

College of Naturopaths of Ontario

# Protecting the public. Supporting safe practice.

Annual Report
April 1, 2024 to March 31, 2025

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# About the College of Naturopaths of Ontario

The College of Naturopaths of Ontario (the College) is a health regulatory authority established under the *Naturopathy Act, 2007*, the *Regulated Health Professions Act, 1991* (RHPA), the Health Professions Procedural Code which is Schedule 2 of the RHPA, and the regulations made under each of those statutes.



# The Purpose of Regulation

The College's purpose is set out in statute and can be summarized as follows:

- To regulate the practice of naturopathy as set out in legislation and to administer that legislation,
- To develop, establish, and maintain:
  - standards for entry to practice,
  - programs and standards to assure quality,
  - standards of knowledge and skill and programs to promote continuing evaluation, competence and improvement,
  - standards of knowledge, skill and judgement for the performance of controlled acts, in collaboration with other Colleges,
  - standards of professional ethics,
  - standards to promote the ability of registrants to respond to changes in practice environments, advances in technology and emerging issues,
  - programs to help individuals exercise their rights set out in the legislation,
- To promote and enhance relations between the College, its members and other professional Colleges, and
- To promote interprofessional collaboration.



# Protecting the public. Supporting safe, ethical practice.

In fulling its role, the College's primary duty is to serve and protect the public interest. In doing so, the College supports patients' rights to receive safe, competent, and ethical naturopathic care.

The College delivers several important programs to perform its role, including:

- Examinations program, to ensure that those who enter the profession have the competencies necessary to provide safe, competent, and ethical care,
- Entry-to-Practice program, to ensure that those applying meet all the requirements to become an ND in Ontario,
- Registration program, to ensure that registrants of the College are current on practice requirements and support the College in its work,
- Standards program, to ensure that the standards of practice are current and understood,
- Quality Assurance program, to ensure that NDs maintain their skills through continuing education, professional development and peer assessments.
- Complaints and Reports program, to ensure that the College can respond to complaints about NDs or concerns raised and to evaluate these concerns in a manner that is fair to all involved,
- Discipline program, to conduct open, transparent and fair hearings into the conduct of registrants against whom a complaint has been determined to have merit and warrants a hearing, and
- Regulatory Education program, to provide on-line education to registrants about the legislation governing the profession and the standards of practice.

# Governance of the College

The College, like the 25 other health regulatory authorities in Ontario, is governed by two equally important entities, the Board of Directors and the Staff of the College.

# The Governing Board

The College is governed by a board of directors referred to as a Council. The Council includes up to eight registrants of the College elected throughout Ontario and up to seven members of the public appointed by the Government of Ontario.

Overall, the role of the Council is to perform three functions:

- 1. Ensure that the College fulfills its mandate set out in legislation.
- 2. Set the strategic directions of the College and monitor the College's performance.
- 3. Appoint the Chief Executive Officer and monitor their performance against agreed-upon priorities.

In 2024-25, Council duties and responsibilities were performed by the following individuals.

#### Officers and Executive Committee



# Governance of the College

#### **Council members**

Dr. Felicia Assenza, ND,

Mr. Brook Dyson<sup>1</sup>,

Mrs. Lisa Fenton,

Dr. Brenda Lessard-Rhead, ND (Inactive),

Mrs. Sarah Griffiths-Savolaine,

Mrs. Tiffany Lloyd,

Mrs. Marija Pajdakovska<sup>2</sup>,

Dr. Jacob Scheer, ND

# **Executive Leadership**

The operations of the College are overseen by a group of dedicated and talented individuals. The following individuals provide the leadership for College staff.

Andrew Parr, Chief Executive Officer
Jeremy Quesnelle, Deputy Chief Executive Officer, Regulation
Erica Laugalys, Deputy Chief Executive Officer, Registrant & Corporate Services
Maryam Katozian, Director, Registration & Examinations

Agnes Kupny, Director, Operations





# Letter from the Council Chair

I am pleased to welcome readers to the 2024-25 Annual Report of the College of Naturopaths of Ontario. This report is the second report based on our most recent strategic plan established by the Council of the College.

I think that the strategic plan can be summarized in a couple of succinct points, based on what the Council would like the College to achieve. First, we want to be able to engage people, especially our registrants, to provide information and education to ensure that they fully understand the purpose of regulation and the College's role within that. The second is for the College to be proficient in performing its role so that as an organization, it plays its part in enabling the profession to garner the respect that it deserves.

More than half of the Council is made up of Naturopathic Doctors. We are a part of the profession as much as we are part of its regulatory body. The profession is important to us as it is to all registrants. All registrants contribute through their work, to the respect the profession garners. Understanding regulation moves us a long way towards performing within the regulatory framework and good conduct and performance, both by the profession and the College, contribute to the perception of the profession among the public.

Dr. Jordan Sokoloski, ND Council Chair



# Letter from the CEO

Welcome to the 2024-25 Annual Report of the College. We are delighted to report to Ontarians on the activities and outcomes for the period of April 1, 2024 to March 31, 2025. As Dr. Sokoloski, ND has noted this is the end of our second year under the guidance of a new strategic plan established by the Council.

As we reflect on the activities of the past year, it becomes clear that working towards the auspicious goals that are set out in the plan requires equally auspicious activities. Creating the plan is certainly one challenge, living by it and up to it are another.

We are pleased with our activities and the outcomes from the past year. As a College, we are learning that meeting our goals requires great concentration and a united effort of the entire team. It also requires resources, both human and financial, to achieve them as they are targets that require activities beyond the mere task of regulating the profession. However, we cannot forget that regulation is the primary task of the College.

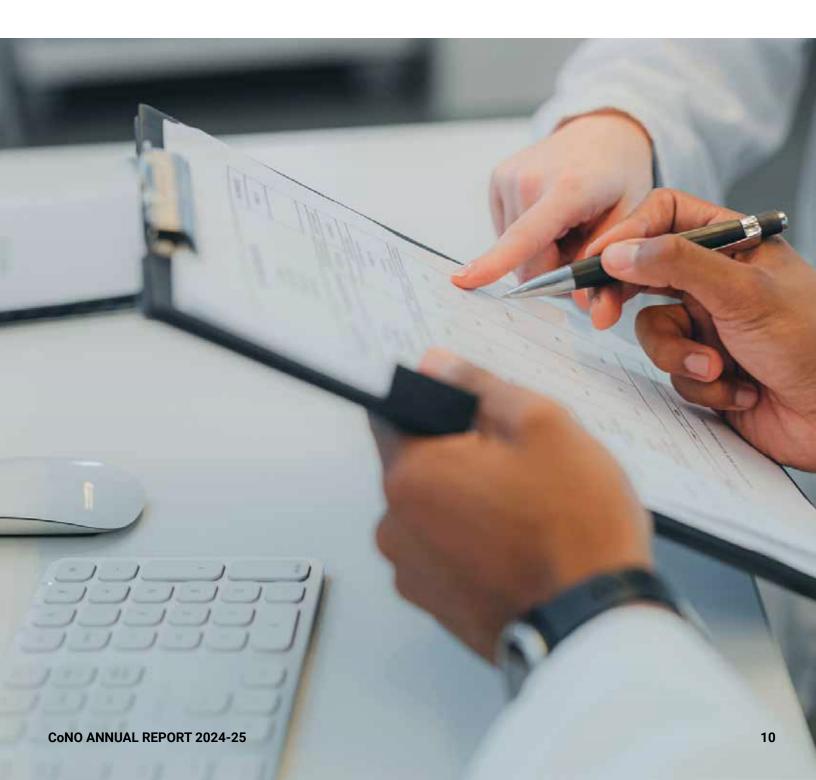
We hope you find this report enlightening and, as always, we invite any comments or questions. Please direct those to me at <a href="mailto:ceo@collegeofnaturopaths.on.ca">ceo@collegeofnaturopaths.on.ca</a>.

Andrew Parr, CAE
Chief Executive Officer



# Strategic Framework

The Strategic Framework for the College, established by the Council in January 2023, sets out the College's vision, mission, desired outcomes and key priorities over the next five years. It lays the framework for the direction of the organization and provides a shared understanding of our purpose and our goals.



# Strategic Framework Overview

### Mission, Vision and Values

#### **Our Mission**

The College proactively regulates naturopathic doctors to ensure safe, ethical and competent naturopathic care for the people of Ontario.

#### **Our Vision**

Trust in naturopathic doctors through effective regulation.

#### **Our Values**

The College of Naturopaths of Ontario will govern the profession, and its own activities based on its values. We will:

- Be fair, equitable, transparent, and accountable,
- Act with honesty and integrity,
- · Work collaboratively with others,
- Value diversity, foster inclusivity and belonging,
- Accept diverse perspectives and value healthy debate,
- Be respectful and professional,
- Treat all human resources as a key asset,
- Ensure that our standards and processes are evidence-informed,
- Respect the health of the individual and the environment, and
- Be courageous, bold, and innovative.

# **Strategic Objectives & Priorities**

Forming the backbone of the Council's strategic framework, these represent what the Council wants the College to achieve, and the key areas that the Council wants the College to focus on to do so.

For each of the noted priorities, the CEO of the College has also established operational activities that the College will engage in to accomplish the strategic priorities. These are set out in the College's Operational Plan and are also highlighted within this report.

