registrants who fail to pay their fees, do not renew their registration, or fall short in completing their continuing development obligations. Such administrative actions typically involve just a written notice to the registrant with no right to an oral hearing. However, when such “expedited” or “administrative” proceedings involve the exercise of judgment resulting in discipline-type determinations and outcomes, courts will often scrutinize them carefully.



Take, for example, [\*Thorkelson v The College of Pharmacists of Manitoba et al\*](#), 2023 MBCA 69. In that matter a pharmacist's internet businesses were involved in the international distribution of drugs. One such drug, through no fault of the pharmacist, was missing an active ingredient. The pharmacist wrote an internal email to staff that was somewhat misleading as to the group of businesses' connection to the drug. The pharmacist was convicted in the United States for an unusual crime called "misprision of a felony". The US Court imposed 60 months probation and a \$250,000 fine, which effectively ended the pharmacist's internet businesses.

The regulator employed an expedited process, separate from its discipline procedures, for scrutinizing the conviction on the basis that it was relevant to the person's suitability to practise pharmacy. The process did not involve an oral hearing. The pharmacist was only able to provide written and oral submissions through a lawyer. The regulator found that the criterion had been met and chose to revoke the pharmacist's licence.

The pharmacist brought an application to court challenging the decision. The Court determined that, given the expedited nature of the process followed by the regulator, the language of the legislation, and the impact on the pharmacist, a new hearing with fresh evidence was to be offered. This procedure was different from appeals from discipline hearing matters which decisions were to be based on the record before the discipline panel and accorded more deference.

The Court found that the conviction was relevant to the pharmacist's suitability to practise the profession.

However, the sanction of revocation (called cancellation) should be treated similarly to a penalty in a discipline matter. The Court applied discipline penalty principles, including the lesser degree of seriousness of the offence (noting that the pharmacist's businesses were not involved in the drug's deficiencies), the consequences already suffered by the pharmacist, the pharmacist's clean discipline history, and the contributions of the pharmacist to the profession (he had served on the regulator's Council). The Court conclude that revocation was not comparable to other disciplinary sanctions for similar conduct and was inappropriate. The Court set aside the revocation, concluding that the pharmacist had already been punished adequately.

On appeal to the Court of Appeal, this decision was upheld.

Of course, the extent of a court's intervention will depend on the circumstances and the language of the enabling provision. For example, in Ontario, the [statute](#) enabling the regulation of teachers has a provision (section 30.2(8)) explicitly authorizing its discipline committee to impose mandatory minimum sanctions for conviction of certain sexual offences without giving the registrant an opportunity to participate in a hearing or even to make submissions.

### ***Ten Reasons Why the Jordan Peterson Coaching Program Requirement Was Upheld***

Registrants enjoy a constitutional freedom of expression. However, there are limitations imposed on those freedoms by virtue of the person's professional status. Certain expressions are inconsistent with their duties to avoid harming clients and the public, avoid undermining the public confidence in the profession, and ensuring public trust in the regulator.

In [\*Peterson v. College of Psychologists of Ontario\*](#), 2023 ONSC 4685, a prominent social media personality, who is a psychologist, made several controversial statements. These included telling an individual who expressed concern about overpopulation, "You're free to leave at any point", characterizing a previous client as vindictive and describing that client's complaint as a "pack of lies", speaking about air pollution and child deaths as "it's just poor children, and the world has too many people on it anyways", calling another commentator a "prik", referring to a politician as an "appalling self-righteous moralizing thing", refusing to use Elliot Page's name and pronouns, and calling a physician who performed surgery on Elliot Page a "criminal", among other statements.

The regulator imposed a mandatory remediation (coaching) program on the registrant regarding professionalism in public statements. The registrant challenged the decision as infringing on his freedom of expression. The Court upheld the regulator's decision as constituting a reasonable balancing of the registrant's professional obligations with his constitutional rights. In doing so, the Court considered the following factors.

1. The regulator had made a previous decision in respect of prior concerns that recognized the registrant's freedom of expression and which had resulted in only the offering of advice about the tone of his communication.
2. The regulator had engaged in a series of communications with the registrant, again acknowledging his freedom of expression, and offering to resolve the complaint with an undertaking to complete a coaching program.
3. Focussing on the demeaning, degrading, and unprofessional nature of his comments rather than the topics he addressed.
4. Noting that the registrant had referred to his professional status as a clinical psychologist when making the comments.
5. Observing that the comments were not made in private, but rather were made in public platforms with a broad audience.
6. Referencing specific portions of the College's Standards of Professional Conduct and the Canadian Code of Ethics for Psychologists that spoke directly to the tone and nature of any registrant's comments. The underlying goal of these documents was to respect the dignity of persons as an essential value of the profession.

7. Identifying the harm that those comments could have on their direct and indirect recipients. This emphasized the importance of the statutory objectives being addressed including protecting the human rights of the targets of the comments.
8. Mentioning the regulator’s concerns about the high “recurrence risk” of the registrant continuing this type of behaviour, particularly since the registrant demonstrated a limited acknowledgement of the regulator’s concerns.
9. Determining that the “stakes of the decision” were relatively low, with there being no disciplinary adjudication or findings and that the order was remedial, not punitive.
10. The committee panel making the decision was an expert body.

Cumulatively, the Court concluded that the screening committee of the regulator reasonably balanced the competing considerations in coming to its decision. The Court also found that the reasons for the decision by the panel appropriately covered the issues raised, including the constitutional freedoms at issue (i.e., they were transparent, intelligible, justifiable, and reasonable).

### ***Void for Vagueness***

Law has many pithy expressions that refer to complex legal concepts. For example, the phrase “intrusion upon seclusion” refers to the tort of invading someone’s privacy. Other notable expressions include “aiding and abetting” and “the snail in the bottle case”. High on that list is “void for vagueness” which refers to when a provision in legislation has too uncertain a meaning to be legally valid.

In [\*Covant v. College of Veterinarians of Ontario\*](#), 2023 ONCA 564, a veterinarian was found to have breached a provision prohibiting registrants from reselling drugs except “in reasonably limited quantities in order to address a temporary shortage experienced by ... [an]other member or pharmacist”. The registrant operated a “side business” selling significant quantities of veterinary drugs to pharmacies after charging a 5% “handling fee”. A majority of the discipline panel found that this amounted to professional misconduct and imposed a suspension of one month, a requirement that he complete an ethics course, a post-suspension inspection, and payment of one-third of the costs, totalling \$94,235.12. The veterinarian appealed to the Divisional Court which upheld the discipline decision. He then was granted leave to appeal to the Court of Appeal.

A primary ground of appeal was that the phrases “reasonably limited quantities” and “in order to address a temporary shortage” were impermissibly vague. The Court reaffirmed that s. 7 of the *Canadian Charter of Rights and Freedoms* (related to “life, liberty, and the security of the person”) does not apply to the right to practise a particular profession despite the stress of

professional discipline proceedings. The Court further found that the phrases at issue did not contravene any void for vagueness requirements in the case law; rather, the phrases provided permissible room for legal debate. The Court said:

The fact that a regulation requires interpretation in the context of a specific factual matrix does not suffice for a finding of vagueness. Here, the impugned phrases are complementary – they inform the content of each other, and in so doing, achieve an acceptable level of clarity. I agree with the observation that, “[b]ased on the context, ‘reasonably limited quantities’ would mean quantities proportionate to the temporary shortage” ....”

