

**DISCIPLINE COMMITTEE OF
THE COLLEGE OF NATUROPATHS OF ONTARIO**

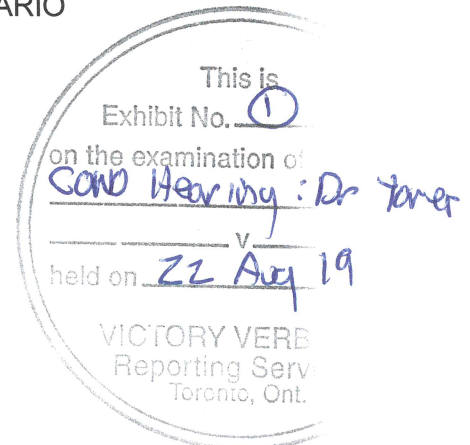
BETWEEN:

COLLEGE OF NATUROPATHS OF ONTARIO

- and -

ANTHONY YORES

NOTICE OF HEARING



The Inquiries, Complaints and Reports Committee of the College of Naturopaths of Ontario (the "College") has referred specified allegations against you to the Discipline Committee of the College. The allegations were referred in accordance with section 26 of the *Health Professions Procedural Code* which is Schedule 2 to the *Regulated Health Professions Act, 1991*. The statement of specified allegations is attached to this notice of hearing. A discipline panel will hold a hearing under the authority of sections 38 to 56 of the *Health Professions Procedural Code*, as amended, for the purposes of deciding whether the allegations are true. A **pre-hearing conference** will be held at a date and location to be set by the Presiding Officer. A discipline panel will convene at the offices of the College at 150 John Street, 10th Floor, Toronto, Ontario at **9:30 a.m. on a date to be set by the Registrar**, or as soon thereafter as the panel can be convened, for the purposes of conducting the **discipline hearing**.

IF YOU DO NOT ATTEND ON THE DATE FOR THE HEARING IN ACCORDANCE WITH THE PRECEDING PARAGRAPH, THE DISCIPLINE PANEL MAY PROCEED IN YOUR ABSENCE AND YOU WILL NOT BE ENTITLED TO ANY FURTHER NOTICE IN THE PROCEEDINGS.

If the discipline panel finds that you have engaged in professional misconduct, it may make one or more of the following orders:

1. Direct the Registrar to revoke your certificate of registration.
2. Direct the Registrar to suspend your certificate of registration for a specified period of time.
3. Direct the Registrar to impose specified terms, conditions and limitations on your certificate of registration for a specified or indefinite period of time.
4. Require you to appear before the panel to be reprimanded.
5. Require you to pay a fine of not more than \$35,000 to the Minister of Finance.
6. If the act of professional misconduct was the sexual abuse of a patient, require you to reimburse the College for funding provided for that patient under the program required under section 85.7 of the *Health Professions Procedural Code*.
7. If the panel makes an order under paragraph 6, require you to post security acceptable to the College to guarantee the payment of any amounts the member may be required to reimburse under the order under paragraph 6.

The discipline panel may, in an appropriate case, make an order requiring you to pay all or part of the College's costs and expenses pursuant to section 53.1 of the *Health Professions Procedural Code*.

You are entitled to disclosure of the evidence against you in accordance with section 42(1) of the *Health Professions Procedural Code*.

You, or your representative, may contact the solicitor for the College, Rebecca Durcan, in this matter:

Steinecke Maciura LeBlanc
Barristers & Solicitors
401 Bay Street
Suite 2308, P.O. Box 23
Toronto, ON M5H 2Y4

Telephone: (416) 644-4783
Facsimile: (416) 593-7867

You must also make disclosure in accordance with section 42.1 of the *Health Professions Procedural Code*, which states as follows:

Evidence of an expert led by a person other than the College is not admissible unless the person gives the College, at least ten days before the hearing, the identity of the expert and a copy of the expert's written report or, if there is no written report, a written summary of the evidence.

Date: September 19, 2018 _____



Andrew Parr, CAE
Registrar & CEO
College of Naturopaths of Ontario

TO: **DR. ANTHONY JAMES YORES, ND**



c/o **GARY SREBROLOW, JD, DDS, BSc**
Partner – Chair of Health Law Group
Blaney McMurty LLP
Tel: (416) 597-4875
Email: gsrebrolow@blaney.com

STATEMENT OF SPECIFIED ALLEGATIONS

1. At all relevant times, Dr. Anthony Yores, ND (the “Member”) has been a member of the College of Naturopaths of Ontario (the “College”).
2. The Member has met the Therapeutic Prescribing and the Intravenous Infusion Therapy (IVIT) Standards of Practice.
3. Between approximately March 2013 and January 2017 the Member worked at the Clinic as a naturopathic doctor.

Breaching Undertaking with the Clinic

4. On or about June 15, 2015, the Member signed an undertaking with the CEO of the Clinic agreeing to the following:
 - a. Supplements, medications or any other product recommended or prescribed to a Clinic patient whether stocked in house or not will only be billed by the Clinic.
 - b. Payment for any service provided to a Clinic patient must go through Clinic staff and will be not billed or paid directly to the Member.
 - c. Professional services to Clinic patients outside the Clinic office will only be provided with prior knowledge and approval of relevant Clinic staff.
5. The Member breached the undertaking by doing the following:
 - a. Receiving direct payment from Patients 1, 2, and/or 3 for cannabis oil; and/or
 - b. Providing home visits to Patients 4, 5 and/or 6 and/or receiving direct payment for those visits.
6. It is alleged that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991* (the “Code”) as set out in one or more of the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:

- a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession), including the following:
 - i. Conflict of Interest;
 - ii. Fees and Billing; and/or
 - iii. Selling.
- b. **Paragraph 17** (Acting in a conflict of interest when acting in a professional capacity);
- c. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional); and/or
- d. **Paragraph 47** (Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession).

Selling Unauthorized Drugs

- 7. From approximately March 2013 and January 2017, the Member:
 - a. Discussed the benefits, prescribed and/or sold cannabis oil to Patients 1, 2 and/or 3;
 - b. Sold cannabis oil to Patients 1, 2 and/or 3 without a label;
 - c. Did not issue a receipt for the sale of cannabis oil to Patients 1, 2 and/or 3;
 - d. Did not document the discussion or sale of cannabis oil to Patients 1, 2 and/or 3 in a patient record;
 - e. Obtained the cannabis oil from a personal source and not a licensed producer; and/or
 - f. Did not know the contents of the cannabis oil.

8. Naturopaths in Ontario are not permitted to sell, dispense and/or prescribe cannabis oil.
9. Cannabis oil is a drug as defined in the Drug and Pharmacies Regulation Act.
10. It is alleged that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the Health Professions Procedural Code, being Schedule 2 to the Regulated Health Professions Act, 1991 (the "Code") as set out in one or more of the following paragraphs of section 1 of Ontario Regulation 17/14 made under the Naturopathy Act, 2007:
 - a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession), including the following:
 - i. Sections 3, 9, 10 and/or 12 of Regulation 168/15;
 - ii. Fees and Billing;
 - iii. Selling; and/or
 - iv. Consent.
 - b. **Paragraph 8** (Providing or attempting to provide services or treatment that the member knows or ought to know to be beyond the member's knowledge, skill or judgment);
 - c. **Paragraph 9** (Failing to advise a patient or the patient's authorized representative to consult another member of a health profession within the meaning of the Regulated Health Professions Act, 1991, when the member knows or ought to know that the patient requires a service that the member does not have the knowledge, skill or judgment to offer or is beyond his or her scope of practice);
 - d. **Paragraph 14** (Prescribing, dispensing, compounding or selling a drug or a substance for an improper purpose);
 - e. **Paragraph 21** (Failing to provide an account or failing to itemize the account in a way that sets out each item charged, including, but not limited to, professional fees, products, services and applicable taxes);

- f. **Paragraph 23** (Failing to keep records in accordance with the standards of the profession);
 - g. **Paragraph 36** (Contravening, by act or omission, a provision of the Naturopathy Act, 2007, the Regulated Health Professions Act, 1991 or the regulations under either of those Acts);
 - h. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional); and/or
 - i. **Paragraph 47** (Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession).
11. It is further alleged that the above conduct constitutes professional misconduct pursuant to section 4(3) of the Naturopathy Act, 2007 (contravening section 4(2) of the Naturopathy Act, 2007, by failing to perform a procedure under the authority of section 4(1) of the Naturopathy Act, 2007 in accordance with the regulations).