Strategic Objectives	Related Strategic Priorities
Strategic Objective #1  The College engages its stakeholders, through education and collaboration, to ensure that they understand the role of the College and trust in its ability to perform its role.	<ul> <li>The College engages its system partners to further their understanding and trust in the College and the profession.</li> <li>The College engages its registrants and the public to further their understanding and trust in the College and the profession.</li> <li>The College relies on a risk-based approach to proactively regulate the profession.</li> </ul>
Strategic Objective #2  Naturopathic Doctors are trusted because they are effectively regulated.	<ul> <li>Applicants are evaluated based on their competence and evaluations are relevant, fair, objective, impartial and free of bias and discrimination.</li> <li>Registrants and the public are aware of and adhere to the standards by which NDs are governed.</li> <li>Registrants are held accountable for their decisions and actions.</li> <li>Registrants maintain their competence as a means of assuring the public that they will receive safe, competent, ethical care.</li> <li>The College examines the regulatory model to maximize the public protection benefit to Ontarians.</li> </ul>

# Strategic Objective #1 – Activities and Outcomes

The College engages its stakeholders, through education and collaboration, to ensure that they understand the role of the College and trust in its ability to perform its role.

Strategic Priority	Identified Operational Activities
The College engages its system partners to further their understanding and trust in the College and the profession.	Individual system partner engagement
The College engages its registrants and the public to further their understanding and trust in the College and the profession.	<ul> <li>In Conversation With Program</li> <li>Regulatory Guidance</li> <li>Regulatory Education Program</li> <li>Consultation Program</li> <li>Corporate Communications</li> </ul>
The College relies on a risk-based approach to proactively regulate the profession.	Risk-based Regulation Program

# System Partner Engagement

A system partner is any group who in some way supports or participates in the regulation of the profession. For any health regulatory authority, there will be those system partners that are in a closer orbit to the work of regulating a particular profession and those who, while still system partners, may be a few steps removed.

For the College, we would consider our more closely aligned system partners as the registrants of the College, the Ontario Ministry of Health (MOH), the Ontario Association of Naturopathic Doctors (OAND), the Canadian College of Naturopathic Medicine (CCNM), Health Profession Regulators of Ontario (HPRO), the Canadian Alliance of Naturopathic Regulatory Authorities (CANRA), and the public.

Other system partners with whom the College engages but with whom it may be somewhat less aligned include other health regulatory Colleges, other health professional associations, other naturopathic regulatory authorities, and other government agencies and ministries.

In 2024-25, engagement occurred in several different ways, including direct one-to-one meetings, various direct communication and consultations. Direct, one-to-one meetings were by far the most meaningful. Here is a summary of stakeholder engagement though one-to-one meetings.

Organization	2023-24	2024-25
CANRA	13	12
CCNM	1	0
HPRO	3	4
OAND	6	6
МОН	3	2

# In Conversation With Program

The In Conversation With (ICW) program allows the College to engage in dialogue with registrants and members of the public through a focused question and answer townhall-style format. Attendees submit questions in advance and the College organizes those questions into themes and holds a webinar to answer those questions and live follow up questions posed by attendees.



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#### ICW Registrations

Session	Attendance
Prospective Naturopathic Therapies Regulation – Preliminary Consultation	101
Standards of Practice	68
Data Collection Requirements Relating to the Standards of Practice for Therapeutic Prescribing	92

### Registrations by Program Year

	2023-24	2024-25
# of Sessions	5	3
Average attendance	28	87
Total attendees	142	261

# **Regulatory Guidance**

The College's Regulatory Guidance program addresses inquiries from naturopaths, the public, insurance companies, other regulators, and professional associations. It offers clarity on regulations, standards of practice, guidelines, and policies related to the regulation of naturopathy in Ontario.

### Number of Inquiries Received

	2023-24	2024-25
By Email	351	348
By Phone	253	252
Total	604	600

## **Worth Noting**

Year-over-year, the number of inquiries has remained stable.

Top 10 Most Frequently Asked Topics (2024-25)

Topic of Inquiry	2023-24	2024-25
Fees and billing	49 (1)	52 (1)
Record keeping	44 (4)	49 (2)
Scope of practice	42 (5)	48 (3)
Laboratory testing	46 (3)	43 (4)
Telepractice	47 (2)	38 (5)
Delegations and referrals	25 (9)	31 (6)
Prescribing	8 (-)	30 (7)
Consent and privacy	27 (8)	27 (8)
Advertising	5 (-)	26 (9)
Inspection program	28 (7)	21 (10)

#### **Worth Noting**

Although many of the top ten topics have remained similar, there is some significant change in importance. For example, both advertising and prescribing have seen significant increases. This is likely due to other programming, such as the Regulatory Education or Risk-based Regulation programs.

# **Regulatory Education Program**

The Regulatory Education Program (REP) was launched in the 2023-24 reporting period in support of the Council's new strategic objectives and priorities, with the intent of increasing the trust of the College among the profession and public by providing no-cost continuing education programming on key regulatory topics.

The current year marks the second year of the program, which provides the College with an opportunity to increase understanding of the legislation, regulations and standards among members of the profession and the public and to increase the success of the profession in compliance with the regulatory framework in these areas.

Topics selected for this second year of the program were based on the original Request for Proposals issued by the College and feedback from participants in the early programming. Eight sessions were offered in 2024-25.

#### REP Attendance

Session	Attendance
The Giving and Receiving of a Delegation	168
Understanding Drugs and Substances	219
Regulated Health Professionals and the Patient's Pathway	169
Mandatory Reporting Requirements	206
Record Keeping	195
Health Information Privacy and Reporting	111
Currency Requirements and Practising the Profession	161
Substitute Decision Making	160

# Attendance by Program Year

	2023-24	2024-25
# of Sessions	5	8
Average attendance	80	173
Total attendees	404	1,389

# **Worth Noting**

REP has experienced a significant increase in attendance at the sessions in this program year.

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# **Consultation Program**

The College's Consultation program was redeveloped in 2023-24 and continued into 2024-25. While prior Consultations were primarily limited to proposed changes to regulation and the College's by-laws, the new Consultation program seeks to elicit feedback and educate stakeholders and the public on proposed changes to other key documents such as policies, professional standards and guidelines.

This year the College introduced a concept of a "Preliminary Consultation" designed as fact finding opportunities to get an understanding of how key issues, particularly those dealing with strengthening the regulatory framework might impact the public and the profession. This approach has included general survey questions and the release of white papers and hypothetical approaches to regulation.

Copies of consultation materials for all consultations conducted as part of this program, both past and present, are available on the <u>College website</u>.

#### Consultations Undertaken

Consultation Name	Launch Date	Number of Responses
Standards of Practice	August 9, 2024	365
Prospective Naturopathic Therapies Regulation – Preliminary Consultation	November 6, 2024	687
Classes of Registration – Preliminary Consultation	March 12, 2025	27

### Overall Engagement

	2023-24	2024-25
# of Consultations	3	3
Average responses	12	360
Total responses	37	1,079

# **Worth Noting**

The level of engagement through consultations has increased significantly in 2024-25.

# **Corporate Communications**

The communications functions of the College provide information to help patients make informed decisions about their care and offer guidance on how to address concerns regarding naturopathic practice. It also serves to keep naturopaths updated on regulatory requirements, ensuring they can effectively implement best practices to protect the public.

Maintaining a bilingual online presence remains a priority for the College through both its own website and its social media messaging.

Communication Channel	Туре	2023-24		20	24-25
		Number sent/ Posted Views/ Open Rate		Number sent/ Posted	Views/ Open Rate
iNformeD	Newsletter	12	78%	12	77%
Emails	Broadcast	49,006 80%		62,876	76%
News articles	Publication	23/16*	Unknown	17/6*	Unknown
LinkedIn	Social media	870 followers	, ,		4,914 impressions
Facebook	Social media	73 followers	98 impressions	88 followers	1,766 impressions
Website	Unique views	216,080		324,000	

<sup>\*</sup>numbers refer to articles published in English/French.

# Risk-based Regulation

The Council of the College identified Risk-based Regulation as one of its strategic priorities. A traditional approach to regulation of a profession relies on individuals, such as registrants or the public, to provide information to the regulator to which the regulator

reacts. The most typical example is a complaint filed by a member of the public against a registrant. Risk-based Regulation is intended to be more proactive in its approach, using the information that is available from its own regulatory processes and other sources, to assess the information and identify any potential risk of harm to patients. Once risks are identified, the regulator, in partnership with its system partners, can identify ways to reduce the risk through remedial programming such as information sharing, educational programs, and awareness campaigns.

Several activities in support of the Risk-based Regulation program were completed in this past year. This includes the data collection consultation, noted above, which resulted in the launch of new data sets being sought by the profession. This data seeks to obtain the number of drugs prescribed, dispensed, compounded and sold, as well as the number of substances administered by injection and inhalation. No information about specific drugs or substances is required although some general data about reaction to and the types of reactions will provide valuable support to the program.

In February 2025 through to the end of March 2025, registrants of the College were once again completing their annual information return and remitting their fees for registration for the new year. As a part of that process, members of the profession were for the second time providing important data about the performance of controlled acts as part of their practices, the size of their patient base, and the nature of their practice. All data that will be supporting the Risk-based Regulation program. Later in this report, this data is provided under the title of Profile of the Profession.