The Court was reassured that the volume of re-sales indicated that this was far from a borderline case.

The Court also rejected the related argument that the provisions were “overbroad” in the sense that it went beyond what was needed to accomplish the governmental objective. The rationale for the rule was that veterinarians should, generally, only be involved in the distribution of drugs to ensure their availability for their patients. The Court said:

First, the College is not required to wait for harm to materialize before taking action. Instead, the College is entitled to regulate its members to mitigate risk. Second, this submission amounts to a challenge to the wisdom of the amendment to s. 33(2)(d). Indeed, this was a recurrent theme in a number of Dr. Covant’s submissions. That Dr. Covant does not agree with the Regulation is of no concern to the College, nor to the courts.

The Court also made the following points:

- It was permissible for the regulator to allege a course of conduct. It was not required to prove that any (or every) single re-sale infringed the rule.
- There was no error in principle in the sanction and costs orders:
 

Given the nature of Dr. Covant’s conduct, and his ongoing conduct in the face of numerous red flags, the sanction was appropriate. In imposing the sanction that it did, the Committee also intended to deter other veterinarians from engaging in similar conduct, and at the same time, maintain the public’s confidence in the ability of the College to regulate its members.
- The costs award was appropriate. The panel considered the seriousness of the misconduct, that not all of the allegations were proved, and the role of both parties in the length of the hearing.

This decision is consistent with several previous cases indicating that a definition of misconduct need not be overly precise to be valid.



The College of Naturopaths of Ontario

**Council Meeting Evaluation**  
**May 31, 2023**  
**8 Evaluations Received**

Topic	Question	Data	Overall
Were issues discussed essential?	Please rate how essential you feel the issues covered in today's meeting were using a scale: 1 - Not all all essential to 5 - Very Essential.	0 @ 1 0 @ 2 0 @ 3 2 @ 4 6 @ 5	<b>4.7</b>
Achieve Objectives?	Please rate how well you feel the meeting met the intended objectives using the following scale: 1 - Not at all met to 5 - All objectives met.	0 @ 1 0 @ 2 0 @ 3 2 @ 4 6 @ 5	<b>4.7</b>
Time Management	Please rate how well you feel our time was managed at this meeting using the following scale: 1 - Not at all managed to 5 - Very well managed.	0 @ 1 0 @ 2 0 @ 3 3 @ 4 5 @ 5	<b>4.6</b>
Meeting Materials	Please rate how helpful you feel the meeting materials for today's meeting were using the following scale: 1 - Not at all helpful to 5 - Very helpful.	0 @ 1 0 @ 2 0 @ 3 1 @ 4 7 @ 5	<b>4.8</b>
Right People	Please rate the degree to which you felt the right people were in attendance at today's meeting using the following scale: 1 - None of the right people were here to 5 - All of the right people were here.	0 @ 1 0 @ 2 0 @ 3 1 @ 4 7 @ 5	<b>4.8</b>
Your Preparedness	Please rate how you feel your own level of preparedness was for today's meeting using the following scale: 1 - Not at all adequately prepared to 5 - More than adequately prepared.	0 @ 1 0 @ 2 1 @ 3 1 @ 4 6 @ 5	<b>4.6</b>
Group Preparedness	Please rate how you feel the level of preparedness of your Council	0 @ 1 0 @ 2 0 @ 3	<b>4.2</b>

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	colleagues was for today's meeting using the following scale: 1 - Not at all adequately prepared to 5 - More than adequately prepared.	1 @ 4 6 @ 5			
Interactions between Council members	Please rate how well you feel the interactions between Council members were facilitated using the following scale: 1 - Not well managed to 5 - Very well managed.	0 @ 1 0 @ 2 0 @ 3 2 @ 4 6 @ 5	<b>4.7</b>		
What Worked Well	From the following list, please select the elements of today's meeting that worked well.				
	• Meeting agenda		<b>8/8</b>		
	• Council member attendance		<b>8/8</b>		
	• Council member participation		<b>8/8</b>		
	• Facilitation (removal of barriers)		<b>8/8</b>		
	• Ability to have meaningful discussions		<b>8/8</b>		
	• Deliberations reflect the public interest		<b>8/8</b>		
	• Decisions reflect the public interest		<b>8/8</b>		
Areas of Improvement	From the following list, please select the elements of today's meeting that need improvement.				
	• Meeting agenda		<b>0/8</b>		
	• Council member attendance		<b>0/8</b>		
	• Council member participation		<b>0/8</b>		
	• Facilitation (removal of barriers)		<b>0/8</b>		
	• Ability to have meaningful discussions		<b>0/8</b>		
	• Deliberations reflect the public interest		<b>0/8</b>		
	• Decisions reflect the public interest		<b>0/8</b>		
Things we should do	Are there things that you feel that the Council should be doing at its meetings that it is not presently doing?				
Final Feedback	The Council meeting went extremely well. Great meeting!				

## Comparison of Evaluations by Meeting 2023-2024

	2022/23 Overall	2023-2024						
Topic		May 2023	July 2023	Sept 2023	Nov 2023	Jan 2024	Mar 2024	Ave
Were issues discussed essential? 1 – Not at all essential to 5 – Very Essential.	<b>4.7</b>	4.6	4.7					<b>4.6</b>
Achieve Objectives? 1 - Not at all met to 5 - All objectives met.	<b>4.9</b>	5.0	4.7					<b>4.8</b>
Time Management 1 - Not at all managed to 5 - Very well managed.	<b>4.8</b>	5.0	4.6					<b>4.8</b>
Meeting Materials 1 - Not at all helpful to 5 - Very helpful.	<b>4.9</b>	4.9	4.8					<b>4.8</b>
Right People 1 - None of the right people to 5 - All of the right people.	<b>4.7</b>	4.7	4.8					<b>4.7</b>
Your Preparedness 1 - Not at all adequately prepared to 5 - More than adequately prepared.	<b>4.6</b>	4.5	4.6					<b>4.5</b>
Group Preparedness 1 - Not at all adequate 5 - More than adequate.	<b>4.5</b>	4.7	4.2					<b>4.4</b>
Interactions between Council members 1 - Not well managed to 5 - Very well managed.	<b>4.7</b>	5.0	4.7					<b>4.8</b>
Number of Evaluations	<b>7.7</b>	8	8					<b>4.67</b>



## The College of Naturopaths of Ontario

### Conflict of Interest Summary of Council Members Declarations 2023-2024

Each year, the Council members are required to complete an annual Conflict of Interest Declaration that identify where real or perceived conflicts of interest may arise.

As set out in the College by-laws, a conflict of interest is:

#### **16.01 Definition**

For the purposes of this article, a conflict of interest exists where a reasonable person would conclude that a Council or Committee member's personal or financial interest may affect their judgment or the discharge of their duties to the College. A conflict of interest may be real or perceived, actual or potential, and direct or indirect.

Using an Annual Declaration Form, the College canvasses Council members about the potential for conflict in four areas:

Based on positions to which they are elected or appointed;  
Based on interests or entities that they own or possess;  
Based on interests from which they receive financial compensation or benefit;  
Based on any existing relationships that could compromise their judgement or decision-making.

The following potential conflicts have been declared by the Council members for the period April 1, 2023 to March 31, 2024.