Administering unauthorized drug and substance

12. From approximately December 2016 to January 2017 the Member prescribed, sold, dispensed and /or administered by IVIT Dichloroacetate (DCA) and alpha lipoic acid to Patient 4.
13. The DCA and/or alpha lipoic acid were intended for, and/or sold to, another patient of the Clinic.
14. The DCA and/or alpha lipoic acid were given to the Member by the other Clinic patient.
15. DCA is a drug as defined in the Drug and Pharmacies Regulation Act.
16. Naturopaths in Ontario are not permitted to prescribe, sell, and/or dispense DCA.
17. Naturopaths in Ontario are not permitted to administer DCA or alpha lipoic acid by injection.
18. It is alleged that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the

Regulated Health Professions Act, 1991 (the “Code”) as set out in one or more of the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:

- a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession), including the following:
 - i. Sections 3, 5, 9, 10 and/or 12 of Regulation 168/15;
- b. **Paragraph 36** (Contravening, by act or omission, a provision of the *Naturopathy Act, 2007*, the *Regulated Health Professions Act, 1991* or the regulations under either of those Acts);
- c. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional); and/or
- d. **Paragraph 47** (Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession).

19. It is further alleged that the above conduct constitutes professional misconduct pursuant to section 4(3) of the *Naturopathy Act, 2007* (contravening section 4(2) of the *Naturopathy Act, 2007*, by failing to perform a procedure under the authority of section 4(1) of the *Naturopathy Act, 2007* in accordance with the regulations).

Misleading Patients and the Clinic

- 20. From approximately March 2015 to January 2017, the Member made home visits to Patients 4, 5 and/or 6.
- 21. Patients 4, 5 and/or 6 were patients of the Clinic.
- 22. The Member did not disclose to Patients 4, 5 and/or 6 that the Member was not attending as a representative of the Clinic.
- 23. The Member accepted payments from Patients 4, 5 and/or 6 for the home visits and did not remit the payments to the Clinic.

24. The Member did not document the treatment provided to Patients 4, 5 and/or 6 in the Clinic patient record.
25. The Member was not truthful to the Clinic when he advised the Clinic that he did not attend the homes of Patients 4, 5 and/or 6 and provide treatment to Patients 4, 5 and/or 6.
26. The Member took supplies from the Clinic without authorization.
27. It is alleged that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991* (the "Code") as set out in one or more of the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
 - a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession), including the following:
 - i. Conflict of Interest;
 - ii. Fees and Billing; and/or
 - iii. Consent.
 - b. **Paragraph 17** (Acting in a conflict of interest when acting in a professional capacity);
 - c. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional); and/or
 - d. **Paragraph 47** (Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession).

APPENDIX

1. The documents to be tendered in evidence at the hearing have been sent with this Notice of Hearing.
2. The *Rules of Procedure of the Discipline Committee* have been sent with this Notice of Hearing.
3. Take notice that the documents that have been and may later be disclosed to you will be tendered as business documents pursuant to the *Evidence Act* of Ontario.
4. All documents that are disclosed to you in this matter are disclosed on the basis that they are to be used solely for the purpose of this proceeding and for no other purpose.

COLLEGE OF NATUROPATHS OF ONTARIO

- and -

ANTHONY YORES

DISCIPLINE COMMITTEE
OF THE COLLEGE OF
NATUROPATHS OF ONTARIO

NOTICE OF HEARING

STEINECKE MACIURA LEBLANC

Barristers & Solicitors
401 Bay Street, Suite 2308
P.O. Box 23
Toronto, ON M5H 2Y4

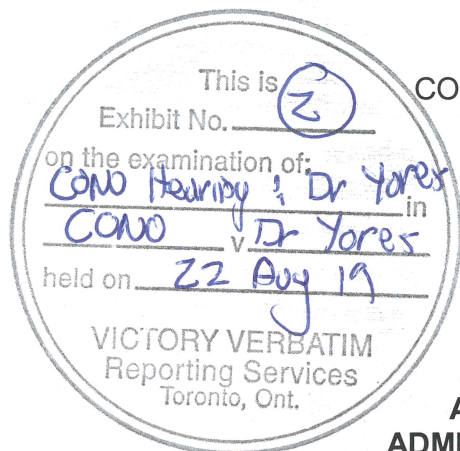
Rebecca Durcan

Telephone: (416) 644-4783
Facsimile: (416) 593-7867
Email: rdurcan@sml-law.com

Lawyers for the College of
Naturopaths of Ontario

**DISCIPLINE COMMITTEE OF
THE COLLEGE OF NATUROPATHS OF ONTARIO**

BETWEEN:



COLLEGE OF NATUROPATHS OF ONTARIO

- and -

ANTHONY YORES

**AGREED STATEMENT OF FACTS AND
ADMISSION OF PROFESSIONAL MISCONDUCT**

The parties hereby agree that the following facts may be accepted as true by the Discipline Committee of the College of Naturopaths of Ontario (the "College"):

The Member

1. At all relevant times, Dr. Anthony Yores, ND (the "Member") has been a member of the College of Naturopaths of Ontario (the "College"). Attached at **Tab 1** is a copy of the Member's Register profile.
2. The Member has met the Therapeutic Prescribing and the Intravenous Infusion Therapy (IVIT) Standards of Practice.
3. Between approximately March 2013 and January 2017 the Member worked at the Clinic as a naturopathic doctor.
4. The Member has no disciplinary history with the College or the Board of Directors of Drugless Therapy (Naturopathy).
5. If the Member were to testify, he would advise the Panel that he believed his actions were assisting his patients.

Breaching Undertaking with the Clinic

6. On or about June 15, 2015, the Member signed an undertaking with the CEO of the Clinic agreeing to the following:

- a. Supplements, medications or any other product recommended or prescribed to a Clinic patient whether stocked in house or not will only be billed by the Clinic.
 - b. Payment for any service provided to a Clinic patient must go through Clinic staff and will be not billed or paid directly to the Member.
 - c. Professional services to Clinic patients outside the Clinic office will only be provided with prior knowledge and approval of relevant Clinic staff.
7. It is agreed that the Member breached the undertaking by doing the following:
- a. Receiving direct payment from Patients 1, 2, and 3 for cannabis oil; and
 - b. Providing home visits to Patients 4, 5 and 6 and receiving direct payment for those visits.
8. It is agreed that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991* (the “Code”) as set out in the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
- a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession), including the following:
 - i. Conflict of Interest (attached at **Tab 2**);
 - ii. Fees and Billing (attached at **Tab 3**); and
 - iii. Selling (attached at **Tab 4**).
 - b. **Paragraph 17** (Acting in a conflict of interest when acting in a professional capacity);
 - c. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional); and
 - d. **Paragraph 47** (Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession).