Continuing with the idea of support, in support of the therapeutic prescribing data collection, the College launched a program to help registrants collect their data using on-line systems at the College's disposal. We are delighted to be able to help over 200 registrants in this endeavour, and anticipate assisting more in future years.

While the College can bring data forward from its own processes to support the Risk-based Regulation program, we do not have access to a lot of data from the public. This was an area of exploration over the past year which has culminated in a collaboration with Pivotal Research Inc. out of Alberta. Pivotal has been working with several Ontario health regulatory Colleges in public and profession-based research and will be working with this College in hearing the Voice of the Public in this coming year.

Finally, the Council has established a new Working Group to review the Risk-based Regulation data. The Working Group includes representation from the Council, the Canadia College of Naturopathic Medicine, and the Ontario Association of Naturopathic Doctors. The Working Group will be meeting once the data from the 2024-25 year has been assembled for review and will be tasked with identifying areas where it sees the potential for risk of harm to patients and potential ways to mitigate those risks.

# Strategic Objective #2 – Activities and Outcomes

Naturopathic Doctors are trusted because they are effectively regulated.

Strategic Priority	Identified Operational Activities
Effective regulation of the profession.	<ul> <li>Good Governance</li> <li>Properly constituted</li> <li>Volunteer Program</li> <li>Human Resource Management &amp; Planning</li> <li>Sound financial management</li> <li>Transparency &amp; Accountability</li> <li>Commitment to oversight requirements</li> </ul>
Applicants are evaluated based on their competence and evaluations are relevant, fair, objective, impartial and free of bias and discrimination.	Examinations Program     Entry-to-Practise Program     PLAR Program
Registrants and the public are aware of and adhere to the standards by which NDs are governed.	<ul><li>Inspection Program</li><li>Standards Program</li><li>Regulatory Education Program</li></ul>
Registrants are held accountable for their decisions and actions.	<ul> <li>Registration Program</li> <li>Professional Corporations Program</li> <li>Patient Relations Program</li> <li>Complaints &amp; Reports Program</li> <li>Hearings Program</li> </ul>
Registrants maintain their competence as a means of assuring the public that they will receive safe, competent, ethical care.	Quality Assurance Program     Audit of Currency Hours
The College examines the regulatory model to maximize the public protection benefit to Ontarians.	<ul><li>Consultation Program</li><li>Review/Update of Regulations, Standards</li><li>&amp; By-laws</li></ul>

# **Adherence to the Principles of Good Governance**

For the College to effectively regulate the profession in Ontario, the College itself and its Council must adhere to the principles of good governance. That the College is governed well is a matter of public interest. An organization cannot claim to serve and protect the public interest if it is not performing its role and governing itself appropriately.

# **Proper Composition of Council & Committees**

Under the *Naturopathy Act*, 2007, the College must have between six and nine registrants of the College who are elected and between five and eight members of the public appointed by the Government of Ontario. The College by-laws set out that there will be seven registrants elected to the Council in districts that cover the breadth of the province. In consultation with the Ministry of Health, the College seeks up to seven members of the public to be appointed to the Council.

During the period April 1, 2024 and March 31, 2025, the Council maintained seven registrants of the College elected to the Council. The Government of Ontario had six appointments to the Council at the beginning of the year; however, this dropped to five by the end of the year due to the resignation of two public appointees and the appointment of one individual.

Over this reporting period, the Council has held six regularly scheduled meetings during which it:

- Received reports on the regulatory operations of the College,
- Received reports on the financial activities and status of the College,
- Received reports on the activities of the Committees of the Council,
- Reviewed its governance policies as required under its governance model,
- Received briefings and deliberated on important issues facing the College, and
- Received training on College programs and the legislative framework.

#### **Worth Noting**

Professional members on Council - Regularly scheduled elections were held in three districts in this reporting period. One incumbent Council member (Dr. Jonathan Beatty, ND) had resigned in March 2024, one incumbent (Dr. Shelley Burns, ND) had reached the maximum length of service permitted in the legislation and one incumbent (Dr. Anna Graczyk, ND) chose not to seek re-election.

Three new registrants were elected in these districts and assumed their positions on the Council in May 2024. They include Dr. Felicia Assenza, ND, Dr. Brenda Lessard-Rhead, ND (Inactive) and Dr. Erin Psota, ND.

Public members on Council - In July 2024, the Council received the revocation of the appointment of Tiffany Lloyd (Nepean, ON) who had to step away from her duties due to personal family commitments. Around the same timeframe, the Council learned that Brook Dyson (Collingwood, ON) would not seek re-appointment due to on-going work commitments. In November 2024, the College received the appointment of Marija Pajdakovska (Oakville, ON) to the Council.

In May 2024, the Council conducted elections to the Officer positions of the College (please refer to the Council listing on page 7) and made appointments involving 42 individuals to its 14 statutory and non-statutory committees. The statutory committees, referred to in this way because they are mandated in the governing statute and are given decision-making authority over all regulatory processes, include:

- Discipline Committee,
- Fitness to Practice Committee,
- Inquiries, Complaints and Reports Committee,
- Patient Relations Committee,
- · Quality Assurance Committee, and
- Registration Committee

#### **Worth Noting**

Although the College Committees have only 42 volunteers appointed to them:

- 22 individuals sit on two or more committees.
- two of these individuals sit on four committees, and
- eight are appointed to three committees.

# **Human Resources Management & Planning**

Under the Council's governance model, the Council only employs one individual, the Chief Executive Officer. Responsibility for all other employees rests with the CEO. Nonetheless, the Council has additional responsibilities surrounding the human resources of the College.

The Council has a duty to ensure that:

- There are sufficient resources available to deliver the regulatory programs.
- The human resources of the College are well managed, meaning that all positions
  must have a clear position description, incumbents must have annual performance
  reviews, and there is a human resource policy that is fair, transparent and available
  to all employees.
- There is a human resource plan for the College that looks ahead to the changing landscape and ensures that sufficient personnel will be available in the future and that the strategic plan of the Council can be moved forward.

At its March meeting each year, the Council of the College receives, for its review and approval, an Operational Plan which sets out the activities of the College for the coming 3-year period, including a human resource plan that identifies the needs of the College to support the activities and a budget (operational and capital) to support the College's activities.

## **Volunteer Program**

While most registrants might believe that the staff of the College make regulatory decisions, the reality is that for all decisions relating to individual registrants of the College, regulatory decisions are made by the many members of the College's Volunteer Program, who represent a mix of the profession and members of the public. Roles performed by volunteers include examiners, assessors, inspectors, and committee members making important decisions about who becomes registered, how a complaint should be addressed, whether a registrant was incompetent in their practice or committed acts of professional misconduct.

The College has developed and maintained a robust volunteer program to recruit, train and engage its many volunteers. Each year, new volunteers are recruited, evaluated through a competency-based program and interviewed by the Governance Committee of the Council. Committee appointments are made annually in May by the Council.

# Sound Financial Management

Good governance of the College also means that the organization employs sound management principles, ensuring that the College has the financial resources necessary to sustain its long-term viability.

During the year, quarterly financial statements are presented to the Council of the College and released publicly along with a variance report that explains how and why actual financial results for the period have been different than anticipated in the budget.

Detailed policies of the Council ensure that the finances of the College are managed in accordance with its wishes and that reports reflect the level of detail it requires. Annually, an external, independent auditor undertakes an audit of the College's financial statements. That audit for 2024-25 is provided in this report and indicates that the statements reflect the actual financial standing of the College.

# Transparency & Accountability

The College's commitment to transparency and accountability has been met and maintained during this past year. Council meeting materials are released publicly through the College's website one week prior to the meeting. Council meetings are open to the public and are live streamed, apart from human resource matters which are properly excluded.

The Council has maintained its annual conflict of interest questionnaire, a summary of which is included in each meeting package. A full report of annually declared Council conflicts of interest is made available on the College's website.

# **Commitment To Oversight Requirements**

The College and its Council have been and remain committed to the oversight requirements of the Ontario Government and its various agencies. These requirements include the Office of the Fairness Commissioner of Ontario (OFC), the Ontario Ministry of Health (MOH), the Human Rights Tribunal of Ontario (HRTO) and the Health Professions Appeal and Review Board (HPARB). Additionally, the College is also overseen by the Superior Court of Justice in Ontario, and the Divisional Court for appeals of decisions made by Panels of the Discipline or Fitness to Practice Committee.

**Office of the Fairness Commissioner of Ontario** - In 2024-25, the College submitted its annual Fair Registration Practices Report with the OFC. A copy of the report (along with all prior reports) is published on the <u>College's website</u>.

**Ministry of Health** - The College has also remained committed to working with the Ontario Ministry of Health. This includes regular communications with Ministry personnel and, when needed, one on one meetings. The College also provided its annual College Performance Measurement Framework Reporting Tool. The 2024 report was submitted to the Ministry at the end of March 2025 and is available on the <u>College's website</u>.

**Human Rights Tribunal of Ontario** - The College has one matter before the HRTO. Although the matter was initiated in 2019, significant delays have been encountered at the Tribunal itself. In this reporting year, the matter was finally moved forward with a case conference having been held.