#### **Elected or Appointed Positions**

<b>Council Member</b>	<b>Interest</b>	<b>Explanation</b>
Dr. Amy Dobbie, ND	City Councilor (Family Member)	Father is an elected city councilor for the City of Quinte West. Does not believe it is a conflict – made a note of it in case.

#### **Interests or Entities Owned**

<b>Council Member</b>	<b>Interest</b>	<b>Explanation</b>
	None	



**Interests from which they receive Financial Compensation**

<b>Council Member</b>	<b>Interest</b>	<b>Explanation</b>
<b>None</b>		

**Existing Relationships**

<b>Council Member</b>	<b>Interest</b>	<b>Explanation</b>
<b>None</b>		

**Council Members**

The following is a list of Council members for the 2023-25 year and the date they took office for this program year<sup>1</sup>, the date they filed their Annual Conflict of Interest Declaration form and whether any conflict of interest declarations were made.

<b>Council Member</b>	<b>Date Assumed Office</b>	<b>Date Declaration Received</b>	<b>Any Declarations Made</b>
Dr. Jonathan Beatty, ND	May 31, 2023	May 29, 2023	None
Dr. Shelley Burns, ND	May 31, 2023	May 24, 2023	None
Dean Catherwood	May 31, 2023	May 26, 2023	None
Dr. Amy Dobbie, ND	May 31, 2023	May 25, 2023	Yes
Brook Dyson	May 31, 2023	May 30, 2023	None
Lisa Fenton	May 31, 2023	May 30, 2023	None
Dr. Anna Graczyk, ND	May 31, 2023	May 30, 2023	None
Tiffany Lloyd	May 31, 2023	June 9, 2023	None
Dr. Denis Marier	May 31, 2023	May 29, 2023	None
Sarah Griffiths-Savolaine	May 31, 2023	May 29, 2023	None
Paul Phillion	May 31, 2023	May 24, 2023	None
Dr. Jacob Scheer, ND	May 31, 2023	May 29, 2023	None
Dr. Jordan Sokoloski, ND	May 31, 2023	May 24, 2023	None

A copy of each Council members' Annual Declaration Form is available on the [College's website](#).

Updated: June 13, 2023

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<sup>1</sup> Each year, the Council begins anew in May at its first Council meeting. This date will typically be the date of the first Council meeting in the cycle unless the individual was elected or appointed.



The College of Naturopaths of Ontario

## **Report from the Council Chair**

### **September 2023**

This is the second Chair's Report of six for the current Council cycle and provides information for the period from July 1, 2022 to August 31, 2023.

The summer months marked a fairly quiet period for me. Andrew and I continue to correspond regularly and to meet as needed to discuss matters related to governance, strategy, or to respond to any queries from individual members of Council.

The scheduled stakeholder meeting with CCONM was postponed from July until later in the year. There is a meeting scheduled with the OAND in September.

As always, I encourage Council members not to hesitate to contact me should you have any questions or wish to discuss anything related to our role.

Respectfully submitted,

Dr. Jordan Sokoloski, ND  
Council Chair  
18 September 2023



The College of Naturopaths of Ontario

## Report on Regulatory Operations

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
<b>1.1 Regulatory Activity: Registration</b>								
<b>Registrants (Total)</b>		1859	-9					<b>1850</b>
General Class (Total)		→	→	→	→	→	→	→
	<i>In Good Standing</i>	1633	-3					1630
	<i>Suspended</i>	20	-3					17
Inactive Class (Total)		→	→	→	→	→	→	→
	<i>In Good Standing</i>	170	0					170
	<i>Suspended</i>	12	-3					9
Emergency Class (Total)		→	→	→	→	→	→	→
	<i>In Good Standing</i>	0	0					0
	<i>Suspended</i>	0	0					0
Life Registrants		24	0					24

<b>Changes in Registration Status Processed (Total)</b>								<b>27</b>
	Suspensions	8	0					8
	Resignations	2	1					3
	Revocations	5	2					7
	Reinstatements	1	0					1
	Class Changes (Total)	→	→	→	→	→	→	→
	General Class to Inactive Class	5	1					6
	Inactive Class to General Class	1	1					2
	Any Class to Life Registrant Status	0	0					0
	Emergency Class to General Class	0	0					0

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
<b>Professional Corporations (Total)</b>								<b>115</b>
Professional Corporations approved from prior periods		→	→	→	→	→	→	113
New applications approved		2	0					2
PC Renewals								
Renewed		20	19					39
Not Yet Renewed in this period		→	→	→	→	→	→	74
Revoked		0	0					0
Resigned/Dissolved		0	0					0

## 1.2 Regulatory Activity: Entry-to-Practise

<b>Total ETP Applications</b>								<b>1</b>
On-going applications from prior period(s)		→	→	→	→	→	→	17
New applications received		9	0					9
Certificates issued		22	3					25
<b>Applications Currently before the Registration Committee</b>								<b>0</b>
Referrals from prior period		→	→	→	→	→	→	0
New referrals		3	1					4
Decisions Issued		3	1					4
<b>Registration Committee Outcomes</b>								<b>4</b>
Approved		3	1					4
Approved – TCLs		0	0					0
Approved – Exams required		0	0					0
Approved – Education required		0	0					0
Denied		0	0					0

<b>Prior Learning and Recognition Program Activities in Process</b>								<b>1</b>
Applications from prior period		→	→	→	→	→	→	1
New applications received		0	0					0
Decisions rendered on applications		0	0					0

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
<b>1.3 Regulatory Activity: Examinations</b>								
<b>Examinations Conducted</b>								
Ontario Clinical Sciences Examination								
	Exam sittings scheduled	0	1					1
	Exam sittings held	0	1					1
	Number of candidates sitting exam	0	77					77
Ontario Biomedical Examination								
	Exam sittings scheduled	0	0					0
	Exam sittings held	0	0					0
	Number of candidates sitting exam	0	0					0
Ontario Clinical Practical Examination								
	Exam sittings scheduled	0	1					1
	Exam sittings held	0	1					1
	Number of candidates sitting exam	0	53					53
Ontario Therapeutic Prescribing Examination								
	Exam sittings scheduled	1	0					1
	Exam sittings held	1	0					1
	Number of candidates sitting exam	45	0					45
Ontario Intravenous Infusion Examination								
	Exam sittings scheduled	1	0					1
	Exam sittings held	1	0					1
	Number of candidates sitting exam	22	0					22
<b>Examination Appeals</b>								
Ontario Clinical Sciences Examination Appeals (Total)								0
	Appeal Granted	0	0					0
	Appeal Denied	0	0					0
Ontario Biomedical Examination Appeals (Total)								0
	Appeal Granted	0	0					0
	Appeal Denied	0	0					0

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
Ontario Clinical Practical Examination Appeals (Total)								0
	Appeal Granted	0	0					0
	Appeal Denied	0	0					0
Ontario Therapeutic Prescribing Examination Appeals (Total)								0
	Appeal Granted	0	0					0
	Appeal Denied	0	0					0
Ontario Intravenous Infusion Examination Appeals (Total)								0
	Appeal Granted	0	0					0
	Appeal Denied	0	0					0

<b>Exam Questions Developed (Total)</b>								<b>93</b>
CSE questions developed		0	0					0
BME questions developed		0	93					93