Selling Unauthorized Drugs

9. From approximately March 2013 and January 2017, the Member:
 - a. Discussed the benefits and sold cannabis oil to Patients 1, 2 and 3;
 - b. Sold cannabis oil to Patients 1, 2 and 3 without a label;
 - c. Did not issue a receipt for the sale of cannabis oil to Patients 1, 2 and 3;
 - d. Did not document the discussion or sale of cannabis oil to Patients 1, 2 and 3 in a patient record;
 - e. Obtained the cannabis oil from a personal source and not a licensed producer; and
 - f. Did not know the contents of the cannabis oil.
10. Naturopaths in Ontario are not permitted to sell cannabis oil.
11. At the relevant times, cannabis oil was a drug as defined in the *Drug and Pharmacies Regulation Act*.
12. It is agreed that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the Code as set out in the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
 - a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession), including the following:
 - i. Sections 3 and 12 of Regulation 168/15 (attached at **Tab 5**);
 - ii. Fees and Billing;
 - iii. Selling; and
 - iv. Consent (attached at **Tab 6**).
 - b. **Paragraph 8** (Providing or attempting to provide services or treatment that the member knows or ought to know to be beyond the member's knowledge, skill or judgment);
 - c. **Paragraph 9** (Failing to advise a patient or the patient's authorized representative to consult another member of a health profession within the

meaning of the *Regulated Health Professions Act, 1991*, when the member knows or ought to know that the patient requires a service that the member does not have the knowledge, skill or judgment to offer or is beyond his or her scope of practice);

- d. **Paragraph 14** (Prescribing, dispensing, compounding or selling a drug or a substance for an improper purpose);
 - e. **Paragraph 21** (Failing to provide an account or failing to itemize the account in a way that sets out each item charged, including, but not limited to, professional fees, products, services and applicable taxes);
 - f. **Paragraph 23** (Failing to keep records in accordance with the standards of the profession);
 - g. **Paragraph 36** (Contravening, by act or omission, a provision of the *Naturopathy Act, 2007*, the *Regulated Health Professions Act, 1991* or the regulations under either of those Acts);
 - h. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional); and
 - i. **Paragraph 47** (Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession).
13. It is further agreed that the above conduct constitutes professional misconduct pursuant to section 4(3) of the *Naturopathy Act, 2007* (contravening section 4(2) of the *Naturopathy Act, 2007*, by failing to perform a procedure under the authority of section 4(1) of the *Naturopathy Act, 2007* in accordance with the regulations). Attached at **Tab 7** is a copy of section 4 of the *Naturopathy Act, 2007*.

Misleading Patient 4 and the Clinic

- 14. From approximately March 2015 to January 2017, the Member made home visits to Patients 4, 5 and 6.
- 15. Patients 4, 5 and 6 were patients of the Clinic.
- 16. The Member did not disclose to Patient 4 that the Member was not attending as a representative of the Clinic.

17. The Member accepted direct payments from Patients 4, 5 and 6 for the home visits and did not remit the payments to the Clinic.
18. The Member did not document the treatment provided to Patients 4, 5 and 6 in the Clinic patient record. The Member documented the treatment in his own personal record but did not provide these to the Clinic.
19. The Member did not advise the Clinic that he attended the homes of Patients 4, 5 and 6 and provided treatment to Patients 4, 5 and 6. Further, when asked by the Clinic if the Member attended the home of Patient 4 he was untruthful and told the Clinic that he only attended for a personal visit.
20. It is agreed that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the Code as set out in the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
 - a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession), including the following:
 - i. Conflict of Interest;
 - ii. Fees and Billing; and
 - iii. Consent.
 - b. **Paragraph 17** (Acting in a conflict of interest when acting in a professional capacity);
 - c. **Paragraph 46** (Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional); and
 - d. **Paragraph 47** (Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession).

Administering Unauthorized Substances

21. From approximately December 2016 to January 2017 the Member administered, by IVIT, Dichloroacetate (DCA) and alpha lipoic acid to Patient 4.
22. The DCA and alpha lipoic acid were intended for, and sold to, another patient of the Clinic.

23. The DCA and alpha lipoic acid were given to the Member by the other patient of the Clinic.
24. Naturopaths in Ontario are not permitted to administer DCA or alpha lipoic acid by injection.
25. It is agreed that the above conduct constitutes professional misconduct pursuant to section 51(1)(c) of the Code as set out in the following paragraphs of section 1 of Ontario Regulation 17/14 made under the *Naturopathy Act, 2007*:
- a. **Paragraph 1** (Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession), including the following:
 - i. Sections 3, 5 and 12 of Regulation 168/15 (attached at **Tab 8**);
 - b. **Paragraph 36** (Contravening, by act or omission, a provision of the *Naturopathy Act, 2007*, the *Regulated Health Professions Act, 1991* or the regulations under either of those Acts);
26. It is further agreed that the above conduct constitutes professional misconduct pursuant to section 4(3) of the *Naturopathy Act, 2007* (contravening section 4(2) of the *Naturopathy Act, 2007*, by failing to perform a procedure under the authority of section 4(1) of the *Naturopathy Act, 2007* in accordance with the regulations).

ADMISSION OF PROFESSIONAL MISCONDUCT

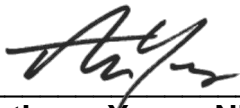
27. By this document, the Member admits to the truth of the facts referred to in paragraphs 1 to 26 above (the "Agreed Facts").
28. By this document, the Member states that:
- a. He understands fully the nature of the allegations made against him;
 - b. He has no questions with respect to the allegations against him;
 - c. He admits to the truth of the facts contained in this Agreed Statement of Facts and Admission of Professional Misconduct and that the admitted facts constitute professional misconduct;
 - d. He understands that by signing this document he is consenting to the evidence as set out in the Agreed Statement of Facts and Admission of Professional Misconduct being presented to the Discipline Committee;

- e. He understands that by admitting the allegations, he is waiving his right to require the College to prove the allegations against him at a contested hearing;
- f. He understands that the decision of the Committee and a summary of its reasons, including reference to his name, will be published in the College's annual report and any other publication or website of the College;
- g. He understands that any agreement between him and the College with respect to the penalty proposed does not bind the Discipline Committee; and,
- h. He understands and acknowledges that he is executing this document voluntarily, unequivocally, free of duress, free of bribe, and that he has been advised of his right to seek legal advice.

29. In light of the Agreed Facts and Admission of Professional Misconduct, the College of Naturopaths of Ontario and the Member submit that the Discipline Committee should find that the Member has committed professional misconduct.

All of which is respectfully submitted.