**Health Professions Appeal and Review Board** - HPARB serves as an independent body established by provincial legislation to monitor the activities of the Registration Committee and the Inquiries, Complaints and Reports Committee to ensure these committees fulfill their duties in the public interest and as mandated by the legislation. As such, HPARB has jurisdiction over appeals related to:

- All decisions of the Registration Committee, except for a decision directing the CEO to issue a certificate of registration.
- Decisions concerning complaints made by the Inquiries, Complaints, and Reports Committee (ICRC). Either the person who files a complaint, or a registrant who was the subject of a complaint, can request HPARB to review the ICRC's decision on a complaint within 30 days of receipt of the decision, except if the decision is to refer the matter for to the Discipline Committee for a hearing.

#### Matters before HPARB

	2023-24	2024-25			
Registration Committee					
Appealable decisions	2	3			
Decisions appealed	0	0			
Inquiries, Complaints and Reports Committee					
Appealable decisions	14	17			
Decisions appealed	4	2			
Outcomes	3	1			

**Divisional Court, Superior Court of Justice** – During this reporting period, no appeals of decisions Panels of the Discipline Committee or Fitness to Practice Committee were filed.

# **Examinations Program**

The College administers four entry-to-practice examinations, the Ontario Clinical Sciences Examination, the Ontario Clinical (Practical) Examinations, the Ontario Biomedical Examination and the Ontario Jurisprudence Examination, which collectively determine whether an individual possesses the necessary competencies to enter the profession.

Except for the Jurisprudence examination (a low-stakes, open book exam), three attempts are provided for successful completion of examinations with mandatory remediation, as determined by a panel of the Registration Committee, required after two unsuccessful attempts.

Entry-to-Practise Examinations Data

	2023-24			2024-25		
Examination	Candidates	Sittings	Pass Rate	Candidates	Sittings	Pass Rate
Clinical Sciences	112	2	67%	126	2	73%
Biomedical	112	2	67%	130	2	65%
Clinical (Practical)	119	4	67%	119	3	67%
Jurisprudence	88		100%	70		100%

Two post-registration examinations are also administered by the College:

- The Ontario Prescribing and Therapeutics Exam, for NDs wishing to meet the Standard of Practice for Prescribing to perform the controlled acts of prescribing, dispensing, compounding, selling drugs, and/or administering substances by non-IVIT injection or inhalation.
- 2. The Ontario Intravenous Infusion Therapy (IVIT) Exam, for NDs wishing to meet the Standard of Practice for IVIT to perform the controlled acts of administering a substance by intravenous injection, and/or compounding a substance for administration by intravenous injection.

#### **Worth Noting**

At the end of March 2025, 867 registrants (51%) of the profession are authorized for therapeutic prescribing. Of those, 368 registrants were also authorized to providing intravenous infusion therapy. When measured against all registrants who are practising NDs, 22% were authorized to perform IVIT.

#### Post-registration Examinations Data

	2023-24			2024-25		
Examination	Candidates	Sittings	Pass Rate	Candidates	Sittings	Pass Rate
IVIT	44	2	70%	32	2	63%
Prescribing & Therapeutics	91	2	54%	95	2	47%

#### **Examination Appeals Committee**

The Examination Appeals Committee develops policies and procedures governing the appeal process for College-administered examinations. It also reviews appeals filed by candidates related to failed entry-to-practise and post-registration examinations. Grounds for appeals are limited to procedural or environmental irregularities or a perception of undue bias which a candidate believes negatively impacted their ability to successfully complete the exam.

# Appeals

	2023-24	2024-25
Appeals filed	5	2
Appeals granted	5	2
Appeals denied	0	0



The entry-to-practise program is the primary vehicle through which the College registers safe, competent, and ethical individuals to practise naturopathy in Ontario. Although individuals can make an application for registration at any time, it is recommended that applications be submitted only after an individual has successfully completed:

- a program in naturopathy accredited by the Council on Naturopathic Medical Education (CNME) or the College's Prior Learning Assessment and Recognition (PLAR) program; and
- all entry-to-practise examinations from the College.

An individual who meets all the entry-to-practise requirements set out in the Registration Regulation made under the *Naturopathy Act, 2007*, and the Registration Policies established by the Registration Committee are granted a certificate of registration. Individuals who, in the opinion of the Chief Executive Officer, there are doubts about whether they meet the requirement or who do not meet the requirements, or where limitations on practise are recommended, are referred to a panel of the Registration Committee for evaluation.

#### Entry-to-Practice Data

	2023-24	2024-25
Applications in process from prior year(s)	14	11
Applications received in this year	81	70
Certificates of Registration issued	84	75

#### Registration Committee

Panels of the Registration Committee consider applications for registration referred by the CEO when they:

- Have doubts on reasonable grounds that the applicant fulfills the registration requirements,
- Believe that a term, condition or limitation should be imposed on the applicant's certificate of registration, or
- Propose to deny issuance of a certificate of registration.

Common referral indicators include reasonable doubt related to an applicant's:

- Currency of knowledge and skills, having exceeded the timeline set out in Regulation for completion of entry to practise requirements,
- Practice of the profession in another Canadian jurisdiction (labour mobility),
- Good character/past conduct, and
- Ability to practise safely and competently in relation to a physical or mental condition or disorder.

When an application is being referred to a panel of the Registration Committee, applicants are advised that the referral is being made and the reasons for the referral. They are invited to make submissions for the consideration of a panel of the Registration Committee at point of review.

At the conclusion of the review, the panel will do one of the following:

- Direct the CEO to issue a certificate of registration to the applicant,
- Direct the CEO to issue a certificate of registration only after the applicant has successfully completed one or more of additional examinations or education and training,

- Direct the CEO to issue a certificate of registration with terms, conditions or limitations (TCLs) on the certificate (practice of the applicant), or
- Deny the applicant a certificate of registration.

As noted earlier, except for a decision to grant a certificate of registration, the decisions of the panels of the Registration Committee can be appealed to HPARB.

#### Referrals to the Registration Committee

	I	
	2023-24	2024-25
Number of referrals	8	6
Decision to issue a certificate	6	3
Decision to issue a certificate with TCLs	1	0
Decision to issue a certificate after additional examinations	0	0
Decision to issue a certificate after additional education or training	1	2
Denied Certificate	0	1



## Prior Learning Assessment and Recognition (PLAR) Program

This multi-stage assessment process of an individual's knowledge and skills for 'substantial equivalency' to that of a CNME-accredited program graduate is comprised of five assessment stages which are a mix of paper-based, knowledge-based and demonstration-based components. To be accepted for assessment in the PLAR program, individuals must have sufficient language proficiency and have a minimum of a Canadian Bachelor's degree or equivalent in a healthcare discipline reasonably related to naturopathy.

In 2024-25, no new applications for the PLAR Program were received. One application from a prior year was completed and the individual successfully completed the PLAR program and has moved forward to the entry-to-practice examinations.

# **Inspection Program**

The College's Inspection Program ensures the safety and quality of Intravenous Infusion Therapy (IVIT) provided by naturopaths in Ontario. Due to the inherent risks of IVIT procedures—such as administering substances via IVIT or preparing customized therapeutic products—strict standards are enforced.

According to the General Regulation under the *Naturopathy Act, 2007*, all new IVIT premises must pass an inspection before offering IVIT procedures. Existing premises were required to be inspected by March 1, 2019, when the Regulation came into effect. The Inspection Program has fulfilled this requirement, with subsequent inspections scheduled every five years from the initial inspection date.

#### **Worth Noting**

The College has a group of 11 dedicated registrants of the College who conduct inspections for the College. Each of these individuals must:

- Be in good standing with the College,
- Have met the standard of practice for therapeutic prescribing,
- Have met the standard of practice for IVIT, and
- Have successfully passed an inspection of their own IVIT clinic.

#### Premises Data

Data point	2023-24	2024-25
Premises registered at start of year	155	158
New premises registered	14	20
Premises that ceased providing procedures	11	16
Premises at the end of the year	158	162
Estimated number of compounds created in premises.	90,922	89,752
Estimated number of IVIT administrations in premises.	87,638	85,992

#### **New Premises Inspections**

New premises registering to be able to provide an IVIT procedure undergo a two-part inspection program.

**Part I Inspection** - The initial part of the inspection ensures that a clinic meets all IVIT program requirements before starting IVIT procedures, confirming its readiness for safe, competent care.

**Part II Inspection** - The second part of the inspection occurs after IVIT procedures have begun being provided at the new clinic, involves direct observation of the procedures and review of patient records related to IVIT.

#### Five-Year Anniversary Inspections

As suggested in the name, five-year anniversary inspections are undertaken at approximately the fifth year following the initial inspection and every five years thereafter.

**5-Year Inspection** – This is a single inspection that ensures that all of the requirements of a premises set out in the Inspection Program continue to be met. It will also involve direct observation of the procedures and review of patient records related to IVIT.