<b>1.4 Regulatory Activity: Patient Relations</b>								
<b>Funding applications</b>								
New applications Received								0
	Funding application approved	0	0					0
	Funding application declined	0	0					0
<b>Number of Active Files</b>								
Funding Provided		\$691	\$1,610					\$2,301

<b>1.5 Regulatory Activity: Quality Assurance</b>								
<b>Peer &amp; Practice Assessments (Total for Year)</b>								<b>83</b>
	Pool selected by QAC	→	→	→	→	→	→	→
	Assessments ordered by QAC	1	1					2
	Completed	0	16					16
	Deferred to later year	2	1					3

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
<b>Quality Assurance Committee Reviews</b>								
Assessments reviewed by Committee		0	0					0
	Satisfactory Outcome	0	0					0
	Ordered Outcome (SCERP, TCL, etc.)	0	0					0
<b>CE Reporting</b>								
	Number in group	0	0	100				100
	Number received	0	0	98				98
	Number of CE Reports with deficiencies							
<b>QAC Referrals to ICRC</b>								
		1	0					1
<b>1.6 Regulatory Activity: Inspection Program</b>								
<b>Registered Premises (Total Current)</b>								<b>148</b>
	Total Registered from prior year (as of May 1)	→	→	→	→	→	→	148
	Newly registered	4	2					6
	De-registered	6	0					6
<b>Inspections of Premises</b>								
	New Premises							
	Part I Completed	3	3					6
	Part II Completed	6	1					7
	5-year Anniversary Inspections							
	Premises requiring 5-year inspection	→	→	→	→	→	→	56
	Completed	8	4					12
<b>Inspection Outcomes</b>								
	New premises-outcomes (Parts I & II)							
	Passed	6	8					14
	Pass with conditions	5	4					9
	Failed	0	0					0

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
5-year Anniversary Inspection Outcomes								
	Passed	8	5					13
	Pass with conditions	3	4					7
	Failed	0	0					0

<b>Type 1 Occurrence Reports (Total Reported)</b>								<b>4</b>
	Patient referred to emergency	2	1					3
	Patient died	0	0					0
	Emergency drug administered	1	0					1

<b>1.7 Regulatory Activity: Complaints and Reports</b>								
<b>Complaints and Reports (Total On-going)</b>								<b>19</b>
	Complaints carried forward from prior period(s)	→	→	→	→	→	→	10
	Reports carried forward from prior period(s)	→	→	→	→	→	→	6
	New Complaints	3	2					5
	New Reports	0	3					3
	Matters returned by HPARB	2	0					2
	Complaints and Reports completed	5	2					7
<b>ICRC Outcomes (files may have multiple outcomes)</b>								
	Letter of Counsel	0	1					1
	SCERP	0	0					0
	Oral Caution	0	1					1
	SCERP & Caution	3	0					3
	No action needed	1	0					1
	Referred to DC	0	0					0
<b>Summary of concerns (files may have multiple concerns)</b>								
	Advertising	0	2					2
	Failure to comply	0	0					0
	Ineffective treatment	3	1					4
	Out of scope	0	0					0



Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
	Record keeping	0	0					0
	Fees & billing	2	1					3
	Lab testing	0	0					0
	Delegation	0	0					0
	Harassment	0	0					0
	QA Program comply	0	1					1
	C&D compliance	0	0					0
	Failure to cooperate	0	0					0
	Boundary issues	0	0					0
	Practising while suspend.	0	1					1
	Unprofessional, unbecoming conduct	0	0					0
	Other	0	0					0

### 1.8 Regulatory Activity: Unauthorized Practitioners

#### Cease and Desist Letters

	Letters Issued	2	1					3
	Letters signed back by practitioner	1	0					1

#### Injunctions from Court

	Sought	0	1					1
	Approved	0	0					0

### 1.9 Regulatory Activity: Hearings

#### Matters Referred by ICRC

	Referrals to the Discipline Committee (Total)							3
	Referrals from prior period	→	→	→	→	→	→	3
	New referrals	0	0					0
	Referrals to the Fitness to Practise Committee (Total)							0
	Referrals from prior period	→	→	→	→	→	→	0
	New referrals	0	0					0

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
<b>Disciplinary Matters</b>								
Pre-hearing conferences								
	Scheduled	1	1					2
	Completed	0	2					2
Discipline hearings								
	Contested	0	0					0
	Uncontested	0	1					1
Outcomes of Contested Matters								
	Findings made	0	0					0
	No findings made	0	0					0
<b>FTP Hearings</b>								
	Finding of incapacitated	0	0					0
	No finding made	0	0					0

<b>1.10 Regulatory Activity: Regulatory Guidance</b>								
<b>Inquiries Received (Total)</b>								<b>176</b>
	E-mail	65	49					114
	Telephone	38	24					62
<b>Most Common Topics of Inquiries</b>								
	Scope of practice	9	5					14
	Conflict of interest	4	3					7
	Tele-practice	11	9					20
	Inspection program	0	4					4
	Patient visits	7	0					7
	Advertising	0	0					0
	Lab testing	6	9					15
	Notifying patients when moving	0	0					0
	Fees & billing	0	4					4
	Record keeping	9	4					13

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
	Consent and Privacy	5	0					5
	Grads Practising with Registrant	0	0					0
	Injections	7	0					7
	Discharging a patient	0	0					0
	Registration & CPR	0	0					0
	Prescribing	4	4					8
	Delegation and Referrals	6	3					9
	Endorsements	0	3					3

1.11 Regulatory Activity: HPARB Appeals								
Registration Committee Decisions before HPARB								0
	Appeals carried forward from prior period	→	→	→	→	→	→	→
	New appeals filed with HPARB	0	0					0
	Files where HPARB rendered decision	0	0					0
HPARB Decisions on RC Matters								
	Upheld	0	0					0
	Returned	0	0					0
	Overturned	0	0					0
ICRC Decisions before HPARB (Total current)								
	Appeals carried forward from prior period	→	→	→	→	→	→	→
	New appeals filed with HPARB	0	1					1
	Files where HPARB rendered decision	2	0					2
HPARB Decisions on ICRC Matters								
	Upheld	0	0					0
	Returned	2	0					2
	Overturned	0	0					0

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
<b>1.12 Regulatory Activity: HRTO Matters</b>								
<b>Matters filed against the College</b>								
	Matters in progress from prior period(s)	1	0					1
	New matters	0	0					0
	Matters where HRTO rendered a decision	0	0					0
	HRTO Decisions on Matters							
	In favour of applicant	0	0					0
	In favour of College	0	0					0



The College of Naturopaths of Ontario

## MEMORANDUM

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**DATE:** September 27, 2023

**TO:** Council members

**FROM:** Dr. Brenda Lessard-Rhead, ND (Inactive)  
Chair, Governance Policy Review Committee

**RE:** Review of the Executive Limitations Policies (Part 2)

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The Governance Policy Review Committee (“GPRC”) met on September 12, 2023, to review the Executive Limitations Policies EL10.04-EL17.02 (Part 2) policy suggestions that had been submitted as part of the regular policy review, as well as to consider on-going changes to other policies.