Signed this 8th day of July, 2019



Dr. Anthony Yores, ND
Member

Signed this 8th day of August, 2019



Andrew Parr, CAE
Registrar, College of Naturopaths
of Ontario



The College of Naturopaths of Ontario

FRANÇAIS CART

Public Register of Ontario Naturopaths

[Return to Search Page](#)

Member Details

Name:	Dr. Anthony James Yores, ND	
Nickname or Abbreviation:	None	
Date Of Registration:	Aug 01, 2004	
Registration #:	1250	
Current Status:	In Good Standing	
Class of Registration:	General Class	
Previous First Name:	None	
Previous Last Name:	None	

Registration History

Registrant Class	Status	Effective Date	Notes
General Class	In Good Standing	Aug 25, 2005	Authorized to practice Naturopathy
Inactive Class	In Good Standing	Mar 01, 2005	Not authorized to practice Naturopathy
General Class	In Good Standing	Aug 01, 2004	Date of initial registration with the BDDT-N

Extended Services

Additional Standards of Practice	Qualified	Effective Date	Notes
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Therapeutic Prescribing is a post-registration Standard of Practice. NDs who wish to prescribe, dispense, compound, sell, or administer by injection or inhalation the restricted substances available to Ontario NDs under the College's General Regulation must first meet this Standard of Practice. NDs who do not wish to access these substances or perform these controlled acts are not required to meet this Standard.	Yes	Dec 30, 2015	
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Additional Standards of Practice	Qualified	Effective Date	Notes
The Standard of Practice for Intravenous Infusion Therapy (IVIT) is a post-registration Standard of Practice. NDs who wish to administer substances intravenously for therapeutic benefit, must first meet this Standard of Practice and the Standard of Practice for Therapeutic Prescribing. NDs who do not wish to administer substances intravenously are not required to meet this Standard.	Yes		grandparented July 1, 2015

Terms, Conditions And Limitations

Effective Date	Expiry Date	Type Of Conditions	Notes
No Data Found			

Employment Information

Employer	Address	City	Province	Country	Postal Code	Phone
Dr. Anthony Yores ND	19 Yatesbury Rd	Toronto	ON	CAN	M2H1G1	(416) 858-2425

Professional Corporation

Inquiries, Complaints, And Reports Committee Referrals

Inquiries Complaints And Reports Committee - Outcomes

Findings

Member Reported And Other Findings

Registrar's Notation

Public

Overview

The College and You

About NDs

Complaints and Reports

Discipline

Fitness to Practise

Patient Rights

The Public Register

About the Register

ND Register

Corporations Register

IVIT Premises Register

Unauthorized Practitioners

Preventing Sexual Abuse

About Naturopaths

Find a Naturopath

Complaints & Reports

Preventing Sexual Abuse

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CONTACT US

150 John Street, 10th Floor
Toronto, Ontario, M5V 3E3
Tel. 416.583.6010
Fax. 416.583.6011



The College of Naturopaths of Ontario

Standard of Practice:

Conflict of Interest

Introduction

The intent of this standard is to help Members understand the concept of conflict of interest and how to recognize it in their practice.

Definitions

Conflict of Interest: When a Member engages in a relationship or arrangement as a result of which the Member's personal interests could improperly influence his/her professional judgment or conflict with his/her duty to act in the best interest of patients.

Related Person: A person related to the Member by blood, marriage or adoption, or by living with the Member in a conjugal relationship outside of marriage. A related person may also include an extended family member, close friends, corporations or other businesses, and business partners.

Financial Benefit: where a Member's primary interest is influenced and/or directed by financial gain. For the purpose of this Standard of Practice financial benefit does not include charging fees for services as per a fee schedule but rather occurs when the possibility of financial benefits dictate the course of treatment and action. These may include, but are not limited to:

- Payment from a pharmaceutical company for prescribing their drug;
- Receiving a bonus for recruiting patients into a research study;
- Recommending all patients undergo a test that the Member has commercial ownership;
- Referring patients to a spouse's business.

1. Conflict of Interest

The Member conducts his/her practice in a professional manner with the focus of the practice on the health care of patients. Acting while in a conflict of interest is professional misconduct and is not permitted.

Performance Indicators

The Member recognizes, discloses and manages any real or perceived conflict of interest appropriately.

Where it is not possible to avoid a conflict of interest, the Member:

- discloses and discusses the situation with the patient before providing any services;
- makes the patient aware of practical alternatives;
- documents the discussion in the patient record.

The Member refrains from participating in any activity or arrangement where his/her participation provides the potential for his/her professional judgment to be compromised.

Members do not recommend products or services to patients that are not clinically indicated.

Members do not recommend the purchase of products or services in which the member or a related person has a financial benefit.

Conflict of interest is not avoided by structuring the arrangement to move any benefit arising to a related person.

Related Standards and Guidelines

Advertising

Dispensing

Prescribing

Recommending Non-Scheduled Substances

Record Keeping

Selling

Conflict of Interest Guideline

Legislative Framework

[Regulated Health Professions Act, 1991](#)

[Professional Misconduct Regulation](#)

Approval

Original Approval Date: October 15, 2012

Latest Amendment Date: March 6, 2019

Disclaimer

In the event of any inconsistency between this standard and any legislation that governs the practice of Naturopathic Doctors, the legislation shall govern.



The College of Naturopaths of Ontario

Standard of Practice:

Fees and Billing

Introduction

The intent of this standard is to advise Members with respect to fees and billing for naturopathic services, drugs, substances, products or devices.

Definitions

Block Fee: A flat fee charged for a predetermined set of services or unlimited services.

Markup: the amount added to the cost price of goods to cover overhead costs.

1. Fees and Billing

The Member establishes and maintains fair and ethical fees and billing practices. Members are accountable for any fee, billing or account that uses their name and/or registration number. Naturopaths must be aware of how their names and registration numbers are being used.

Performance Indicators

The Member:

- ensures that patients are informed of the fees to be charged;
- ensures that a fee schedule is established and posted that outlines:
 - the fees for all visits or services;
 - any administrative fees; and
 - penalties for missed or cancelled appointments.
- ensures that the fees charged:
 - are not excessive in relation to the services proposed;
 - for drugs, substances, products and devices are only marked-up to cover the direct overhead expenses incurred in obtaining, storing, dispensing and selling these items;
 - are an accurate reflection of the services provided to each patient.
- May charge a reasonable fee for collecting non-blood specimens to be sent for laboratory testing, and itemize it on the invoice as "collection of specimen"
- May charge the patient for the cost of the test and any associated fee(s) (e.g. requisition/collection fees from the medical laboratory) incurred by the Member.
- Does not charge a mark-up on the cost of the test and any associated fee(s) (e.g. requisition/collection fees from the medical laboratory) incurred by the naturopathic doctor.
- May charge a reasonable fee for the analysis of laboratory test results if it is done outside of a patient visit/consultation

- ensures that any departure from an established or documented fee is consented to by the patient and documented in the patient record;
- Prior to providing care, ensures that the patient is given clear information about fees and that they understand this information, this includes:
 - any relevant financial policies and payment expectations;
 - information on fees and the fee schedule specific to the patient circumstances, including all fees that might apply to the patient;
 - the basis upon which a bill for services is calculated; and
 - the acceptable methods of payment.
- audits invoices and billing practices at periodic intervals to ensure:
 - the accuracy of invoices;
 - an understanding of the fees that are being charged for their services;
 - an understanding of how their registration or billing number is being used; and
 - when abnormalities are discovered, reasonable steps are taken to remedy the situation.
- ensures that processes exist for the timely:
 - notification of any balance due or owing; and
 - provision of applicable refunds.
- does not charge a block fee;
- does not charge a dispensing fee;
- does not offer or give a reduction in fees for prompt payment of services.

2. Receipts

The Member issues a receipt for all payments.

Performance Indicators

Receipts clearly and legibly record:

- name of treating Member, clinic name, address, telephone number;
- Member's registration number;
- patient's name and address;
- date of service;
- services billed;
- fees for supplements, injectable substances, drugs, laboratory tests, devices, special testing, etc.;
- payments received;
- balance owing;
- HST registration number, if applicable.

If a replacement receipt is issued it is clearly marked "COPY".

Receipts are clearly itemized. Fees for naturopathic consultation are separated from all other fees. Fees for supplements, injectable substances, drugs, laboratory tests, devices, special testing, etc., are individually listed, either on the same or another receipt.