#### Inspections Data

Co

	Inspection Type	2023-24	2024-25	
	Existing Premises 5-Year	35	10	
	New Premises – Part I	17	19	
	New Premises – Part II	17	16	
			\	
			(h)	\ /
οNO	ANNUAL REPORT 2024/25			33

#### **Inspection Committee**

The Inspection Program is supported by an Inspection Committee composed of IVIT-qualified naturopaths and a public member. The Committee reviews inspection reports, assesses outcomes, and determines whether a premises can open or continue providing IVIT services. It also reviews occurrence reports, deciding on necessary follow-up actions for Type 1 Occurrences.

During this reporting period, the Committee delivered 45 final outcomes, demonstrating its active role in ensuring the safety and quality of IVIT services.

#### Occurrence Reports

Under the Inspection Program, registrants must report events, known as occurrences reports, to the College. There are two types of occurrence reports that are required.

**Type 1 Occurrence Reports** - These reports are required to be filed with the College within 24 hours of when the registrant becomes aware of the specific event having occurred. While most Type 1 Occurrence Reports are filed by a registrant directly involved in the treatment, every registrant who becomes aware of the event is required to report the occurrence. There are six events that are subject to these reporting requirements:

- 1. Death of a patient on-site at the clinic or within five days of the IVIT procedure.
- 2. Referral of a patient to emergency services within five days of the IVIT procedure.
- 3. Performing a procedure on the wrong patient.
- 4. Administration of an emergency drug immediately following the IVIT procedure.
- 5. Diagnosis of shock or convulsions of a patient within five days of the IVIT procedure.
- 6. Diagnosis of post-procedure infections in a patient within five days of the IVIT procedure.

**Type 2 Occurrence Reports** - All premises conducting IVIT must monitor and report Type 2 occurrences to the College annually. These include:

- Infections.
- Unscheduled treatments within five days of an IVIT procedure, and
- Adverse drug reactions following IVIT procedures.

### **Outcomes from Occurrence Reports**

When a Type 1 occurrence is reported, the College gathers relevant information and presents the case to the Inspection Committee. The Inspection Committee's ability to address issues and to refer matters to other regulatory processes within the College plays a crucial role in integrating our regulatory programs, enhancing public protection and ensuring patient safety.

The most serious cases involve patient deaths occurring within five days of an IVIT procedure. In the past year, there was one recorded instance of a patient passing away within five days of an IVIT procedure while receiving adjunctive care<sup>3</sup> for terminal illnesses from a naturopath at the clinic. This death, however, was attributed to the patient's underlying illness, not the IVIT procedure. In the Type 1 occurrence report noted above, the Committee's review determined that no further action was required.

Type 1 Occurrence Report Data

Basis for Reporting	2023-24	2024-25
Death of a patient on-site at the clinic or within five days of the IVIT procedure.	1	1
Referral of a patient to emergency services within five days of the IVIT procedure.	15	12
Performing a procedure on the wrong patient.	0	0
Administration of an emergency drug immediately following the IVIT procedure.	3	4
Diagnosis of shock or convulsions of a patient within five days of the IVIT procedure.	0	0
Diagnosis of post-procedure infections in a patient within five days of the IVIT procedure.	0	0
Total Type 1 Reports Received	19	17

<sup>&</sup>lt;sup>3</sup> Adjunctive care is treatment that is in addition to other forms of care the patient is receiving, often from other regulated health professionals.

Type 2 occurrence data is submitted to both the Inspection Committee and the Council of the College. The Inspection Committee analyzes this information to detect trends that might necessitate additional guidance for premises and registrants performing IVIT. This data also supports the review and enhancement of standards governing premises, with the aim of further strengthening public safety.

Type 2 Occurrence Reports were received from the 168 premises performing IVIT procedures during this reporting period, of which 31 reported one or more Type 2 occurrences.

Type 2 Occurrence Reports Data

Basis for Reporting	2023-24	2024-25
Infections	0	0
Unscheduled treatments within five days of an IVIT procedure	4	22
Adverse drug reactions following IVIT procedures	150	170



#### **Standards Program**

The College is mandated under the RHPA to develop, establish and maintain standards of practice for naturopathic doctors, to assure the quality of the practice of the profession. These standards describe the expected level of performance for specific elements of practice, to which all NDs are required to adhere, to ensure quality and safety in the provision of these professional services to the public. The public should feel confident their ND is held to a high standard when they seek naturopathic care.

The Standards of Practice guide the professional knowledge, skills and judgement needed to practise naturopathy safely and set the minimum expectations that must be met by any ND in any setting. The College has established and maintains 28 standards of practice and 11 practice guidelines. These documents are consistently updated to incorporate current legislative and health care system requirements.

#### **Worth Noting**

In August 2024, the Standards Committee launched a consultation about proposed changes to 19 Standards of Practice. Consultation closed on November 1, 2024.

The Standards of Practice and related guidelines are overseen by the Standards Committee of the College. Established by the Council, the Standards Committee has a high degree of independence from the Council to review and update standards and develop new standards as needed.



#### Registrants of the College & Currency

Through the Registration Program, the College ensures its registrants maintain their certificate of registration in accordance with applicable sections of the College's bylaws, the Registration Regulation and registration policies. This includes administering the annual collection of information and fee (registration renewal) and auditing reported practice hours as part of ensuring ongoing currency of knowledge and skills.

#### Registration by class, last five years

	2020	2021	2022	2023	2024
General Class	1,531	1,550	1,613	1,667	1,699
Inactive Class	179	168	171	172	180
Life Registration	23	23	24	28	31
Total Registrants	1,733	1,741	1,808	1,867	1,910
Change (±)		8	67	59	43

In addition to new registrants each year, these numbers will also vary as some registrants will change class, resign or have their certificate revoked.

#### **Annual Renewals**

Each year, registrants of the College are required to renew their certificate of registration with the College. This requires that each registrant file an "information return" with the College providing important data and pay their annual fees to the College. Renewals are issued in mid-February with a deadline of March 31st for completion of the return and payment of fees. Registrants who do not complete their return and pay their annual fees will be levied a late fee and issued a Notice of Intent to Suspend their Certificate of Registration. Registrants who do not provide the information and pay their fees within 30 days of the date the notice is issued are suspended.

#### Renewal Data

	2023-24	2024-25
Renewed by deadline	98%	96%
Resignations	27	18
Late fees applied	57	40
Suspensions for non-renewal	8	10

#### Changes to Registrant Class & Status

Basis for Reporting	2023-24	2024-25
Class Change (From the General Class to the Inactive Class)	25	33
Class Change (from the Inactive Class to the General Class (under 2 years4)	8	5
Class Change (from the Inactive Class to General Class (over 2 years <sup>5</sup> )	1	1
Class Change (any class to Life Registrant status)	4	3
Resigned	27	18
Revoked	11	11
Suspended (excluding non-renewal <sup>6</sup> )	13	29
Reinstated (suspension lifted)	9	26

Registrants of the College will change between classes for various reasons. Most often, the change is between the General class and the Inactive class (e.g., to accommodate a maternity/parental leave). Suspensions will occur if a registrant does not renew their annual registration or fails to maintain the requirements associated with their certificate of registration, such as professional liability insurance or cardiopulmonary resuscitation certification.

<sup>&</sup>lt;sup>4</sup> In this type of change, the registrant would have been in the Inactive class for less than two years.

<sup>&</sup>lt;sup>5</sup> In this type of change, the registrant would have been in the Inactive class for two years or more, which results in added requirements to be met to affect the class change.

<sup>&</sup>lt;sup>6</sup> Revocation of a certificate of registration occurs two years after the certificate was administratively suspended if the reason for the suspension is not addressed.

#### Currency

Under the Registration Regulation, each registrant of the College is required to practice the profession a minimum of 750 hours over each three-year period. At the time of renewing their registration annually, registrants provide the data for the number of hours practiced in the preceding calendar year. This data is then combined with the two prior years and analyzed to determine whether the registrant has met the requisite number of hours practiced.

#### Currency Audit Data

Registration year of Currency Audit	2023-24	2024-25
3-year Audit Period	2020-2022	2021-2023
Number of Registrants	1,613	1,667
Number who met currency	1,594	1,622

The College engages any registrant who has not met the currency requirements set out in the regulation to discuss the currency requirements and set a course of action to ensure the registrant takes the necessary steps to remain current. Registrants can:

- Successfully complete a refresher program approved by the Registration Committee,
- Enter into an agreement with the College to not practise the profession, i.e., agrees to a "non-clinical" term, condition or limitation on their certificate,
- · Resign their certificate of registration with the College, or
- Undergo a Peer & Practice Assessment through the Quality Assurance Committee.

#### Currency Outcome Data

Outcome <sup>7</sup>	2023-24	2024-25
Refresher program	3	14
Non-clinical TCL	8	3
Resigned	0	2
Peer & Practice Assessment	4	16
Class Change (GC to IN)	4	10

<sup>&</sup>lt;sup>7</sup> Please note that as these processes take some time to be completed, the data being reported is delayed by one year.

#### **Professional Corporations**

Regulated health professionals, including naturopaths, can incorporate their practices under the *Business Corporations Act* to practice their profession only when authorized to do so by the health regulatory college. Registrants must apply for and receive a Certificate of Authorization from the College, which involves both an application and evaluation process, and these certificates must be renewed on an annual basis.