### 1. Executive Limitations Policies.

In keeping with the revised Council Annual Cycle, the September meeting of the Council includes a detailed review of the Executive Limitations Policies EL10.04-EL17.02 (Part 2):

- EL10.04 – Workplace Harassment
- EL11.02 – Administration of Statutory Committees and Panels
- EL12.05 – Operation of the Public Register and Information Registries
- EL13.01 – Treatment of Registrants
- EL14.01 – Support to Council
- EL15.01 – Program Administration
- EL16.02 – Treatment of the Public
- EL17.02 – Restricted Reserve Funds

The staff circulated information to Council members in advance of the Committee meeting. No feedback was provided by Council members with respect to any of the Executive Limitations Policies EL10.04-EL17.02 (Part 2); however, the Committee has reviewed the policies in detail and has several recommendations for consideration of Council.

### **EL10.04 – Workplace Harassment**

The Committee reviewed this policy and made two grammatical amendments to the policy.

**Recommendation** – Replace “physical conduct” with “physical contact” under sexual harassment on page one.

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**Recommendation** – In bullet point #4, on the second page, add “and maintain” after “develop”.

**EL13.01 – Treatment of Registrants**

The Committee reviewed this policy and made two grammatical amendments to the policy.

**Recommendation** – Amend bullet point #1 to read, “Ensure that Registrant’s reasonable requests or concerns raised are responded to in a timely manner”.


**Recommendation** – Amend bullet point #5 to read, “Inform and educate Registrant’s about their professional responsibilities and the consequence of non-compliance.”

 The College of Naturopaths of Ontario	Policy Type	COUNCIL POLICIES
	EXECUTIVE LIMITATIONS	Item 5.02
	Title	Policy No. EL10.04
	Workplace Harassment	Page No. 1

*The College of Naturopaths of Ontario is committed to providing a work environment in which all individuals are treated with respect and dignity. Workplace harassment, racism and/or discrimination will not be tolerated from any person in the workplace. The Council, through the Chief Executive Officer (CEO) is responsible for promoting a diverse workforce that is inclusive of everyone.*

Definitions	Microaggression	Means an action or verbal message that intentionally – or more often – unintentionally conveys a stereotype, negative trait, or general insensitivity associated with someone’s race, gender, identity, sexual orientation, language abilities or other identity markers. It is a subtle jab that reminds someone that they are the “other” in some way. The more often microaggressions are heard, the bigger the impact they will have on a person’s well-being. For members of underrepresented groups, microaggressions can be a daily experience, forcing them to question whether they belong and creating anxiety about how others perceive them.
	Workplace Harassment	Means engaging in a course of vexatious comments or conduct that is known or ought to be known, to be unwelcome. It may include, but is not limited to, any of the following. <ul style="list-style-type: none"> <li>a) Unwelcome, offensive or objectionable conduct.</li> <li>b) Making remarks, jokes or innuendos that demean, ridicule, intimidate or offend; displaying or circulating offensive pictures or materials in print or electronic form.</li> <li>c) Bullying.</li> <li>d) Repeated offensive or intimidating phone calls or e-mails.</li> <li>e) And sexual harassment.</li> </ul> <p>Harassment may also relate to a form of discrimination as set out in the <i>Ontario Human Rights Code</i>, though it does not have to, including harassment based on, but not limited to, race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, religious beliefs, political beliefs, culture or other ideologies.</p>
	Sexual harassment	Means any unsolicited conduct, comment or physical <del>conduct</del> <b>contact</b> of a sexual nature that is unwelcome by the recipient. It includes, but is not limited to, any of the following. <ul style="list-style-type: none"> <li>a) Unwelcome sexual advance (oral, written or physical).</li> <li>b) Requests for sexual favours.</li> <li>c) Unwelcome sexual or gender-related comments, innuendos, remarks, jokes or taunts.</li> <li>d) Unnecessary physical contact such as patting, touching, pinching or hitting.</li> <li>e) Displays of sexually degrading, offensive or derogatory materials such as graffiti or pictures.</li> <li>f) And sexual assault.</li> </ul>

DATE APPROVED	DATE LAST REVISED
July 30, 2013	November 30, 2022

 The College of Naturopaths of Ontario	Policy Type	COUNCIL POLICIES
	EXECUTIVE LIMITATIONS	Item 5.02
	Title	Policy No. EL10.04
	Workplace Harassment	Page No. 2

Accordingly, the Chief Executive Officer (CEO) shall not fail to perform any of the following duties and responsibilities.


- 1 Take whatever steps are reasonable to ensure that the workplace is free from harassment and/or microaggressions and promotes diversity and inclusivity.
- 2 Ensure that all workers are educated about and uphold this policy.
- 3 Ensure that all workers collaborate to prevent workplace harassment and/or microaggressions and promote diversity and inclusivity.
- 4 Develop **and maintain** a Workplace Harassment Prevention Program, acceptable to the Council, which implements this policy including but not limited to measures and procedures to protect workers from harassment and/or microaggressions and a process for workers to report incidents or raise concerns.
- 5 Ensure that this policy and the supporting program are implemented and maintained and that all workers have the appropriate information and instruction to protect them from workplace harassment and/or microaggressions.
- 6 Ensure that all workers adhere to this policy and the supporting program and that every worker is encouraged to raise any concerns about workplace harassment and/or microaggressions and to report any incidents.
- 7 Investigate and deal with all incidents and complaints of workplace harassment and/or microaggression in a timely and fair manner, respecting the privacy of all concerned to the extent it is possible.

*This policy is not intended to limit or constrain the reasonable exercise of management functions in the workplace. Nothing in this policy prevents or discourages a worker from filing an application with the Human Rights Tribunal of Ontario (or any successor agency) on a matter related to Ontario's Human Rights Code<sup>1</sup>. A worker also retains the right to exercise any other legal avenues that may be available.*

<sup>1</sup> Please refer to section 34 of the Ontario Human Rights Code for provisions surrounding timing of the filing of an application for review by the Tribunal.

DATE APPROVED	DATE LAST REVISED
July 30, 2013	November 30, 2022



 The College of Naturopaths of Ontario	Policy Type	COUNCIL POLICIES
	EXECUTIVE LIMITATIONS	Item 5.02
	Title	Policy No. EL13.01
	Treatment of Registrants	Page No. 1

*With respect to interactions with Registrants, the Chief Executive Officer (CEO) shall not cause or allow conditions, procedures, or decisions that are unsafe, undignified, unnecessarily intrusive, fail to provide appropriate confidentiality or privacy or that are not in compliance with the Regulated Health Professions Act, 1991 or the College Regulations.*

Accordingly, the CEO shall not fail to do any of the following.

- 1 ~~Address and respond to Registrants' requests or concerns in a timely manner.~~  
Ensure that Registrant's reasonable requests or concerns raised are responded to in a timely manner.
- 2 Use methods of collecting, reviewing, transmitting or storing information that protect against improper access to the information elicited.
- 3 Provide a mechanism for the regular communication of College and Council business to Registrants.
- 4 Take reasonable steps to communicate individual rights under the RHPA and College Regulations to current, potential and past Registrants.
- 5 Inform and educate Registrants about their Pprofessional responsibilities and the consequences of non-compliance.
- 6 Ensure conditions exist that allow reasonable access to the College by people with special needs.

DATE APPROVED	DATE LAST REVISED
July 30, 2013	January 27, 2021



The College of Naturopaths of Ontario

## MEMORANDUM

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**DATE:** September 15, 2023

**TO:** Council members  
College of Naturopaths of Ontario

**FROM:** Agnes Kupny  
Director of Operations

**RE:** Variance Report – Q1 Unaudited Financial Statements

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I am pleased to provide this Variance Report and the Unaudited Financial Statements of the College of Naturopaths of Ontario as of June 30, 2023, which represents the first quarter (Q1) of our fiscal year 2023-2024.

### Statement of Financial Position

The Statement of Financial Position provides a snapshot of the financial standing of the organization at the point in time for which it is dated, in this case, as of June 30, 2023.

At the end of Q1 the College is in a good financial position.

This year we have increased our Allowance for Doubtful Accounts by \$10,000 due to the outcomes of two contested hearings held in our last fiscal year and the disciplinary costs awarded.

In turn our Ordered DC Costs account is \$79,283.04 for monies owing to the College, however no payments from either Registrant have been made to date.

This year the College has also seen an increase to its accounts receivable with 672 Registrants participating in our pre-authorized payment plan that starts with its first monthly deduction on April first for a total of 10 payments. Our enrollment is up by 17% from the previous year which is equivalent to an additional 120 participants. In April when our first file of pre-authorized Registrants is transmitted to the bank, it is the month in which we have our highest volume of errors. In April 2023 we had 12 transactions returned due to incorrect data entry of banking information and 14 transactions were incomplete due to returned items for a 4% error rate. In May our error rate decreased to 1.5% and in June our rate was 1%.

HST Payable Other Liabilities have returned to be within normal business practice limits as the College returns to a normal fiscal year cycle.

Retained earnings and all College reserve funds have the same balances being carried over from the end of our last fiscal year, due to the College ending the year in a small financial deficit.

## Statement of Operations

The Statement of Operations, as well as an analysis of the Statement of Operations is attached following the Statement of Financial position. For the analysis, the coloured legend is as follows:

- **Blue**- notes actual budget and actual expenditures for Q1 only.
- **Green**- is a calculation of how much was spent in Q1 versus the Q1 budget.
- **Yellow**- historical data from the previous year to illustrate actual expenditures versus the budget.
- **Purple**- captures the budget and actual expenditures compounding from quarter to quarter. In this report the table includes data for Q1 only.
- **Pink**- illustrates the actual annual budget and the percentage of the budget received or spent to date.

### Revenue

Total Year-to-Date actual revenue was \$3,258,774. This compares to the Year-to-Date budget of \$3,138,993 resulting in a favourable balance of \$119,781. At the end of the quarter the College is 13% away from meeting its annual budgeted targets.

No revenue was generated via Misc. Income which has a small budget allocation nor DC Ordered Costs. In our accounts receivable \$80,257.48 of monies owing are to this program that remain outstanding by Registrants.

The primary line items that resulted in the favourable variance were registration fees, examination fees and banking fees. Incorporation fees and Inspection fees had small unfavourable variances, both within 11% of meeting their budgeted targets.

Line Item	Current 2023-2024 Fiscal Year				Prior 2022-2023 Fiscal Year		
	Year to Date Revenue	Year to Date Budget	Variance in \$	% within the Budget	Q1- Actual Revenue	Q1- Variance in \$	Q1- Variance in %
Registration Fees	\$3,073,470	\$2,972,868	\$100,602	%103 Over budget	\$2,824,996	\$10,828	100% within budget
Examination Fees	\$119,150	\$62,725	\$56,425	%190 Over budget	\$90,342	\$58,342	282% Over budget
Ordered Costs Recovered	\$0	\$45,000	(\$45,000)	100% Under budget	\$4,600	(\$44,400)	91% Under budget
Interest	\$4,296	\$600	\$3,696	716% Over budget	\$776	\$176	129% Over budget
Investment Income	\$16,408	\$7,700	\$8,708	213% Over budget	\$1,372	(\$2,228)	62% under budget
Misc. Income	\$0	\$200	(\$200)	100% Under budget	\$70	(\$3,630)	98% under budget

**Registration Fees (103% of YTD Budget)**– The number of active and inactive Registrants is comparable to the previous year. Fees were increased by the Consumer Price Index (CPI). This line item has also met its full annual budgeted allocation.

**Examination Fees (190% of YTD Budget)** –This quarter 32 Jurisprudence exams, 53 Therapeutic exams, and 50 for the Clinical Practical exam in addition to a few re-takes. The positive variance includes \$15,450 of deferred revenue and 65 participants in the Clinical Science exam which was budgeted for in Q2.

**DC Ordered Costs (100% short of YTD Budget)**- All Registrants who have ordered costs are either on a repayment plan that is distributed over a period of one to two years, and we also have Registrant accounts in which we are not anticipating being able to recover these costs.

**Interest (716% of YTD Budget)**- The College's chequing accounts bears little to no interest due to the number transactions and service fees. The College's savings account has an already low interest rate, however a small rate increase in this quarter has generated a higher rate of return.

**Investment Income- (213% of YTD Budget)**- The College's investment portfolio has been renewed and we are anticipating a slightly higher rate of return on the GIC, which gets renewed annually and in turn one interest payment is incurred. The mutual fund has also experienced a positive rate of return.

**Misc. Income (100% short of YTD Budget)**- There was a small allocation of \$200 in Q1 for miscellaneous revenue including any outstanding office item purchases due to our office move. At the end of Q1 no revenue for this line was generated.

## Expenses

Total Year-to-Date expenses were \$739,305 versus the Year-to-Date budget of \$1,112,486. The favorable variance of \$373,181 is within 34% of the budget. There were a total of three-line items that exceeded budgeted expectations. These items are Rent and Utilities, Council Fees and Expenses and Printing and Postage.

The accounts with the greatest cost savings this quarter include: Salary and Benefits, Consulting Fees General, Consulting Fees-Assessors/Inspectors, Exam Fees and Expenses, Legal Fees-Complaints, Hearings, Equipment Maintenance and Public Education.

Line Item	2023-2024				2022-2023		
	Year to Date Expense	Year to Date Budget	Variance in \$	% within the Budget	Q1-Actual Expense	Q1-Variance in \$	Q1-Variance in %
Rent and Utilities	\$46,784	\$36,500	(\$10,284)	128% Over budget	\$75,221	\$10,532	12% Under budget
Council Fees and Expenses	\$45,621	\$39,839	(\$5,782)	115% Over budget	\$19,784	\$38,966	66% Under budget

Postage and Courier	\$428	\$342	(\$86)	125% Over budget	\$360	\$109	23% Under budget
Salaries and Benefits	\$407,066	\$571,518	\$164,452	29% Under budget	\$436,241	\$16,081	4% Under budget
Consulting Fees- Assessors	\$5,766	\$7,500	\$1,734	23% Under budget	\$7,378	\$1,022	12% Under budget
Exam Fees and Expenses	\$58,642	\$81,415	\$22,773	28% Under budget	\$19,036	\$51,127	73% Under budget
Legal Fees- Complaints	\$19,463	\$24,000	\$4,537	19% Under budget	\$18,382	\$5,243	22% Under budget
Hearings	\$8,807	\$11,915	\$3,108	26% Under budget	\$15,000	\$3,309	78% Under budget
Equipment Maintenance	\$9,795	\$12,890	\$3,095	24% Under budget	\$12,652	\$250	2% Under budget
Public Education	\$48,114	\$70,795	\$22,681	32% Under budget	\$22,547	\$3,497	13% Over budget

**Rent and Utilities (128% of YTD Budget)-** At the end of Q1, the College had budgeted the payment of rent over two months as was anticipating the return of the College's last months security deposit from the previous landlord. This differential will be balanced between Q3 and Q4 when the College receives its security deposit.

**Council Fees and Expenses (115% of YTD Budget)-** All Council and Committee budgets are within target. The overage for this quarter was due to an installment for Satori Consulting being remitted in Q1 vs. budget of Q2.

**Postage and Courier (125% of YTD Budget)-** There is a small overage of \$86. The postage machine is replenished with \$150 on each occasion on an as needed basis. The College also incurred increased courier costs to ship IT equipment for new hires.

**Salaries and Benefits (29% of YTD Budget)-** In the first quarter the College experienced costs savings primarily due to the College's revised staffing model for the current fiscal year. There was a total of three new positions created and all three positions were hired within Q1, but not at the start of Q1.

**Consulting Fees Assessors (23% of YTD Budget)-** A total of 20 inspections were completed this quarter. Ten were completed for new premises and ten were completed for the 5-year reassessment. This is in line with the budget, a few inspections were completed at the end of June that had yet to be submitted by the assessors.

**Exam Fees and Expenses (28% of YTD Budget)** – The exam program is run on a cost recovery basis. Approximately \$35,000 is due to late billing pending from Yardstick for the maintenance of the Clinical Sciences exam. Costs were also allocated in Q1 for the Prescribing Exam which will be taking place in Q2.

**Legal Fees-Complaints (19% of YTD Budget)**- A total of four complaints and one Registrar Investigation were opened and four complaints and one Registrar Investigation were closed.

**Hearings (26% of YTD Budget)**- There were no contested or uncontested hearings held this quarter. Investigations and legal work are currently underway for an uncontested hearing anticipated in Q2.

**Equipment Maintenance (24% of YTD Budget)**- The College received late billing by the vendor for the photocopier and the College was in receipt of a vendor credit to resolve some service delivery issues.

**Public Education (32% of YTD Budget)**- The majority of fees for this program have been deferred to Q2 for the preparation, design and translation of our Annual Report and website re-design.

#### Overall Standing

Based on the analysis provided, as highlighted in pink, the overall revenues at the end of Q1 are at 87% of budget, well ahead based on Q1 but consistent with the revenue cycle of the College which sees most revenues received at the start of the fiscal year. Overall expenses are at 19% of the budget which is consistent for the end of the quarter using the benchmark of 25%.

#### Capital Expenditures

This quarter only the IT equipment capital was utilized for the purchase of two laptops to support the Human Resources Plan for 2023/2024 with additional resources. A total of 35% of the IT equipment has been used to date.

No purchases have been made for Office Furniture and Fixtures and there is no plan for expenditures in this line item for Q2.

The Leasehold Improvement budget we are anticipating to utilize between Q3 and Q4. The College has engaged an architect to prepare drawings for tender and these drawings have been submitted to the City of Toronto for approval. Next step in the process will be for contractors to bid on the scope of work being proposed.

This report is a highlight of the overall financial picture of the College for the relevant reporting period. If you have any questions or would like to discuss any aspects of this report, I am happy to do so.

Respectfully submitted.



The College of Naturopaths of Ontario

**STATEMENT OF FINANCIAL POSITION**  
**As of June 30, 2023 (Q1)**  
**25% of Fiscal Year**

**ASSETS**

Chequing / Savings		
Bank - Operating Funds	\$	86,514.02
Bank - Savings	\$	1,344,178.22
Petty Cash	\$	500.00
Refund Clearing	\$	(1,454.54)
<i>Total Chequing / Savings</i>		<u>\$ 1,429,737.70</u>
Accounts Receivable		
Accounts Receivable	\$	936,399.09
Allowance for Doubtful Accounts	\$	(43,015.68)
Ordered DC Costs	\$	79,283.04
<i>Total Accounts Receivable</i>		<u>\$ 972,666.45</u>
Other Current Assets		
Prepaid Expenses	\$	47,878.58
Investment in Mutual funds	\$	1,615,536.87
Accrued Interest	\$	8,233.51
Investment in GIC	\$	515,388.75
<i>Total Other Current Assets</i>		<u>\$ 2,187,037.71</u>
Fixed Assets		
Construction	\$	-
Computer Equipment	\$	94,050.26
Furniture and Fixtures	\$	150,050.08
Accumulated Amortn - Computers	\$	(69,265.18)
Accumulated Amortn - Furniture	\$	(129,388.69)
<i>Total Fixed Assets</i>		<u>\$ 45,446.47</u>

**TOTAL ASSETS****\$ 4,634,888.33****LIABILITIES AND EQUITY**

Accounts Payable		
Accounts Payable	\$	81,770.73
Credit cards	\$	(15,719.61)
<i>Total Account Payable</i>		<u>\$ 66,051.12</u>
Other Current Liabilities		
Accrued Liabilities	\$	37,038.82
Accrued Liabilities-Discipline	\$	-
Deferred Income	\$	-
HST Payable	\$	130,922.48
<i>Total Current Liabilities</i>		<u>\$ 167,961.30</u>
Equity		
Retained Earnings	\$	(332,159.76)
Patient Relations Fund	\$	90,385.13
Business Continuity Fund	\$	1,083,877.00
Investigations and Hearing Fund	\$	1,004,246.00
Succession Planning Fund	\$	50,000.00
Current Earnings	\$	2,504,527.54
<i>Total Equity</i>		<u>\$ 4,400,875.91</u>

**TOTAL LIABILITIES AND EQUITY****\$ 4,634,888.33**





The College of Naturopaths of Ontario

Analysis of Statement of Operations for Q1 commencing April 1, 2023 to June 30, 2023

	Q1						12 MONTH ENDING MARCH 31, 2024				ANNUAL BUDGET	% OF BUDGET REC'D AND/OR SPENT
	Apr-Jun'23 Budget	Apr-Jun'23 Actual	BUDGET FAV (UNFAV) VARIANCE		Apr-Jun'22 Actual	Apr-Jun'22 FAV (UNFAV) VARIANCE	YTD Budget	YTD Actual	BUDGET FAV (UNFAV) VARIANCE			
	\$'s	\$'s			\$'s		\$'s	\$'s				
Revenue			\$	%		\$			\$	%	\$	%
Registration and Member Renewals	2,972,868	3,073,470	100,602	103%	2,824,996	10,828	2,972,868	3,073,470	100,602	103%	3,049,041	101%
Examination Fees	62,725	119,150	56,425	190%	90,342	58,342	62,725	119,150	56,425	190%	337,625	35%
Deferred Capital Funding	-	-	-	0%	-	-	-	-	-	0%	-	0%
Incorporation Fees	7,400	6,550	(850)	89%	5,750	(6,200)	7,400	6,550	(850)	89%	29,000	23%
Ordered Costs Recovered	45,000	-	(45,000)	0%	4,600	(44,400)	45,000	-	(45,000)	0%	135,000	0%
Inspection Fees	42,500	38,900	(3,600)	92%	20,900	(21,600)	42,500	38,900	(3,600)	92%	170,000	23%
Interest	600	4,296	3,696	716%	776	176	600	4,296	3,696	716%	2,400	179%
Investment Income	7,700	16,408	8,708	213%	1,372	(2,228)	7,700	16,408	8,708	213%	18,200	90%
Miscellaneous Income	200	-	(200)	0%	70	(3,630)	200	-	(200)	0%	400	0%
Total Revenue	3,138,993	3,258,774	119,781	104%	2,948,806	(8,712)	3,138,993	3,258,774	119,781	104%	3,741,666	87%
Expenses												
Salaries and Benefits	571,518	407,066	164,452	29%	436,241	16,081	571,518	407,066	164,452	29%	2,112,864	19%
Rent and Utilities	36,500	46,784	(10,284)	-28%	75,221	10,532	36,500	46,784	(10,284)	-28%	191,300	24%
Office and General	68,622	31,913	36,709	53%	27,824	9,706	68,622	31,913	36,709	53%	258,173	12%
Consulting Fees-General	8,700	17,328	(8,628)	-99%	2,741	14,459	8,700	17,328	(8,628)	-99%	57,750	30%
Consulting Fees-Complaints and Inquires	35,250	11,402	23,848	68%	25,430	9,820	35,250	11,402	23,848	68%	132,000	9%
Consulting Fees-Assessors/Inspectors	7,500	5,766	1,734	23%	7,378	1,022	7,500	5,766	1,734	23%	65,000	9%
Exam Fees and Expenses	81,415	58,642	22,773	28%	19,036	51,127	81,415	58,642	22,773	28%	319,283	18%
Legal Fees-General	7,200	2,310	4,890	68%	2,614	8,744	7,200	2,310	4,890	68%	28,400	8%
Legal Fees-Complaints	24,000	19,463	4,537	19%	18,382	5,243	24,000	19,463	4,537	19%	104,000	19%
Legal Fees-Discipline	90,000	27,698	62,302	69%	40,614	51,386	90,000	27,698	62,302	69%	300,000	9%
Council Fees and Expenses	39,839	45,621	(5,782)	-15%	19,784	38,966	39,839	45,621	(5,782)	-15%	193,694	24%
Hearings (Discipline, Fitness to Practice)	11,915	8,807	3,108	26%	3,309	11,691	11,915	8,807	3,108	26%	42,945	21%
Amortization/Depreciation	-	-	-	0%	-	-	-	-	-	0%	28,425	0%
Insurance	36,000	10,409	25,591	71%	32,682	(5,682)	36,000	10,409	25,591	71%	36,000	29%
Equipment Maintenace	12,890	9,795	3,095	24%	12,652	250	12,890	9,795	3,095	24%	50,960	19%
Audit Fees	-	-	-	0%	-	-	-	-	-	0%	17,000	0%
Public Education	70,795	48,114	22,681	32%	22,547	3,497	70,795	48,114	22,681	32%	112,555	43%
Education and Training	10,000	2,700	7,300	73%	4,840	9,515	10,000	2,700	7,300	73%	13,975	19%
Printing and Postage	342	428	(86)	-25%	360	109	342	428	(86)	-25%	1,327	32%
Total Expenses	1,112,486	754,247	358,239	32%	751,655	236,465	1,112,486	754,247	358,239	32%	4,065,650	19%
Total Revenue over Expenses	2,026,507	2,504,527	(238,458)	-12%	2,197,151	(245,177)	2,026,507	2,504,527	(238,458)	-12%	(323,984)	





## The College of Naturopaths of Ontario

## Statement of Operations

2023-2024				
	Budget	Y-T-D Actual	YTD as % of Budget	Apr-June'23 Budget
<b>REVENUES</b>				
Registration and member renewal fees	\$ 3,049,041	\$ 3,073,470	101%	\$ 2,972,868
Examination fees	\$ 337,625	\$ 119,150	35%	\$ 62,725
Deffered capital funding	\$ -	\$ -	#DIV/0!	\$ -
Incorporation fees	\$ 29,000	\$ 6,550	23%	\$ 7,400
Ordered costs recovered	\$ 135,000	\$ -	0%	\$ 45,000
Inspection fees	\$ 170,000	\$ 38,900	23%	\$ 42,500
Interest	\$ 2,400	\$ 4,296	179%	\$ 600
Investment Income	\$ 18,200	\$ 16,408	90%	\$ 7,700
Miscellenous	\$ 400	\$ -	0%	\$ 200
<b>TOTAL REVENUES</b>	\$ 3,741,666	\$ 3,258,774		\$ 3,138,993
<b>EXPENSES</b>				
Salaries and benefits	\$ 2,112,864	\$ 407,066	19%	\$ 571,518
Rent and utilities	\$ 191,300	\$ 46,784	24%	\$ 36,500
Office and general	\$ 258,173.10	\$ 31,913.34	12%	\$ 68,622
Consulting fees				
Consultants - general	\$ 57,750	\$ 17,328	30%	\$ 8,700
Consultants - complaints and inquiries	\$ 132,000	\$ 11,402	9%	\$ 35,250
Consultants - assessors/inspectors	\$ 65,000	\$ 5,766	9%	\$ 7,500
Exam fees and expenses	\$ 319,283	\$ 58,642	18%	\$ 81,415
Legal fees				
Legal fees - general	\$ 28,400	\$ 2,310	8%	\$ 7,200
Legal fees - complaints	\$ 104,000	\$ 19,463	19%	\$ 24,000
Legal fees - discipline	\$ 300,000	\$ 27,698	9%	\$ 90,000
Council fees and expenses	\$ 193,694	\$ 45,621	24%	\$ 39,839
Hearings (Discipline, Fitness to Practise)	\$ 42,945	\$ 8,807	21%	\$ 11,915
Amortization/Depreciation	\$ 28,425	\$ -	0%	\$ -
Insurance	\$ 36,000	\$ 10,409	29%	\$ 36,000
Equipment maintenance	\$ 50,960	\$ 9,795	19%	\$ 12,890
Audit fees	\$ 17,000	\$ -	0%	\$ -
Public education	\$ 112,555	\$ 48,114	43%	\$ 70,795
Education and training	\$ 13,975	\$ 2,700	19%	\$ 10,000
Postage & Courier	\$ 1,327	\$ 428	32%	\$ 342
<b>TOTAL EXPENSES</b>	\$ 4,065,650	\$ 754,247		\$ 1,112,486
<b>EXCESS OF REVENUES OVER EXPENSES</b>	\$ (323,984)	\$ 2,504,528		\$ 2,026,507



The College of Naturopaths of Ontario

**2023-24 Capital Statement**

Line Item	Total Budget (April 2023-March 2024)	April	May	June	July	August	September	October	November	December	January	February	March	YTD Actual	Balance
Computer Equipment	\$14,000.00		\$4,939.92											\$4,939.92	\$9,060.08
Furniture & Fixtures	\$3,000.00													\$0.00	\$3,000.00
Leasehold Improvement	\$30,000.00													\$0.00	\$30,000.00
Total	\$47,000.00													\$4,939.92	\$42,060.08



The College of Naturopaths of Ontario

### **Volunteer List Redacted**

Pursuant to paragraph (d) of section 7(2) of the Health Professions Procedural Code, Schedule 2 of the *Regulated Health Professions Act, 1991*. The names of the College volunteers are protected under the same authority and have therefore been redacted from the Council meeting materials being disclosed.