The purchase and redemption of vouchers or gift certificates are clearly documented.

Related Standards

Conflict of Interest
Consent
Dispensing
Prescribing
Recommending Non-Scheduled Substances
Record Keeping
Selling

Legislative Framework

[Professional Misconduct Regulation](#)

Approval

Original Approval Date: October 15, 2012

Latest Amendment Date: March 6, 2019

Disclaimer

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The College of Naturopaths of Ontario

Standard of Practice:

Selling



Introduction

The intent of this standard is to advise Members of the requirements to sell substances safely, ethically and competently. This standard applies to the selling of drugs, substances and devices.

Selling scheduled substances is a component of the controlled act: "Prescribing, dispensing, compounding or selling a drug designated in the regulations." (*Regulated Health Professions Act, 1991, S.O. 1991, CHAPTER 18, s. 27*).

Members are authorized to sell scheduled substances under the *Naturopathy Act, 2007, S.O. 2007, CHAPTER 10, Sched. P, s. 4.1*

Definitions

Drug: for the purposes of this Standard of Practice, a drug is anything referred to in Table 6 of the General Regulation or anything that is injected.

Substance: For the purposes of this Standard of Practice, a substance is anything that is publicly available and not listed in the General Regulation. This may include botanical tinctures, botanical powders or loose herbs, fluid/solid extracts, base creams, salves and ointments, homeopathic remedies, pharmaceutical grade ethyl alcohol, vitamins, minerals and amino acids.

1. Competency

The Member has the knowledge, skill and judgment to sell drugs, substances and devices safely, ethically and competently.

Performance Indicators

Prior to selling drugs, the Member is in compliance with the Standard of Practice for Prescribing.

2. Selling Drugs, Substances or Devices

The Member will minimize the risks to patients, self and others that are associated with the selling of drugs, substances or devices.

Performance Indicators

The Member has a Naturopathic Doctor-patient relationship with the patient, or if no such relationship exists:

- the member possesses the prescription/recommendation from another member for the drug/substance;
- verifies and documents the accuracy and validity of the prescription/recommendation prior to selling the drug or substance; and
- retains a copy of the prescription/recommendation in the Member's records.

The Member only sells a compounded drug or substance directly to their patient.

The Member:

- does not sell drugs, substances or devices while being in an unmanaged conflict of interest;
- sells the drugs, substances or devices for therapeutic purposes only;
- sells the drugs in accordance with any limitations respecting the drugs listed in the General Regulation;
- informs the patient or the patient's authorized representative that they may be able to purchase the drug or substance from a pharmacy;
- is satisfied that the patient:
 - does not have reasonable or timely access to a pharmacy;
 - would not otherwise buy the drug;
 - does not have the financial resources to obtain the drug if not sold by the member; or
 - the drug is not reasonably available in a pharmacy.
- does not sell a drug if the selling provides a profit or a direct or indirect personal or financial benefit;
- ensures that the drugs, substances and devices sold have been obtained and stored in accordance with applicable laws; and
- ensures that the drug or substance sold has not expired and will not expire before the date on which the patient is expected to take the last of the drug or substance.

The sale of all drugs, substances and devices is documented.

Related Standards & Guidelines

Compounding
 Conflict of Interest
 Dispensing
 Fees and Billing
 Prescribing
 Record Keeping

Legislative Framework

[General Regulation](#)

[Naturopathy Act, 2007](#)

[Professional Misconduct Regulation](#)

[Regulated Health Professions Act, 1991](#)

Disclaimer

In the event of any inconsistency between this standard and any legislation that governs the practice of Naturopathic Doctors, the legislation shall govern.

Naturopathy Act, 2007

ONTARIO REGULATION 168/15 GENERAL

Consolidation Period: From March 2, 2017 to the [e-Laws currency date](#).

Last amendment: 415/16.

Legislative History: 415/16.

This is the English version of a bilingual regulation.

[...]

PART II CONTROLLED ACTS

[...]

Standards of practice, s. 4 (1) of the Act

3. (1) A member shall not perform any controlled act under the authority of paragraph 1, 2, 3, 4 or 6 of subsection 4 (1) of the Act unless he or she performs it in accordance with all of the following standards of practice of the profession:

1. The member must have a naturopath-patient relationship with the patient and, before performing the controlled act, must record the patient's health history.
2. Before performing the controlled act, the member must inform the patient or the patient's authorized representative about,
 - i. the purpose of the controlled act,
 - ii. the risks inherent in performing it,
 - iii. alternative treatments that the member knows or ought to know are available within the practice of the profession, and
 - iv. treatments that the member knows or ought to know are available to the patient if he or she were to be treated by a member of another College under the *Regulated Health Professions Act, 1991*.
3. Before performing the controlled act, the member must receive an informed consent from the patient or his or her authorized representative.
4. Before performing the controlled act, the member must determine that the patient's condition warrants performing the controlled act, having considered,
 - i. the known risks and benefits to the patient of performing the controlled act,
 - ii. the predictability of the outcome,
 - iii. the safeguards and resources available in the circumstances to safely manage the outcome of performing the controlled act, and
 - iv. other relevant circumstances specific to the patient.
5. The member must ensure that appropriate infection control procedures are in place at all times and that the controlled act is performed in an environment that is clean, safe, private and comfortable for the patient.
6. The member must have the knowledge, skill and judgment,
 - i. to perform the controlled act safely and ethically, and
 - ii. to determine whether the patient's condition warrants performance of the controlled act.

(2) It is a further standard of practice of the profession that a member is prohibited from taking or collecting a specimen from the human body for examination to obtain information for diagnosis, prophylaxis or treatment, unless the specimen that is taken or collected is identified in the regulations made under the *Laboratory and Specimen Collection Centre Licensing Act* and related to a specific laboratory test set out in the regulations made under that Act.

(3) It is a further standard of practice of the profession that a member is prohibited from performing a laboratory test or taking blood samples or other specimens from a patient for the purpose of performing a laboratory test, unless the laboratory

test that the member performs is specified in the regulations made under the *Laboratory and Specimen Collection Centre Licensing Act* and the blood samples or other specimens taken from a patient are identified in and related to a specific test in the regulations made under that Act.

(4) It is a further standard of practice of the profession that a member is prohibited from ordering a laboratory test unless the test is one specified in the regulations made under the *Laboratory and Specimen Collection Centre Licensing Act*.

[...]

Selling a drug

12. (1) For the purposes of paragraph 7 of subsection 4 (1) of the Act, a member may sell a drug designated in Table 6 only if all of the standards of practice of the profession in this section are met.

(2) The following are standards of practice for the purposes of subsection (1):

1. Unless subsection (3) applies, the member must have a naturopath-patient relationship with the patient for whom the drug is sold.
2. Unless subsection (3) applies, the member must sell the drug directly to the patient or the patient's authorized representative.
3. The member must sell the drug for therapeutic purposes only.
4. Where a limitation, a route of administration or a dosage is indicated in the column opposite the drug in Table 6, a member shall only sell that drug in compliance with the limitation and in accordance with the route of administration and dosage specified.
5. The member must advise the patient or his or her authorized representative that the drug may be purchased at a pharmacy.
6. The member must have made reasonable inquiries and be satisfied that,
 - i. the patient does not have reasonable or timely access to a pharmacy,
 - ii. the patient would not otherwise buy the drug,
 - iii. the patient does not have the financial resources to obtain the drug if not sold by the member, or
 - iv. the drug is not reasonably available in a pharmacy.
7. The member must not sell the drug if the selling provides a profit to him or her or a direct or indirect personal or financial benefit.
8. The member must have ensured that the drug to be sold has been obtained and stored in accordance with any applicable laws.
9. The member must have ensured that the drug to be sold has not expired and will not expire before the date on which the patient is expected to take the last of the drug.
10. Unless subsection (3) applies, the member must retain in the patient's record a record that the drug was sold to the patient or his or her authorized representative and the price charged, and where subsection (3) does apply, a copy of the prescription required under clause (3) (d).