#### Professional Corporations Data

Outcome	2023-24	2024-25
Corporations authorized at start of year	112	126
New corporations approved	17	13
Corporations revoked	2	0
Corporations closed by registrant	1	2
Corporations authorized at the end of the year	126	137

### **Patient Relations Program**

Under the legislation governing the College, the mandated Patient Relations Program focuses on preventing and addressing patient sexual abuse. It achieves this by:

- · Setting educational standards for registrants,
- Establishing conduct guidelines for patient interactions,
- Training College staff, and
- Disseminating information to the public.

The program, overseen by the Patient Relations Committee, also includes funding for therapy and counselling to support patients who may have experienced sexual abuse by a naturopathic doctor.

To-date, the Committee has approved funding in the amount of \$47,146.40 for counselling and therapy for Ontario patients of NDs. Additionally, the Committee revised its policies to align with program objectives, developed boundary scenarios for professional communications, and initiated a review to potentially extend funding eligibility periods.

#### Funding for therapy provided by the College

	2023-24	2024-25
On-going approved funding	5	1
New applications received	0	0
New applications approved	0	0
Funding provided	\$5,080.80	\$5,090.80



Each approved application is eligible for funding of up to \$17,300 for counselling. Actual amounts paid are based on the needs of the patient as determined by their counsellor.

#### Complaints, Reports & Fitness to Practice

#### Complaints and Reports

The College receives and investigates complaints and reports about the practice and conduct of naturopaths. The Inquiries, Complaints, and Reports Committee (ICRC) reviews all complaints, and at the CEO's request, may approve and conduct investigations if there are reasonable grounds to believe a naturopath has engaged in professional misconduct or is incompetent. Following an investigation, the ICRC may, among other things, decide to take no action, mandate educational or remedial activities, or refer the case to the Discipline Committee or the Fitness to Practise Committee for a hearing.

The ICRC's important role with the College ensures accountability and maintains high standards within the naturopathic profession. By thoroughly investigating complaints and reports, the College protects the public from potential harm caused by professional misconduct or incompetence. The ICRC plays a crucial role in safeguarding patient safety and trust in naturopathic care by addressing concerns and taking appropriate actions. This process not only promotes ethical and competent practice but also reinforces the College's commitment to upholding the integrity and reputation of the profession. In our commitment to transparency, our website includes anonymized summaries of outstanding investigations. We are the first health regulatory College in Ontario to publish such summaries.

In response to the complaints and reports reviewed, the ICRC may take any of the following decisions:

- Take no further action if evidence is insufficient,
- Issue a Letter of Counsel,
- Require completion of continuing education or a remediation program,
- Require the registrant to appear before the ICRC for a caution,
- Accept an undertaking to improve or restrict practice,
- Accept an undertaking to resign and never reapply for registration,
- Refer allegations of professional misconduct or incompetence to the Discipline Committee, or
- Refer the matter to another ICRC panel for incapacity proceedings if there's concern about the registrant's capacity.

All complaint decisions made by the ICRC, except a decision to refer a matter to the Discipline Committee, can be appealed to the HPARB.

#### Overall Complaints and Reports Data

	2023-24	2024-25
New complaints received	16	18
New Inquiries initiated	5	11
Matters closed by ICRC	23	21

#### Origins of CEO Inquires

CEO Inquiries are initiated upon approval of the ICRC and are requested based on information received by the College but that are not included in a formal complaint filed with the College.

	2023-24	2024-25
Public inquiries	1	6
Matters reported by registrants	0	0
Matters reported by other programs	3	2
Referral from ICRC to CEO	0	1
Referral from the QA Committee	1	2
Referral from another regulator	0	0

## Topics of Complaints and CEO Investigations

Торіс	2023-24	2024-25
Advertising	5	11
Billing and Fees	5	5
Communication	0	3
Competence/Patient Care	8	12
Fraud	1	0
Professional Conduct & Behaviour	3	6
Record keeping	1	1
Sexual abuse, harassment, boundaries	2	1
Delegation	0	1
Unauthorized Practice/Outside their scope	1	9
Failure to cooperate or comply with an order of Discipline Committee/ICRC	1	0
Inappropriate/ineffective treatment	0	2
Conflict of Interest	0	2
Lab Testing	1	2
QA Program compliance	1	2
C&D compliance	0	0
Failure to cooperate	0	0
Practising while Inactive/Suspended	1	0
Unprofessional, unbecoming conduct	4	0
Breach of Privacy	0	3

#### Decisions of the Inquiries, Complaints & Reports Committee

Decision	2023-24	2024-25
Take no further action	3	3
Letter of counsel	6	4
Oral caution	2	4
SCERP	2	4
Oral caution & SCERP	9	2
Letter of counsel & SCERP	0	3
Acknowledgement and Undertaking	0	3
Referral to FTPC	0	0
Referral to DC	0	0
Frivolous & vexatious	0	0
Resolved through ADR	0	1
Withdrawn by complainant	1	0
Total decisions	23	24

Certain decisions of the ICRC are mutually exclusive of others, for example, to take no further action, accept a withdrawal request, determining a matter is frivolous or vexatious, or a referral to the Discipline or Fitness to Practice Committees. Other outcomes may be done alone or in combination, these include a letter of counsel, an oral caution, a SCERP and an Acknowledgement & Undertaking.



#### **Investigation Timelines**

Under legislation governing the College, complaints must be resolved within 150 days. If this timeframe cannot be met, the complainant, the registrant, and HPARB are notified every 30 days.

	2023-24	2024-25
Average length of time	237	230
Shortest duration	105	89
Longest duration	508	408

#### Costs for Matters Resolved by ICRC

The cost of an investigation includes the College's legal expenses, fees for formal investigators and experts (where required), ICRC per diems, and mailing costs.

	2023-24	2024-25
Average cost	\$6,463	\$4,266
Highest expenses incurred	\$15,587	\$14,134
Least expenses incurred	\$300	\$300

#### Fitness to Practice

When the College receives information suggesting that a naturopath may be incapacitated, the CEO investigates and reports to a Health Inquiry Panel of the ICRC. The Panel may conduct inquiries, including independent medical examinations, and may refer the matter to the Fitness to Practise Committee if appropriate. The ICRC may also refer formal complaints to a separate Health Inquiry Panel.

Incapacity, as defined in the *Regulated Health Professions Act, 1991*, refers to a physical or mental condition or disorder that warrants imposing terms, conditions, or limitations on a registrant's practice or revoking their ability to practise in the public's interest.

As of March 31, 2025, the ICRC had no active inquiries into the potential incapacitation of registrants. In addition, no referrals to the Fitness to Practise Committee were made during the reporting period.

#### **Hearings**

Hearings of the College of Naturopaths of Ontario may be held under the auspices of one of two independent Committees, the Discipline Committee and the Fitness to Practice Committee.

The Discipline Committee holds hearings to determine whether a registrant of the College has committed an act of professional misconduct or was incompetent. The Fitness to Practice Committee holds hearings to determine whether a registrant of the College is incapacitated, that is, suffers from physical or mental condition or disorder that would make it desirable in the public interest that the registrant should no longer practice or should practice under certain terms, conditions and limitations placed on them by the panel of the Committee.

#### Hearings Conducted by the College

	2023-24	2024-25	
Fitness to Practice Hearings	S		
Referred in prior years	0	0	
Referred in current year	0	0	
Matters Heard	0	0	
Hearings Completed	0	0	
Discipline Hearings			
Referred in prior years	3	2	
Referred in current year	0	0	
Matters Heard	3	2	
Hearings Completed	1	0	

#### **Worth Noting**

In 2024-25, two matters that had been referred to the Discipline Committee in 2023-24 and which are contested continued, however, they were not completed.

Both matters have since been completed in 2025-26.

#### Outcomes of Panels of the Discipline Committee

	2023-24	2024-25
Discipline matters heard	2	2
Number of hearing days convened	12	11
Discipline matters completed	0	0
Referrals from the ICRC	0	0



**Hearing Summaries for Concluded Matters** 

In 2024-25, no matters were concluded by panels of the Discipline Committee and no matters heard by the Fitness to Practice Committee. As a result, there are no summaries of outcomes in the current report.

#### **Unauthorized Practice**

The College monitors and addresses cases where individuals advertise themselves as naturopaths or naturopathic doctors or offer naturopathic services without being registered with the College. These individuals, termed "unregulated" or "unauthorized" practitioners, are practising illegally. The College responds by issuing cease and desist letters, a letter outlining the concerns and asking the individual to stop practising and to sign the letter back committing that they have done so. The College may also pursue legal action through the courts seeking an injunction from the court to stop the individual from holding themselves out as an ND. Additionally, the names of unauthorized practitioners are published in the Unauthorized Practitioner Register to inform the public and safeguard against illegal practice.

Cease & Desist Letters

	2023-24	2024-25
Letters sent	6	16
Sign back received	5	4

#### Court Injunctions

	2023-24	2024-25
Injunction sought	1	0
Court issued injunctions	0	1

#### **Quality Assurance Program**

The College's Quality Assurance (QA) Program, overseen by the Quality Assurance Committee (QAC), ensures that naturopaths stay current to provide quality care for Ontarians. The program also supports naturopaths in improving their practice through remedial activities when needed. All General Class naturopaths must participate in the program, demonstrating a commitment to ongoing learning and improvement.

#### Quality Assurance (QA) Program Components

1. Self-Assessment: This component helps naturopaths reflect on their skills in relation to the core competencies and standards of practice. Each year, all registrants of the College are required to complete one or more self-assessments which are reported as part of the annual renewal process.

#### Self-assessment Data

	2023-24	2024-25
Registrants required to report	1,644	1,672
Number of completed reports	1,474	1,548
Completed reports as percent	89.7%	92.6%

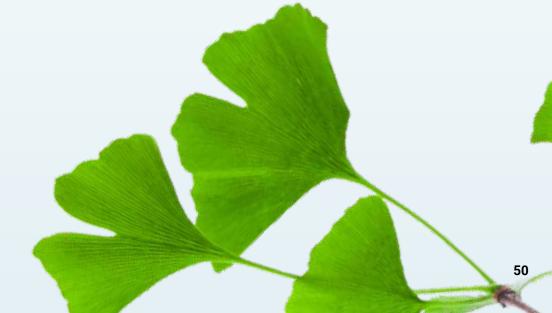
2. Continuing Competency and Professional Development: General Class naturopaths must participate in 70 hours of Continuing Education (CE) every three years, through a mix of Category A (i.e., structured learning activities that address the core clinical competencies approved by the College) and Category B courses (i.e., self-directed learning activities of any type and in any area the registrant chooses). Those providing IVIT must complete an additional six credits of clinical learning. Registrants can also undertake additional credits to further their professional development.

Each year, approximately one-third of the registrants of the College in the General Class are required to provide their CE-long for the past three years to the College. The year they report is based on the year in which their certificate of registration was issued.

#### CE Data

	2023-24	2024-25
Registrants in reporting group	469	530
Reports received by deadline	455	519
Reports as a percent	97%	98%

3. Peer and Practice Assessment: Each year, a group of General Class registrants is randomly selected for an objective review of their knowledge and performance by trained assessors, who are also practicing naturopaths. Peer and practice assessments may also be conducted based on recommendations from the QAC, particularly for registrants who have not met Continuing Education (CE) requirements or registrants who have not met the currency requirements set out in the Registration Regulation.



Peer & Practice Assessments Required

	2023-24	2024-25
Pool of Registrants randomly selected	100	150
Assessments deferred/removed	-13	-13
QAC Ordered Assessments	3	15
Assessment required	90	152
Peer & Practise Assessments Completed	90	150

Peer & Practice Assessors evaluate registrants on a set of criteria. That assessment results in a determination of whether the registrant has demonstrated the knowledge, skill & judgment to meet the standards. Those who do not, must undergo a review by the QAC.

Peer & Practice Assessment Outcomes

	2023-24	2024-25
Demonstrated the knowledge, skill and judgment to meet the standards.	78	140
Fell below the standards in at least one component of the assessment and were referred to the QAC.	12	10

The QAC reviews Peer & Practice Assessments where deficiencies have been identified by the assessor, along with submissions from the registrant. The QAC will then make a determination of whether the registrant has the knowledge, skill and judgement or requires a term, condition or limitation (TCL).

#### **QAC Review Outcomes**

	2023-24	2024-25
Knowledge, skill and judgement deemed satisfactory	10	10
TCL imposed by QAC	2	1

#### Continuing Education Course Reviews

The Quality Assurance Committee also assumes responsibility for reviewing and approving courses submitted by individuals or organizations who wish to have their course recognized by the Continuing Education Program for category A credits.

Category A credits are awarded to courses related to the core activities of naturopathy. These are structured activities focused on the clinical competencies of the profession. They should be relevant to the practice of naturopathy and enhance your competence and understanding of professional standards. For Category A, one hour of Continuing Education equals one credit. The 30 credits in this category include specific requirements.

#### Continuing Education Credit Applications

	2023-24	2024-25
Applications received	381	328
Approved for Category A	306	247
Approved as a percentage	80%	73%

#### Breakdown of CE Accredited Courses by Category

	2023-24		2024-25	
	Number	%	Number	%
General Category A	186	61	168	68
Category A – Prescribing/Pharmacology	89	29	62	25
IVIT	14	4	10	4
Jurisprudence	17	6	7	2

#### Breakdown of CE Accredited Courses by Category

	2023-24		2024-25	
	Number	%	Number	%
Webinar	101	35	32	13
In-person/Live	199	65	215	87

### Review of Regulations, By-laws and Standards

As noted earlier in this report, the College Council set as its second strategic objective a goal that "Naturopathic Doctors are trusted because they are effectively regulated." One of the four strategic priorities requires that "the College examines the regulatory model to maximize the public protection benefit to Ontarians."

Examining the regulatory model to maximize public protection benefit is not a small endeavour. It essentially requires the College to examine two distinct areas, areas where regulations, standards and policies exist to ensure that they are accomplishing what is intended and areas where no regulation exists but the authority to create regulation has been given to the College Council in statute.

In support of this strategic priority, the College initiated several consultations, one of which was a formal consultation and two of which were preliminary consultations intended to engage the profession and system partners in a fact-finding process.

#### Standards of Practice

In last year's annual report, it was noted that the Standards Committee had reviewed 19 Standards of Practice to ensure that they reflect naturopathic practice and that these would be the subject of consultation. This consultation was completed this year and extensive feedback was provided. This feedback will be reviewed by the Committee and updates to the standards issued in the next year.

Prospective Naturopathic Therapies Regulation – Preliminary Consultation

In November 2024, the College launched a preliminary consultation on a potential Naturopathic Therapies Regulation. No such regulation currently exists, although the authority to create such a regulation is included in the regulation making authority provisions of the *Naturopathy Act*, 2007.

In support of this consultation, a draft of a potential regulation was provided, along with information about the various therapies as they are known. The College received excellent feedback from system partners. The feedback is being analyzed and will be provided to the Council. Recommendations on whether to move in this area will be brought before the Council as part of an overall report on this strategic priority.

Classes of Registration – Preliminary Consultation

In March 2025, the College launched another fact-finding consultation relating to the classes of registration. This explored the sufficiency of the current 3-class system established in the Registration Regulation along with options for additional classes or various alternate approaches to classes.

Once again, tremendous feedback was provided in response to this consultation. The feedback is being analyzed and will be provided to the Council. Recommendations on whether to move in this area will be brought before the Council as part of an overall report on this strategic priority.

#### What Lies Ahead?

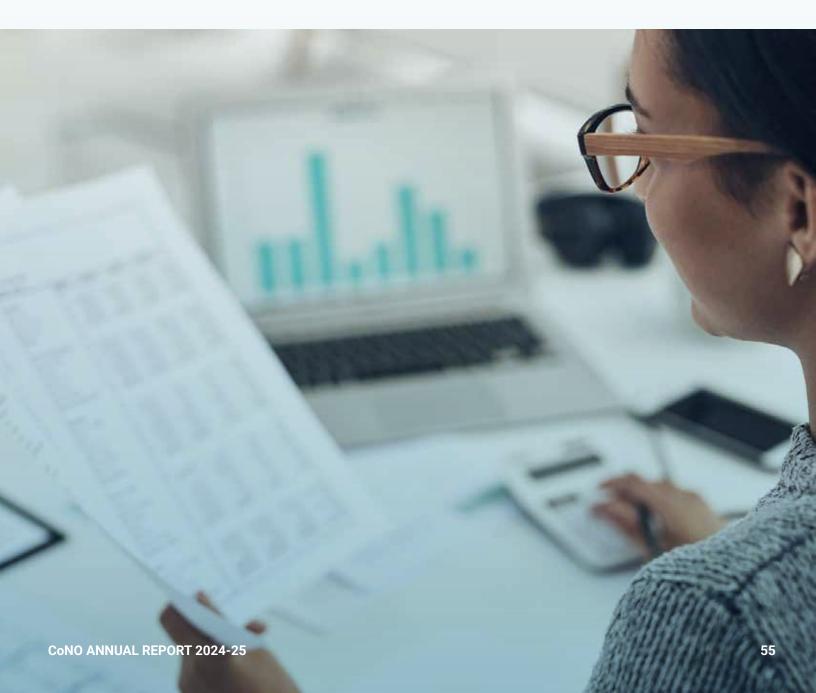
Additional consultations are being developed in this area. These include considering specializations, whether testimonials should be permitted, considering other issues in the Registration, General and Professional Misconduct Regulations.



# **Profile of the Profession**

In the winter of 2024, the College initiated its annual renewal process for registrants of the College. That year, for the first time, the College collected data about registrants' practices to be able to gauge the breadth and depth of the profession. The data reported was for the calendar year January 1, 2023 to December 31, 2023.

In 2025 as part of the annual renewal process, the College once again collected the same data for the period January 1, 2024, to December 31, 2024. This is the second time the data has been collected from practising NDs which allows the College and the reader to begin to identify changes in the practise of the profession and changes in the breadth of practice.



#### **Controlled Acts**

Controlled acts are high risk procedures that are restricted to regulated health professions that are authorized in their legislation to perform them. In the case of Naturopathic Doctors, section 4 of the *Naturopathy Act, 2007*, authorizes NDs to perform certain controlled acts. Of the registrants in the General Class, 1,442 reported performing at least one controlled act in 2024; however, we asked registrants to indicate which they perform as part of their practice.