(3) If the member does not have a naturopath-patient relationship with the person to whom the drug is sold, the member must not sell the drug unless,

- (a) at the time the drug is sold, the member possesses the prescription for the drug;
- (b) the person who prescribed the drug is another member;
- (c) the prescription contains all the information required under subsection 9 (3); and
- (d) the member retains a copy of the prescription in the member's records.

(4) Paragraphs 5 to 9 of subsection (2) apply, with necessary modification, to the member mentioned in clause (3) (b).

(5) It is a further standard of practice of the profession that a member may only perform a controlled act described in subsection (1) if he or she has successfully completed,

- (a) a course on prescribing that has been approved by the Council; and
- (b) an examination on prescribing that is administered or approved by the Council.

(6) Despite anything in this section, a member may perform a controlled act described in subsection (1) if he or she does so while taking part in a course or examination required under clause (5) (a) or (b).



The College of Naturopaths of Ontario

Standard of Practice:

Consent

Introduction

The intent of this standard is to inform Members of their obligations with respect to consent.

Definitions

Capacity: a person is deemed capable with respect to an intervention/decision if the person is able to understand the information relevant to making a decision about the intervention, and able to appreciate the reasonably foreseeable consequences of a decision, or lack of decision. People:

- are presumed capable unless there is information to lead the Member to think otherwise;
- may be capable with respect to one intervention/decision but not another;
- may be capable with respect to an intervention/decision at one time and incapable at another.

Consent: to acquiesce, agree, approve, assent and give permission to some act or purpose.

Consent and Capacity Board: an independent agency that deals with disputes over treatment decisions where a patient has been deemed not to be capable.

Informed Consent: a phrase used in law to indicate that the consent given by a person has been based upon a clear appreciation and understanding of the facts, implications, and future consequences of an action. In order to give informed consent, the individual concerned must have adequate reasoning faculties and be in possession of all relevant facts at the time consent is given.

Substitute Decision-maker: a person who makes decisions for someone who is incapable of making his/her own decisions, and who is authorized to give or refuse consent to an intervention on behalf of a person who is incapable of making a decision with respect to the intervention. See Appendix I.

1. Informed Consent

Consent is an ongoing process and not a singular event. To be valid, consent must be informed.

The Member has a duty to ensure the patient has sufficient information to make valid decisions about his/her care.

Performance Indicators

The Member ensures that consent is obtained prior to:

- obtaining a case history;
- performing a physical examination/testing;
- initiating treatment;
- collecting personal health information in accordance with the *Personal Health Information Protection Act, 2004*.

To be valid, consent:

- relates to the proposed intervention;
- is informed;
- is voluntary;
- is not obtained through fear, misrepresentation or fraud.

The Member appropriately documents the discussion in the patient chart. Patients need to understand and appreciate the reasonable foreseeable consequences of their decisions, in order to give informed consent.

The Member ensures that the patient or substitute decision-maker understands the following with respect to the proposed course of action:

- the nature of the intervention;
- its expected benefits;
- the material risks and side effects;
- available reasonable alternatives;
- the likely consequences of not receiving the intervention;
- any associated costs; and
- the right to withdraw consent.

The Member discloses risks or side effects that are likely to occur as well as risks and side effects that can result in significant harm or death even though they are unlikely to occur.

The Member answers questions or addresses any special concerns of the patient or substitute decision-maker.

The Member ensures that the patient or substitute decision-maker understands the professional status of those providing professional services.

2. Consent to Assessment and Treatment

The Member ensures that informed consent is obtained from the patient or substitute decision maker at the start of and throughout the assessment and treatment process.

Performance Indicators

The Member discusses the following with the patient or substitute decision-maker as appropriate:

- scope and reason for the assessment and treatment;
- associated costs;
- the purpose and nature of the assessment and treatment including whether information will be obtained from other individuals;
- the potential benefits and limitations of the assessment and treatment and the likely consequences of not receiving the intervention;
- the expected outcomes of the assessment and treatment;
- the right of the patient or substitute decision maker to withdraw consent at any time.

The Member:

- provides an opportunity for the patient or substitute decision maker to ask questions and responds to them in a manner that helps the patient or substitute decision-maker understand.

3. Determining Capacity

The Member when obtaining consent, ensures that the patient understands the information provided and is capable of giving consent to assessment and/or treatment.

Performance Indicators

The Member:

- Assumes that the patient is capable of providing consent, unless there is information that would lead the member to think otherwise;
- Considers factors that may indicate that the patient is incapable;
- Utilizes interpreters, if necessary, to ensure that the patient understands the consent process;
- When there is an indication to do so, follows a process to determine capacity:
 - Gathers objective and subjective information to determine the patient's capacity to give consent;
 - Analyzes the information gathered to determine the ability of the patient to make the required assessment and/or treatment decision;
 - Does not make presumptions of incapacity based on:
 - Diagnosis of a psychiatric or neurological condition;
 - Communication impairment;
 - Disability;
 - Refusal of intervention;
 - Age;
 - Acute or Chronic Health Status;
 - The fact that there is a guardian or substitute decision-maker in place
- Engages the patient in a collaborative approach regarding the capacity process;
- Upon determining incapacity, communicates to the patient the finding of incapacity, the reasons and his/her right of a review of this finding with the Consent and Capacity Board;
- Upon determining incapacity, takes reasonable measures to confirm the substitute decision-maker, and informs the patient that the substitute decision-maker will make the final decision related to the naturopathic services;
- Utilizes the hierarchy of substitute decision-makers (Appendix 1), if a substitute decision-maker has not been identified;
- Involves the patient in discussions with the substitute decision-maker whenever possible.

4. Record Keeping

The Member documents the consent process.

Performance Indicators

In addition to the College's Standard of Practice for Record Keeping, the Member documents:

- that a discussion regarding consent took place and the patient understands the proposed assessment or treatments and their risks, limitations and benefits;
- any modifications to the consent;
- when consent was obtained through the use of an interpreter, alternate means of communication, or a substitute decision maker; the identity of the interpreter or substitute decision maker, the legal entitlement of the

substitute decision maker as applicable (documentation on file, copy of Power of Attorney for personal care provided, etc.);

- that the patient withdrew consent, why he/she did so, and what specifically was withdrawn.

Documentation can take either of the following forms:

- a note in the patient record; and
- a consent form, that is dated, signed, and witnessed.

Related Standards

Acupuncture
Compounding
Dispensing
Fees and Billing
Inhalation
Injection
Internal Examinations
IV Infusion Therapy
Manipulation
Record Keeping

Legislative Framework

[General Regulation](#)

[Health Care Consent Act, 1996](#)

[Personal Health Information Protection Act, 2004](#)

[Professional Misconduct Regulation](#)

Approval

Original Approval Date: October 15, 2012

Latest Amendment Date: December 6, 2017

Disclaimer

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Appendix I

The Health Care Consent Act, 1996 defines the hierarchy of substitute decision-makers as:

- the incapable person's guardian if the guardian has authority to give or refuse consent to the treatment;
- the incapable person's attorney for personal care, if the power of attorney confers authority to give or refuse consent to the treatment;
- the incapable person's representative appointed by the Consent and Capacity Board if the representative has authority to give or refuse consent to the treatment;
- the incapable person's spouse or partner (which need not be a sexual partner);
- a child or parent of the incapable person, or a children's aid society or other person who is lawfully entitled to give or refuse consent to the treatment in the place of the parent. This does not include a parent who has only a right of access and is not lawfully entitled to give or refuse consent to treatment. If a children's aid society or other person is lawfully entitled to give or refuse consent to the treatment in the place of the parent, this paragraph does not include the parent;
- a parent of the incapable person who has only a right of access;
- a brother or sister of the incapable person;
- any other relative of the incapable person;
- as a last resort, the Public Guardian and Trustee.