#### Controlled Acts Data

	2023		2024	
	Number	As a %	Number	As a %
Naturopathic Manipulation	236	15	233	15
Acupuncture	1,286	81	1,312	87
Internal Examinations	232	15	220	15
Administer a substance by Inhalation	208	13	202	13
Administer a substance by injection	581	37	561	37
Administer a substance by intravenous infusion	256	16	256	17
Prescribing a designated drug	696	44	760	50
Dispensing a designated drug	177	11	236	16
Compounding a designated drug or substance	246	16	276	18
Selling a designated drug	168	11	237	16
Taking blood samples in office	80	5	95	6

For a registrant to administer drugs by inhalation or injection (including intravenous infusion therapy) or to prescribe, dispense, compound or sell a drug, registrants must first have met the Standard of Practice for Therapeutic Prescribing. At the end of the 2024 calendar year, 881 (52%) registrants in the General class had met the Standard.

#### **Patient Base**

The College asked registrants to report two numbers relating to their patient base, the overall number of patients in their practice(s) and the number of patient visits they had in 2024. Overall, the profession was estimated to have 535,716 Ontarians as patients in their practices, an average of 325 per registrant. In 2024, there were 1,215,821 patient visits, an average of 722 patient visits per registrant in that year.

#### Patient Base Data

	2023	2024
Number of Patients in an ND's practice	972,178	535,716
Average patients per ND	604	325
Number of Patient Visits	1,129,582	1,215,821
Average patient visits per ND	702	722



#### **Practice Type**

While many NDs may practise at more than a single location, each are required to designate one location as their primary practice location, usually the location where they provide services the most often. We asked registrants to identify the type of practice location for their primary practice.

#### Practice Type Data

	2023-24		2024-25	
	Number	2023	Number	2024
Independent practice (brick and mortar clinic)	461	14	453	27
Independent practice (Telepractice)	250	15	176	11
Clinic practice with other NDs	250	15	419	25
Multi-disciplinary clinic	663	40	586	36
Non-clinical practice (did not see patients)	38	2	38	2

Like all health professions, there will be variability in the data year over year. The collection of the data will allow the College to identify trends of changes the profession may be encountering and whether those changes represent a risk of harm to patients.

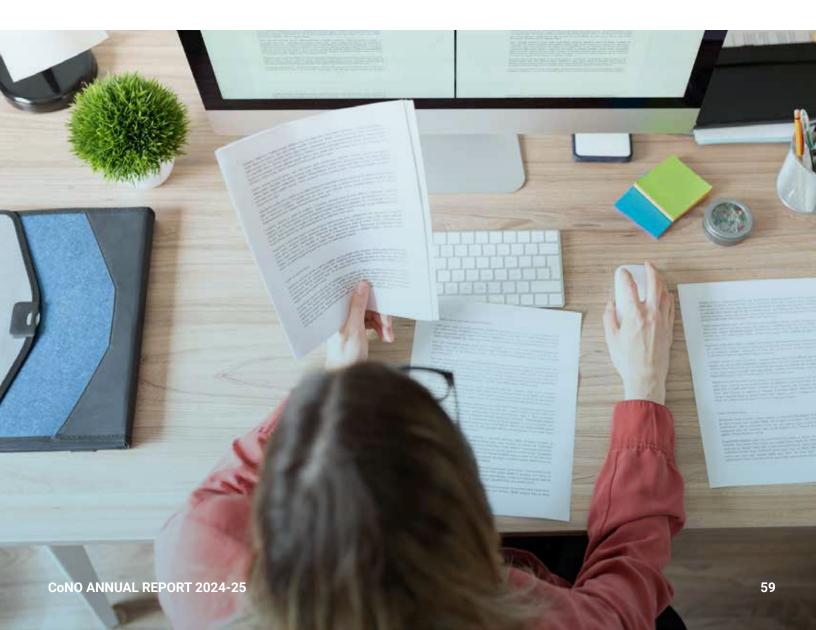


# Volunteers and the College

Our volunteers come from several sectors, most of whom are Naturopathic Doctors from both the General and Inactive classes of registration. Our public representatives and Public members appointed by government generally come from the finance, marketing, and non-profit sectors.

Without our volunteers, the College could not perform all its required regulatory roles. To maintain the integrity of our regulatory processes and protect volunteer privacy, we do not identify individual volunteers by name, except those elected or appointed to the Council. Despite not naming them individually, their support is crucial for the College's operations.

On behalf of the Council and staff, we extend our deepest gratitude to all our volunteers for their dedicated work in reviewing materials, attending meetings, conducting assessments, and providing valuable feedback.



# **Financial Statements**

The College is including an abridged version of the Audited Financial Statements for the period April 1, 2024, to March 31, 2025, in this report to provide the reader with the overall outcomes for the fiscal year.

#### **Opinion**

We have audited the financial statements of The College of Naturopaths of Ontario, which comprise the statement of financial position as at March 31, 2025, and the statements of changes in net assets, operations, and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies. In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of The College of Naturopaths of Ontario as at March 31, 2025, and the results of its operations and its cash flows for the year then ended, in accordance with Canadian accounting standards for not-for-profit organizations.

#### **Basis for Opinion**

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of The College of Naturopaths of Ontario in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

# Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, management is responsible for assessing the College's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the College or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the College's financial reporting process.

#### **Auditor's Responsibilities for the Audit of the Financial Statements**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements. As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the College's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the College's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the College to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.



We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

KRIENS~LAROSE, LLP Chartered Professional Accountants Licensed Public Accountants Toronto, Ontario July 30, 2025

# Summary Statement of Financial Position As at March 31, 2025

ASSETS			
Current	2025 (\$)	2024 (\$)	
Cash and cash equivalent	4,142,634	4,062,890	
Accounts receivable	1,607,174	1,563,694	
Prepaid expenses	148,037	132,826	
Total Current	5,897,845	5,759,410	
Equipment	44,354	48,090	
TOTAL ASSETS	5,942,199	5,807,500	

LIABILITIES				
Current	2025 (\$)	2024 (\$)		
Accounts payable and accrued liabilities	272,304	334,409		
Deferred revenue	3,312,844	3,147,915		
HST payable	371,676	336,564		
TOTAL LIABILITIES	3,956,824	3,818,888		

# Summary Statement of Financial Position As at March 31, 2025

NET ASSETS			
	2025 (\$)	2024 (\$)	
Unrestricted net assets	(82,256)	(254,457)	
Patient Relations	90,385	90,385	
Business Continuity	1,114,684	1,093,584	
Investigations and Hearings	810,452	1,009,100	
Succession Planning	52,110	50,000	
TOTAL NET ASSETS	1,985,375	1,988,612	

TOTAL ASSETS & LIABILITIES			
2025 (\$) 2024 (\$)			
TOTAL	5,942,199	5,807,500	

## Statement of Changes in Net Assets For the Year Ended March 31, 2025

	2025 (\$)	2024 (\$)
Balance, beginning of the year	1,988,612	1,896,352
Balance, end of year	1,985,375	1,988,612

## Summary Statement of Operations For the Year Ended March 31, 2025

REVENUES	2025 (\$)	2024 (\$)
Registration and member renewal fees	3,377,642	3,134,941
Examination fees	288,120	306,625
Inspection and hearing fees	66,200	135,583
Investment income	98,066	117,118
Incorporation fees	43,339	35,839
Misc income	45	26,070
TOTAL REVENUES	3,873,412	3,756,176
TOTAL EXPENSES	3,876,649	3,663,916
EXCESS (DEFICIENCY) OF REVENUES OVER EXPENSES FOR THE YEAR	(3,237)	92,260

EXPENSES	2025 (\$)	2024 (\$)
Salaries and Benefits	2,353,444	2,186,626
Rent and utilities	171,493	173,857
Exam fees and expenses	230,052	232,046
Consulting Fees		
Consultants – complaints and inquiries	86,912	64,766
Consultants – general	35,259	40,167
Consultants – Assessors/inspectors	60,656	42,928
Legal Fees		
Legal fees – discipline	287,875	267,579
Legal fees – complaints	50,155	51,299
Legal fees – general	40,435	20,231

EXPENSES (Continued)	2025 (\$)	2024 (\$)
Council fees and expenses	67,118	137,270
Office and general	181,791	91,701
Public education	59,863	84,721
License	78,914	58,741
Equipment maintenance	47,252	50,530
Translation	21,938	37,751
Insurance	32,924	33,448
Audit fees	17,996	17,621
Travel accommodation and meals	12,132	17,495
Education and training	2,934	16,050
Discipline and FTP committee	9,016	13,759
Amortization	13,961	11,759
Patient relations fund expenses allocation	5,040	4,810
Website	7,269	3,891
Printing and postage	1,434	3,608
Patient relations Committee	786	1,262
TOTAL EXPENSES	3,876,649	3,663,916





## College of Naturopaths of Ontario

The College is not a school or educational facility.

It exists to protect the public and patients' rights to safe,
competent and ethical naturopathic care.

10 King Street East, Suite 1001 Toronto, Ontario M5C 1C3 Tel (416) 583-6010 | Tel Toll Free 1-877-361-1925 | Fax 416-583-6011

general@collegeofnaturopaths.on.ca | collegeofnaturopaths.on.ca