Naturopathy Act, 2007

S.O. 2007, CHAPTER 10 Schedule P

Consolidation Period: From July 1, 2015 to the [e-Laws currency date](#).

Last amendment: 2009, c. 26, s. 17.

Legislative History: 2009, c. 26, s. 17.

[...]

Authorized acts

4. (1) In the course of engaging in the practice of naturopathy, a member is authorized, subject to the terms, conditions and limitations imposed on his or her certificate of registration, to perform the following:

1. Putting an instrument, hand or finger beyond the labia majora but not beyond the cervix.
2. Putting an instrument, hand or finger beyond the anal verge but not beyond the rectal-sigmoidal junction.
3. Administering, by injection or inhalation, a prescribed substance.
4. Performing prescribed procedures involving moving the joints of the spine beyond the individual's usual physiological range of motion using a fast, low amplitude thrust.
5. Communicating a naturopathic diagnosis identifying, as the cause of an individual's symptoms, a disease, disorder or dysfunction that may be identified through an assessment that uses naturopathic techniques.
6. Taking blood samples from veins or by skin pricking for the purpose of prescribed naturopathic examinations on the samples.
7. Prescribing, dispensing, compounding or selling a drug designated in the regulations. 2007, c. 10, Sched. P, s. 4 (1); 2009, c. 26, s. 17 (1).

Additional requirements for authorized acts

(2) A member shall not perform a procedure under the authority of subsection (1) unless the member performs the procedure in accordance with the regulations. 2007, c. 10, Sched. P, s. 4 (2).

Grounds for misconduct

(3) In addition to the grounds set out in subsection 51 (1) of the Health Professions Procedural Code, a panel of the Discipline Committee shall find that a member has committed an act of professional misconduct if the member contravenes subsection (2). 2007, c. 10, Sched. P, s. 4 (3).

Section Amendments with date in force (d/m/y)

2009, c. 26, s. 17 (1) - 01/07/2015

Naturopathy Act, 2007

ONTARIO REGULATION 168/15 GENERAL

Consolidation Period: From March 2, 2017 to the [e-Laws currency date](#).

Last amendment: 415/16.

Legislative History: 415/16.

This is the English version of a bilingual regulation.

[...]

PART II CONTROLLED ACTS

[...]

Standards of practice, s. 4 (1) of the Act

3. (1) A member shall not perform any controlled act under the authority of paragraph 1, 2, 3, 4 or 6 of subsection 4 (1) of the Act unless he or she performs it in accordance with all of the following standards of practice of the profession:

1. The member must have a naturopath-patient relationship with the patient and, before performing the controlled act, must record the patient's health history.
2. Before performing the controlled act, the member must inform the patient or the patient's authorized representative about,
 - i. the purpose of the controlled act,
 - ii. the risks inherent in performing it,
 - iii. alternative treatments that the member knows or ought to know are available within the practice of the profession, and
 - iv. treatments that the member knows or ought to know are available to the patient if he or she were to be treated by a member of another College under the *Regulated Health Professions Act, 1991*.
3. Before performing the controlled act, the member must receive an informed consent from the patient or his or her authorized representative.
4. Before performing the controlled act, the member must determine that the patient's condition warrants performing the controlled act, having considered,
 - i. the known risks and benefits to the patient of performing the controlled act,
 - ii. the predictability of the outcome,
 - iii. the safeguards and resources available in the circumstances to safely manage the outcome of performing the controlled act, and
 - iv. other relevant circumstances specific to the patient.
5. The member must ensure that appropriate infection control procedures are in place at all times and that the controlled act is performed in an environment that is clean, safe, private and comfortable for the patient.
6. The member must have the knowledge, skill and judgment,
 - i. to perform the controlled act safely and ethically, and
 - ii. to determine whether the patient's condition warrants performance of the controlled act.

(2) It is a further standard of practice of the profession that a member is prohibited from taking or collecting a specimen from the human body for examination to obtain information for diagnosis, prophylaxis or treatment, unless the specimen that is taken or collected is identified in the regulations made under the *Laboratory and Specimen Collection Centre Licensing Act* and related to a specific laboratory test set out in the regulations made under that Act.

(3) It is a further standard of practice of the profession that a member is prohibited from performing a laboratory test or taking blood samples or other specimens from a patient for the purpose of performing a laboratory test, unless the laboratory test that the member performs is specified in the regulations made under the *Laboratory and Specimen Collection Centre Licensing Act* and the blood samples or other specimens taken from a patient are identified in and related to a specific test in the regulations made under that Act.

(4) It is a further standard of practice of the profession that a member is prohibited from ordering a laboratory test unless the test is one specified in the regulations made under the *Laboratory and Specimen Collection Centre Licensing Act*.

[...]

Administering substances by injection or inhalation

5. (1) For the purposes of paragraph 3 of subsection 4 (1) of the Act, a member who meets all of the standards of practice of the profession in this section and section 3 of this Regulation is authorized to perform the following controlled acts:

1. Administering a substance specified in Table 1 by inhalation to a patient, in accordance with any limitations respecting the substance set out in the Table.
2. Administering a substance specified in Table 2 by injection to a patient using the routes of administration respecting the substance that are set out in the Table and in accordance with any limitations respecting the substance that are set out in the Table.

(2) It is a standard of practice of the profession that a member who performs the controlled act referred to in paragraph 1 of subsection (1) and who, in doing so, mixes, prepares, packages or labels two or more substances specified in Table 1 for the purpose of administering a customized therapeutic product to a patient by inhalation must comply with all the standards of practice set out in subsection 11 (2), with any necessary modifications.

(3) It is a standard of practice of the profession that a member who performs the controlled act referred to in paragraph 2 of subsection (1) and who, in doing so, reconstitutes, dilutes, mixes, prepares, packages or labels two or more substances specified in Table 2 for the purpose of administering a customized therapeutic product to a patient by injection must comply with all the standards of practice set out in subsection 11 (2), with any necessary modifications.

(4) It is a standard of practice of the profession that a member may only perform a controlled act described in subsection (1) if he or she has successfully completed,

- (a) a course on prescribing that has been approved by the Council; and
- (b) an examination on prescribing that is administered or approved by the Council.

(5) Where the administration of a substance referred to in paragraph 2 of subsection (1) is by intravenous injection, it is a standard of practice of the profession that a member may only perform the controlled act if he or she has successfully completed, in addition to the requirements under clauses (4) (a) and (b),

- (a) a course on administering a substance by intravenous injection that is approved by the Council; and
- (b) an examination on administering a substance by intravenous injection that is administered or approved by the Council.

(6) A member who, immediately before section 6 of the Act came into force, was registered to practice under the *Drugless Practitioners Act* by The Board of Directors of Drugless Therapy and authorized by The Board to administer a substance by intravenous injection to a patient shall be deemed to have met the standards of practice in subsections (4) and (5), subject to subsection (7).

(7) It is a standard of practice of the profession that a member described in subsection (6) shall successfully complete the course and examination mentioned in subsection (4) within six months of the coming into force of section 6 of the Act.

(8) Despite anything in this section, a member may perform a controlled act described in subsection (1) if he or she does so while taking part in a course or examination required under clause (4) (a) or (b) or (5) (a) or (b).

[...]

Selling a drug

12. (1) For the purposes of paragraph 7 of subsection 4 (1) of the Act, a member may sell a drug designated in Table 6 only if all of the standards of practice of the profession in this section are met.

(2) The following are standards of practice for the purposes of subsection (1):

1. Unless subsection (3) applies, the member must have a naturopath-patient relationship with the patient for whom the drug is sold.

2. Unless subsection (3) applies, the member must sell the drug directly to the patient or the patient's authorized representative.
 3. The member must sell the drug for therapeutic purposes only.
 4. Where a limitation, a route of administration or a dosage is indicated in the column opposite the drug in Table 6, a member shall only sell that drug in compliance with the limitation and in accordance with the route of administration and dosage specified.
 5. The member must advise the patient or his or her authorized representative that the drug may be purchased at a pharmacy.
 6. The member must have made reasonable inquiries and be satisfied that,
 - i. the patient does not have reasonable or timely access to a pharmacy,
 - ii. the patient would not otherwise buy the drug,
 - iii. the patient does not have the financial resources to obtain the drug if not sold by the member, or
 - iv. the drug is not reasonably available in a pharmacy.
 7. The member must not sell the drug if the selling provides a profit to him or her or a direct or indirect personal or financial benefit.
 8. The member must have ensured that the drug to be sold has been obtained and stored in accordance with any applicable laws.
 9. The member must have ensured that the drug to be sold has not expired and will not expire before the date on which the patient is expected to take the last of the drug.
 10. Unless subsection (3) applies, the member must retain in the patient's record a record that the drug was sold to the patient or his or her authorized representative and the price charged, and where subsection (3) does apply, a copy of the prescription required under clause (3) (d).
- (3) If the member does not have a naturopath-patient relationship with the person to whom the drug is sold, the member must not sell the drug unless,
- (a) at the time the drug is sold, the member possesses the prescription for the drug;
 - (b) the person who prescribed the drug is another member;
 - (c) the prescription contains all the information required under subsection 9 (3); and
 - (d) the member retains a copy of the prescription in the member's records.
- (4) Paragraphs 5 to 9 of subsection (2) apply, with necessary modification, to the member mentioned in clause (3) (b).
- (5) It is a further standard of practice of the profession that a member may only perform a controlled act described in subsection (1) if he or she has successfully completed,
- (a) a course on prescribing that has been approved by the Council; and
 - (b) an examination on prescribing that is administered or approved by the Council.
- (6) Despite anything in this section, a member may perform a controlled act described in subsection (1) if he or she does so while taking part in a course or examination required under clause (5) (a) or (b).

COLLEGE OF NATUROPATHS OF ONTARIO

- and -

ANTHONY YORES

DISCIPLINE COMMITTEE OF THE
COLLEGE OF NATUROPATHS
OF ONTARIO

**AGREED STATEMENT OF FACTS AND
ADMISSION OF PROFESSIONAL
MISCONDUCT**

STEINECKE MACIURA LEBLANC

Barristers & Solicitors

401 Bay Street

Suite 2308

Toronto, ON M5H 2Y4

Rebecca Durcan

Telephone: (416) 644-4783

Facsimile: (416) 593-7867

Lawyers for the College of Naturopaths
of Ontario

1. Requiring the Member to appear before the panel to be reprimanded immediately following the hearing of this matter.
2. Directing the Registrar to suspend the Member's certificate of registration for a period of seven (7) months, on a schedule to be set by the Registrar, three (3) months of which shall be remitted if the Member complies with the provisions of paragraph 3(a) through 3d) no later than January 31, 2020.
3. Directing the Registrar to impose the following specified terms, conditions and limitations on the Member's certificate of registration:
 - a. Requiring that the Member unconditionally pass, by June 30, 2020, and at his own expense, the ProBe course in ethics and/or jurisprudence;
 - b. Requiring that the Member successfully complete by December 31, 2019, to the satisfaction of the Registrar and at his own expense, the College IVIT

Course;

- c. Requiring that the Member successfully complete by December 31, 2019, to the satisfaction of the Registrar and at his own expense, the College Jurisprudence Course;
 - d. Requiring that the Member successfully complete by December 31, 2019, to the satisfaction of the Registrar and at his own expense, the Medical Records Course at the University of Toronto;
 - e. Requiring that the Member successfully complete, to the satisfaction of the Registrar and at his own expense, up to one (1) meeting, to be determined by the Registrar, with a Regulatory Expert, approved by the Registrar, within twelve (12) months following the lifting of the suspension; and
 - f. Requiring that the Member write an essay of approximately 1000 words in length, and provide it to the Registrar, no later than one month from the date of the meeting with the Regulatory Expert, or if the Registrar determines that no such meeting is required no later than one month from date the Registrar provides notice to the Member, that shall be published by the College at a time and in a format determined by the Registrar, on the following issue:
 - i. The lessons he learned in completing the PRoBe, IVIT, Jurisprudence, and Medical records courses and the meeting with the Regulatory Expert (if required by the Registrar).
4. For greater certainty, the Member's obligation to comply with the proposed terms, conditions and limitations on his certificate of registration contained in paragraph 3 is not relieved by serving the entire suspension referred to in paragraph 2 above.
5. Requiring the Member to pay of fine of not more than \$350 to the Minister of Finance.
6. The Member shall pay the College's costs fixed in the amount of \$5,000 payable

on a schedule to be set by the Registrar.

7. The Member acknowledges that this Joint Submission as to Penalty and Costs is not binding upon the Discipline Committee.

8. The Member acknowledges and understands and acknowledges that he is executing this document voluntarily, unequivocally, free of duress, free of bribe, and that he has been advised of his right to seek legal advice.

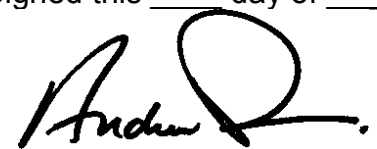
All of which is respectfully submitted,

Signed this 20 day of August, 2019



Dr. Anthony Yores, ND
Member

Signed this 21 day of August, 2019



Andrew Parr, CAE
Registrar, College of Naturopaths of
Ontario

DISCIPLINE COMMITTEE OF THE
COLLEGE OF NATUROPATHS
OF ONTARIO

**JOINT SUBMISSION AS TO PENALTY
AND COSTS**

STEINECKE MACIURA LEBLANC

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**DISCIPLINE COMMITTEE OF
THE COLLEGE OF NATUROPATHS OF ONTARIO**

BETWEEN:

COLLEGE OF NATUROPATHS OF ONTARIO

- and -

ANTHONY YORES

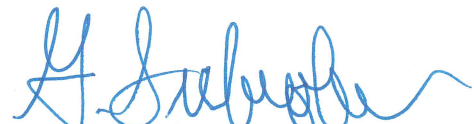
NOTICE OF WAIVER

The undersigned hereby waives all rights of appeal pursuant to section 70 of the *Health Professions Procedural Code* of the *Regulated Health Professions Act, 1991* with respect to the findings and the order of a reprimand made by the Discipline Committee of the College of Naturopaths of Ontario on August 22, 2019.

Dated at Toronto, Ontario this 22 day of August, 2019.



ANTHONY YORES



Witness
Name of Witness:

