Council of the College of Naturopaths of Ontario

Meeting #33

Draft Agenda

Date: January 25, 2023(2022/23-05)

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

Location: Zoom Video Conference¹

¹ Pre-registration is required.

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

COLLEGE

College is body corporate

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

Corporations Act

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

Duty of College

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

Objects of College

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

Duty

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



COUNCIL MEETING #33 January 25, 2023 9:15 a.m. to 12:15 p.m. DRAFT AGENDA

Sec	ct/No.	Action		Item	Page	Responsible
0	Pre-Meeting Networking (8:45 am to 9:15 am)					
		Networking		mal networking for Council members (8:45-9:15am)		All
1	Call to Order and Welcome					
	1.01	Procedure				J.Sokoloski
	1.02 Discussion Meeting Norms			4-6	J.Sokoloski	
	1.03	Discussion	"Hig	h Five" – Process for identifying consensus	7	J.Sokoloski
2		nt Agenda¹				
	2.01	Approval	i.	Draft Minutes of November 30, 2022	8-15	
			ii.	Committee Reports	16-32	J.Sokoloski
			iii.	Information Items	33-58	
			iv.	Ratification of Executive Committee Decisions	59	
3		genda (9:20 a				
	3.01	Approval	Rev	iew of Main Agenda	3	J.Sokoloski
	3.02	Discussion	Dec	arations of Conflict of Interest	60-61	J.Sokoloski
4	Monito	ring Reports				
	4.01	Acceptance		ort of the Council Chair	62	J.Sokoloski
	4.02	Acceptance		ort on Regulatory Operations	63-67	A. Parr
5 Council Governance Policy Confirmation						
	5.01 Discussion		Rev	iew/Issues Arising		
			i.	Ends Policies		
			ii.	Council-CEO Linkage Policies		J.Sokoloski
			iii.	Executive Limitations		
	5.02	Decision	Deta	ailed Review Governance Process (Part 1) Policies	68-78	
6	170 garar Daoineoc					
	6.01	Approval		ergency Class – Registration Regulation Amendments	79-100	A.Parr
	6.02	Approval		tegic Plan 2023-2027	101-154	J.Sokoloski
	6.03	Approval		s Statement	155	J.Sokoloski
	6.04			156	A Parr	
	6.05	Approval	Des	ignation of Head office location	157-158	A. Parr
7		I Education	1			
	7.01	Information	Prog	gram Briefing – Registration Program	159-164	E. Laugalys
8		Business	T		1	
	8.01	TBD				J.Sokoloski
9		tion and Next				
	9.01	Discussion		ting Evaluation	On-line	J.Sokoloski
	9.02	Discussion	Nex	t Meeting – March 29, 2023		J.Sokoloski
10	Adjour					
	10.01	Decision	Moti	on to Adjourn		J.Sokoloski

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



Zoom Meeting Council of the College of Naturopaths of Ontario

Meeting Norms

General Norms

- 1. We'll listen actively to all ideas
- 2. Everyone's opinions count
- 3. No interrupting while someone is talking
- 4. We will be open, yet honor privacy
- 5. We'll respect differences
- 6. We'll be supportive rather than judgmental
- 7. We'll give helpful feedback directly and openly
- 8. All team members will offer their ideas and resources
- 9. Each member will take responsibility for the work of the team
- 10. We'll respect team meeting times by starting on time, returning from breaks promptly and, avoid unnecessary interruptions
- 11. We'll stay focused on our goals and avoid getting sidetracked

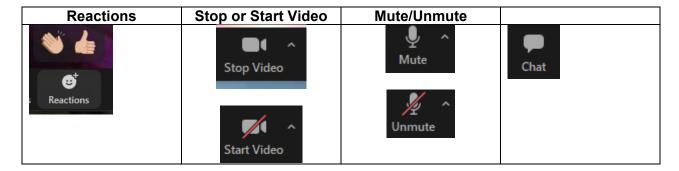
Additional Norms for Virtual Meetings

- 1. No putting the call on hold or using speakerphones
- 2. Minimize background noise place yourself on mute until you are called upon to speak and after you have finished speaking
- 3. All technology, including telephones, mobile phones, tablets and laptops, are on mute or sounds are off
- 4. If we must take an emergency telephone call, we will ensure that we are on mute and we will stop streaming our video

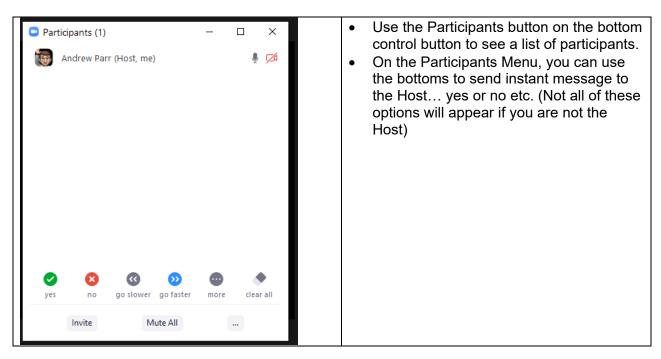
150 John St., 10th Floor, Toronto, ON M5V 3E3 T 416.583.6010 F 416.583.6011 collegeofnaturopaths.on.ca

- 5. Stay present webcams will remain on (unless we are on a call or there is another distraction on your end)
- 6. Stay focused avoid multi-tasking during the meeting
- 7. Use reactions (thumbs up, applause) to celebrate accomplishments and people
- 8. Use the Chat feature to send a message to the meeting host or the entire group.

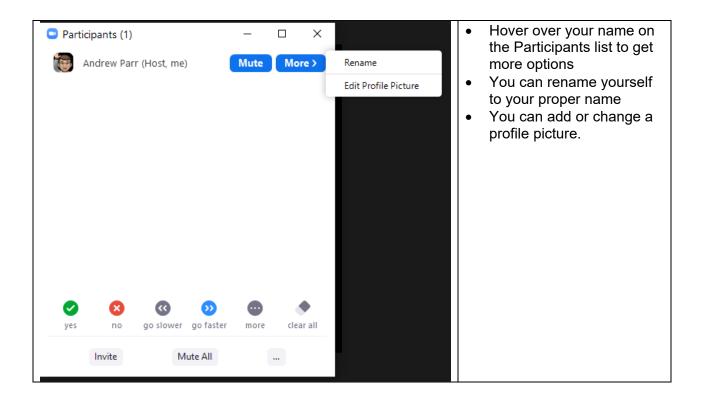
Zoom Control Bar - Bottom of screen



Other Helpful Tips



Council Meeting January 25, 2023 Page 5 of 164





Zoom Meeting Council of the College of Naturopaths of Ontario

Using "High Five" to Seek Consensus



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

When asked you would show:

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

Image provided courtesy of Facilitations First

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



Council Meeting November 30, 2022

Video Conference DRAFT MINUTES

Council			
Present	Regrets		
Dr. Jonathan Beatty, ND (2:4)	Ms. Asifa Baig (1:4)		
Dr. Shelley Burns, ND (4:4)			
Mr. Dean Catherwood (4:4)			
Mr. Brook Dyson (4:4)			
Ms. Lisa Fenton (4:4)			
Dr. Anna Graczyk, ND (3:4)			
Ms. Sarah Griffiths-Savolaine (4:4)			
Ms. Tiffany Lloyd (3:4)			
Dr. Denis Marier, ND (4:4)			
Mr. Paul Philion (4:4)			
Dr. Jacob Scheer, ND (4:4)			
Dr. Jordan Sokoloski, ND (4:4)			
Dr. George Tardik, ND (3:4)			
Staff Support			
Mr. Andrew Parr, CAE, CEO			
Ms. Agnes Kupny, Director of Operations			
Ms. Erica Laugalys, Director, Registration & Examination	ons		
Dr. Mary-Ellen McKenna, ND (Inactive), Manager Profe	ssional Practice		
Mr. Jeremy Quesnelle, Deputy CEO			
Mr. Joseph Quao, Administrative Assistant, Regulatory Programs			

Guests	
Ms. Rebecca Durcan, Legal Counsel	
Dr. Danielle O'Connor, ND, Chair, Registration Committee	

1. Call to Order and Welcome

The Chair, Dr. Jordan Sokoloski, ND, called the meeting to order at 9:21 a.m. He welcomed everyone to the meeting.

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

2. Consent Agenda

2.01 Review of Consent Agenda

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

MOTION:	To approve the Consent Agenda as presented.	
MOVED:	Paul Philion	
SECOND:	Tiffany Lloyd	
CARRIED.		

3. Main Agenda

3.01 Review of the Main Agenda

A draft of the Main Agenda, along with the documentation in support of the meeting had been circulated in advance of the meeting. The Chair asked if there were any items to be added to the agenda. There were none.

MOTION:	To approve the Main Agenda as presented.	
MOVED:	Tiffany Lloyd	
SECOND:	Denis Marier	
CARRIED.		

3.02 Declarations of Conflicts of Interest

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

4. Monitoring Reports

4.01 Report of the Council Chair

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

MOTION:	To accept the Report of the Council Chair as presented.		
MOVED:	Shelley Burns		
SECOND:	Paul Philion		
CARRIED.			

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

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

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

4.03 Operating Report – Mid-year Report

The Operating Report – Mid-year from the CEO was distributed in advance of the meeting. Mr. Parr provided highlights of the report and responded to questions that arose during the discussion that followed.

MOTION:	To accept the Operating Report – Mid-year from the CEO.		
MOVED:	George Tardik		
SECOND:	Denis Marier		
CARRIED.			

4.04 Variance Report and Unaudited Financial Statements for Q2

A Variance Report and the Unaudited Financial statements ending September 30, 2022 (Q2) were included in the materials circulated in advance of the meeting. Ms. Agnes Kupny, Director of Operations, provided a review of the Variance Report and the Unaudited Statements and highlighted the changes in the report from the previous quarter. She responded to questions that arose during the discussion that followed.

MOTION:	To accept the Variance Report and Unaudited Financial statements for the first quarter as presented.
MOVED:	Dean Catherwood
SECOND:	Denis Marier
CARRIED.	

5. Council Governance Policy Confirmation

5.01 Review/Issues Arising

5.01(i) Executive Limitations Policies

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

5.01(ii) Governance Process Policies

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

5.02 Detailed Review (as per GP08) - Council-CEO Linkage and Ends Policies

Council members were asked if there were any members who wished to discuss the Council-CEO Linkage and Ends Policies. The Chair provided a detailed overview of the amendments being presented on behalf of the Governance Policy Review Committee as outlined in the Memorandum included within the Council's package and responded to any questions that arose during the discussion.

MOTION:	To accept the recommendations of the Governance Policy Review Committee.
MOVED:	Paul Philion
SECOND:	Jacob Scheer
CARRIED.	

5.03(i) Proposed New Governance Policy - GP33 – Equity, Diversity, Inclusion and Belonging

The Chair provided a detailed overview of the proposed new Governance Policy being presented on behalf of the Governance Policy Review Committee as outlined in the Memorandum included within the Council's package and responded to any questions that arose during the discussion.

MOTION:	To approve the proposed new policy GP33 – Equity, Diversity, Inclusion and Belonging as recommended from the Governance Policy Review Committee as presented.
MOVED:	Tiffany Lloyd

SECOND:	George Tardik
CARRIED.	

5.03(ii) Proposed Amendments to EL10 – Workplace Harassment

The Chair provided a detailed overview of the proposed amendments to the Workplace Harassment Policy being presented as outlined in the Memorandum included within the Council's package and responded to any questions that arose during the discussion.

MOTION:	To approve the proposed amendments to policy EL10 – Workplace Harassment as recommended from the Governance Policy Review Committee as presented.	
MOVED:	Paul Philion	
SECOND:	Lisa Fenton	
CARRIED.		

6. Business

6.01 EDIB Statement for Council

A Briefing Note and corresponding documentation highlighting the proposed Equity, Diversity, Inclusion and Belonging (EDIB) statement for Council to consider and accept was circulated in advance of the meeting. Dr. Shelley Burns, ND, Co-Chair, Equity, Diversity and Inclusion Committee, provided a detailed overview of the amendments and responded to any questions that arose during the discussion.

MOTION:	To accept the proposed Equity, Diversity, Inclusion and Belonging (EDIB) statement as presented.	
MOVED:	Dean Catherwood	
SECOND:	Tiffany Lloyd	
CARRIED.		

6.02 Ministry of Heath Decision - General Regulation Changes

A Briefing Note and corresponding documentation highlighting the changes in general regulation made by the Ministry of Heath for Council to consider and decide on how they wish to proceed was circulated in advance of the meeting. Dr. George Tardik, ND, Chair, Scheduled Substances Review Committee, provided a detailed overview of the amendments and responded to any questions that arose during the discussion.

MOTION:	To approve the amendments of the tables in the general regulation that the Ministry of Health is prepared to move forward with.	
MOVED:	Shelley Burns	
SECOND:	Jonathan Beatty	

CARRIED.	
OAIGILD.	
1	

6.03 Briefing on Lease Agreement

Mr. Parr provided the Council with a detailed update the College's finalized lease agreement for the new office location at 10 King Street East. He responded to questions and concerns that arose during the discussion.

6.04 Appointment of CEO Review Panel

Ms. Kupny advised the Council members that according to GP 19.03 – CEO Performance Review, each year the Council at its November meeting, will need to appoint the members to the CEO Performance Review Panel (the Review Panel) with a minimum of three members and up to a maximum of four members, that is comprised of the Council Chair and Council Vice-Chair and one or two Council members. Ms. Kupny shared with the Council that the Brook Dyson was on the Review Panel last year and expressed interest on participating on the Review Panel for the upcoming year.

MOTION:	To approve the appointment of Dr. Jordan Sokoloski, ND, Council Chair, Sarah Griffiths-Savolaine, Council Vice-Chair, Brook Dyson and Dean Catherwood to the CEO Review Panel.	
MOVED:	Tiffany Lloyd	
SECOND:	Jacob Scheer	
CARRIED.		

6.05 IVIT Program & Exam Policy – Proposed Amendments

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

MOTION:	To approve the proposed changes to the IVIT Program and Examinations Policy as presented.	
MOVED:	Paul Philion	
SECOND:	Denis Marier	
CARRIED.		

6.06 Prescribing and Therapeutics Program & Exam Policy – Proposed Amendments

A Briefing Note and corresponding documentation highlighting the proposed changes to the Prescribing and Therapeutics Program & Exam Policy were circulated in advance of the meeting. Dr. Danielle O'Connor, ND, Chair, Registration Committee, provided a detailed overview of the amendments and responded to any questions that arose during the discussion.

To approve the proposed changes to the Prescribing and Therapeutics Program &
Exam Policy as presented.

MOVED:	Shelley Burns
SECOND:	Paul Philion
CARRIED.	

7. Council Education

7.01 Program Briefing - Inspection Program

A Briefing Note highlighting the Inspection Program was circulated in advance of the meeting. Dr. Mary-Ellen McKenna, ND (Inactive), Manager of Professional Practice, provided a detailed overview of the program and the processes within the program that the College follows and responded to any questions that arose during the discussion.

The Chair thanked Dr. McKenna, ND (Inactive), for presenting the Program to Council.

8. Other Business

The Chair asked if there was any other business to be brought before the meeting ended. There was none.

9. Meeting Evaluation and Next Meeting

9.01 Evaluation

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

9.02 Next Meeting

The Chair noted for the Council that the next regularly scheduled meeting is set for January 25, 2023.

10. Adjournment

10.01 Motion to Adjourn

The Chair asked for a motion to adjourn the meeting. The meeting adjourned at 11:34 a.m.

MOTION:	To adjourn the meeting.	
MOVED:	George Tardik	
SECOND:	Sarah Griffiths-Savolaine	
CARRIED.		

Recorded by: Joseph Quao

Administrative Assistant, Regulatory Programs

November 30, 2022



Action Items List Council Meeting of November 30, 2022 Meeting No. 32

Item #	Item	Description	Status
32.01	Council-CEO Linkage and Ends Policies	Update the corresponding policies as presented and upload to Smartsheet and to the College's website.	Complete
32.02	New Governance Policy – GP33 EDIB	Upload to the newly accepted policy to the College's website.	Complete
32.03	EDIB Statement	Upload the newly accepted Equity, Diversity, Inclusion and Belonging statement to the College's website.	Complete
32.04	IVIT Program & Exam Policy	Update the Policy as presented and upload to the College's website.	Complete
32.05	Prescribing and Therapeutics Program & Exam Policy	Update the Policy as presented and upload to the College's website.	Complete

MEMORANDUM

DATE: January 25, 2023

TO: Members of Council

FROM: Andrew Parr, CAE

Chief Executive Officer

RE: Committee Reports

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

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

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

AUDIT COMMITTEE REPORT

November 1, 2022 – December 31, 2022

For the reporting period of November 1, 2022 to December 31, 2022 the Audit Committee was not required to undertake any activities and therefore did not convene.

Dr. Elena Rossi, ND Chair January 11, 2023



EXAM APPEALS COMMITTEE CHAIR REPORT

November 1 - December 31, 2022

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

The Exam Appeals Committee met on December 21, 2022 to review one appeal related to the Clinical Sciences Exam. After a deliberation, the Committee voted to reject the appeal, having determined that the candidate's rationale failed to demonstrate an irregularity having occurred. In its deliberations, the Committee strives to be fair, impartial, conscious of equity, diversity and inclusion principles, while also considering the College's mandate of public protection.

Thank you,

Rick Olazabal, ND (Inactive) Chair Exam Appeals Committee January 15, 2023



EXECUTIVE COMMITTEE REPORT January 2023

This serves as the Chair report of the Executive Committee for the period November 1, 2022 to December 31, 2022.

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

Respectfully submitted,

Dr. Jordan Sokoloski, ND Council Chair 16 January 2023

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT January 2023

Between November 1, 2022 and December 31, 2022, the Inquiries, Complaints and Reports Committee held two regular online meetings – November 3 and December 1.

November 3, 2022: 7 matters were reviewed, ICRC members drafted 2 reports for ongoing investigations, and approved 2 Decisions and Reasons. In addition, the ICRC reviewed and approved changes to the Program Policy.

December 1, 2022: 9 matters were reviewed. ICRC members approved 1 Decision and Reasons, and drafted 4 reports for ongoing investigations.

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

Dr. Erin Psota, ND Chair January 16th, 2022

GOVERNANCE COMMITTEE CHAIR REPORT

During the reporting period of November 1, 2022 – December 31, 2022, the Governance Committee met once (on December 7th).

Following a fulsome discussion at its last meeting, the Committee decided to end the Mentoring Education Program (MEP). This decision was based in part on dwindling registrations for and even fewer actual participants in the sessions offered to date.

I would like to take the opportunity to express my sincere thanks to the Committee members for the time, energy and effort they have put into developing and delivering these educational opportunities.

As of the writing of this report, the Committee is scheduled to meet again on February 1st.

Respectfully submitted,

Hanno Weinberger, Chair

PATIENT RELATIONS COMMITTEE CHAIR REPORT

November 1, 2022 – December 31, 2022

During the reporting period of November 1, 2022 – December 31, 2022, the Patient Relations Committee met on November 16, 2022. The Committee reviewed the current funding amounts accessed as a part of the patient funding program as well as considered preliminary options for possibly extending the funding amounts beyond the regulatory amounts.

The Committee's next scheduled meeting is February 2023.

Thank you,

Dr. Gudrun Welder, ND Chair January 2023

QUALITY ASSURANCE COMMITTEE REPORT January 2023

Meetings and Attendance

Since the date of our last report to Council in November, the Quality Assurance Committee has met on one occasion, via teleconference, on November 22nd. There were no concerns regarding quorum.

Activities Undertaken

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

Additionally, the Committee reviewed the submissions from two Registrants on how they had addressed deficiencies found in their Peer and Practice Assessments and determined their responses to be satisfactory.

The Committee also reviewed and approved the final draft of a new Self Assessment questionnaire on **Mandatory Reporting** to be added to the approved list for 2023/24. The Committee also discussed the Self Assessment requirements for the coming year and it was decided that Registrants would again be required to complete a **minimum of three Self Assessments**, **consisting of the one on Sexual Abuse and Boundaries and two others of the Registrant's choice**.

The Committee also considered and made a decision regarding further action to be taken in the matter of a registrant who had failed to meet the CE Reporting requirements.

Next Meeting Date

January 17, 2023

Respectfully submitted by,

Barry Sullivan, Chair, January 10, 2023.



REGISTRATION COMMITTEE REPORT (Jan 2023)

At the time of this report, the Registration Committee met on November 23, 2022.

Exam Remediation Review

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

Application For Registration

The Committee reviewed an application for registration, referred under section 5 of the Registration Regulation, related to the applicant's currency of knowledge and skill to practise the profession having exceeded the two-year window in Regulation for completion of entry-to-practise requirements.

Policy Review

The Committee reviewed and approved an additional draft amendment to the IVIT Program & Exam Policy concerning the validity window of IVIT exam results when a Registrant elects to complete the IVIT examination prior to meeting the Standard of Practice for Prescribing. The Committee also approved draft amendments to the accommodations section of the Examinations Policy, circulated by email to the Committee for review and approval in December 2022 to facilitate review by Executive in January 2023.

Danielle O'Connor, ND Chair Registration Committee January 16, 2023

SCHEDULED SUBSTANCES REVIEW COMMITTEE REPORT

November 1, 2022 – December 31, 2022

During the reporting period the SSRC did not meet as no meeting was scheduled.

The Committee is next scheduled to meet in January 2023 to continue its review of the gap analysis.

Respectfully submitted by Dr. George Tardik, ND Chair January 2023



DISCIPLINE COMMITTEE REPORT

January 2023

The Discipline Committee (DC) is independent of Council and has no legal obligation to submit bimonthly reports addressing matters of importance to the Committee. However, in the interest of transparency and to acknowledge Committee members' involvement in the discipline process, the Chair is pleased to provide this report to Council.

This report is for the period from 1 November 2022 to 31 December 2022 and provides a summary of the hearings held during that time as well as any new matters referred by the Inquiries, Complaints and Reports Committee (ICRC) of the College. Committee meetings and training are also reported.

Overview

As of 31 December 2022, there were four ongoing matters before the Committee and a panel was working on two Decision and Reasons for hearings held in November.

Discipline Hearings

CONO vs. Helen Cohen (DC22-03)

The following members of the Discipline Committee were appointed to a panel to hear the above-noted matters referred to the DC by the ICRC on 11 August 2022:

Dean Catherwood - Chair Samuel Laldin Tiffany Lloyd Vaishna Sathananthan, ND Jacob Scheer, ND

The Panel held an uncontested hearing on November 4, 2022 and imposed an order directing the Chief Executive Officer to revoke the Registrant's certificate, and requiring the Registrant to appear before the panel to be reprimanded and pay the College's costs.

The Decision and Reasons in this matter was issued on December 14, 2022.

CONO vs. Karim Dhanani (DC21-01 & DC 22-02)

The following members of the Discipline Committee were appointed to a panel to hear the above-noted matters referred to the DC by the ICRC on 4 November 2021 and 7 July 2022:

Lisa Fenton Paul Philion

The Panel held two uncontested electronic hearings on 8 November 2022 and imposed an order requiring the Registrant to appear before the panel to be reprimanded immediately following the hearing, pay a fine to the Minister of Finance, and pay the College's costs. Additionally, the Panel ordered that the Registrant's certificate of registration be suspended for a period of 14 months and imposed terms, conditions and limitations on the certificate.

The Panel is currently finalizing its Decisions and Reasons in these matters.

CONO vs. Richard Dodd (DC22-01)

The following members of the Discipline Committee were appointed to a panel to hear the above-noted matters referred to the DC by the ICRC on 24 March 2022:

Tara Gignac, ND – Chair Lisa Fenton Samuel Laldin Paul Philion Jacob Scheer, ND

The Panel completed two hearing days in this contested matter. Two additional dates are scheduled for February 2023.

New Referrals

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

Committee Meetings and Training

There were no Committee meetings held during the reporting period.

Respectfully submitted,

Dr. Jordan Sokoloski, ND, Chair 16 January 2023

INSPECTION COMMITTEE REPORT November - December 2022

Committee Update

Since the last update to Council, the Inspection Committee had one teleconference meeting on November 24th, 2022.

Inspection Outcomes

The Committee reviewed the Inspection Program Requirements Checklists used by the inspectors to record their observations during the inspections, and Inspector's Reports for 18 premises.

The outcomes were as follows:

- Part I
 - 3 passes with 24 recommendations
 - 5 passes with 5 conditions and 12 recommendations. There was one condition to restrict a premises from practicing until the condition was fulfilled.
- Part II
 - 0
- Existing 5 Year Inspections
 - 7 passes with 67 recommendations
 - 3 passes with 9 conditions and 60 recommendations. There was one location with 2 conditions restricting practice.
- Fail
 - 0

There was one deferral request granted.

Type 1 Occurrence Reports

 3 occurrences were received to report a referral of a patient to emergency services within 5 days of IVIT. Following a review by the Committee no further action was required.

Closing Remarks

On behalf of our IVIT committee and inspectors, I would like to thank our staff Liaisons

for all of their help to keep us on track and organized. We are looking forward to a safe start to the new year!

Best regards,

Dr. Sean Armstrong, ND Chair, Inspection Committee January 2023

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

Meetings and Attendance

The Governance Policy Review Committee met on one occasion (November 7, 2022) between November 1 and December 31, 2022, via video conference. Attendance was excellent with no concerns regarding quorum experienced.

Activities Undertaken

At its **November** meeting, suggested amendments to EL10 (Workplace Harassment) were brought forward and assessed, and a new policy was introduced and deliberated, entitled Equity, Diversity, Inclusion and Belonging (EDIB).

As part of the mandated detailed annual review of all Policies, the Committee also reviewed and discussed the Ends Policies (EL01 EL02) and Council-CEO Linkage Policies (CCL01 – CCL03). Council member feedback, as well as feedback from members of the GPRC, was considered.

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

Next Meeting Date

January 10, 2023

Respectfully submitted by,

Dr Brenda Lessard-Rhead, ND (Inactive) Chair January 12, 2023

STANDARDS REVIEW COMMITTEE REPORT

November 1, 2022 – December 31, 2022

During the reporting period the Standards Committee did not meet as no meeting was scheduled.

The Committee is next scheduled to meet on January 18, 2023 where it will continue its review of the proposed amendments to the Standards of Practice.

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

EQUITY, DIVERSITY AND INCLUSION COMMITTEE REPORT

November 1, 2022 – December 31, 2022

For the reporting period of November 1, 2022 to December 31, 2022 the Equity, Diversity and Inclusion Committee (EDIC) met on November 14, 2022. The Committee finalized its review of the EDI Lens Tool to be used by other College Committees in the review of their policies and processes.

The Committee is next scheduled to meet in March 2023.

Dr. Jamuna Kai, ND Dr. Shelley Burns, ND

Co-Chair Co-Chair January 2023 January 2023



MEMORANDUM

DATE: January 25, 2023

TO: Council members

FROM: Andrew Parr, CAE

Chief Executive Officer

RE: Items Provided for Information of the Council

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

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

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

NIa	Name	Description
No.	Name	Description
1.	Gray Areas (No. 272)	Gray Areas is a monthly newsletter and commentary from our legal firm, Steinecke Maciura LeBlanc on issues affecting professional regulation. The issues for this past quarter are provided to Council in each Consent Agenda package.
2.	Legislative Update (December 2022)	This is an update provided by Richard Steinecke to the members of the Health Profession Regulators of Ontario (HPRO), formerly the Federation of Health Regulatory Colleges of Ontario (FHRCO). The updates identify legislation or regulations pertaining to regulation that have been introduced by the Ontario Government. The updates for the past quarter are provided to Council in each Consent Agenda package.
3.	Guidelines	Three Guidelines to reference as noted within Briefing Notes throughout the agenda items. These include the following,

No.	Name	Description
		Understanding the Public Interest, Understanding the Rush Analysis Terminology and Understanding Transparency.
4.	Council Meeting Evaluation	Graphs summarizing the responses of Council member's feedback from the November 2022 Council meeting.
5.	HBS 2023 Pay Date Calendar	E-mail received in December 2022 from the Ministry highlight key dates for claims deadline submissions and their corresponding pay date for the 2023 year.

Grey Areas



A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

Measuring Regulatory Performance Part 2 – Less Common Features

by Rebecca Durcan January 2023 - No. 274

How should regulators measure their regulatory performance? As noted last month, we were surprised at a <u>newspaper reporter's observation</u> that securities regulators were less effective regulators because they obtained lower fines and less prison time than in previous years.

We have conducted a review of the most recent annual reports (all for 2021) of ten Ontario regulators. Five were for regulators of health professions and five were for regulators of other professions. We selected a mix of larger, medium and smaller sized regulators. Our goal was to identify what objective measures of performance the regulators highlighted in their annual reports.

In Part 1 we examined the more common or recurring performance measures contained in regulatory annual reports. In this Part we will look at less frequently used measures of performance that some regulators chose to publish.

Demographic Data

Demographic data about a profession is not a performance measure in itself. However, the data can be relevant to assisting policy makers in workforce planning (e.g., age range, full or part-time practice, areas of practice). Five of the reports provided at least some of this sort of information.

In addition, some EDI data (e.g., race, gender, age, country of education) can be relevant to equity, diversity, and inclusion initiatives. Three of the reports provided this information, again to varying degrees.

Inquiry Response Times

One of the reports contained data on response times for inquiries from registrants or the public. For example, what percentage of inquiries were responded to within 24 or 48 hours.

Another report contained data on the average time callers to their call centre were placed on hold. The regulator reported a significant increase in wait times that was well over its target prompting a discussion of its origin and measures taken to address the concern.

Another report did not contain this information but provided the total number of inquiries received and responded to by the practice advisor to registrants (i.e., a throughput number). Another report indicated an enhanced commitment from two-days to one-day response times but did not report on its success.

Communications

Four of the reports set out statistical information about the effectiveness of their communications such as the frequency with which messages from the CEO were opened, or the number of social media followers, impressions, and engagements. One regulator provided detailed statistics of coverage of its activities by print, broadcast and online media and the number of media inquiries. Most regulators probably have at least some of this data but did not consider it worthy of inclusion in their annual report.

Board Performance

One of the reports contained interesting measures of the performance of the governing Board. Examples included dashboards on percentage of Board members who attended meetings, percentage of Board members who attended orientation sessions, whether the Board assessed the CEO's performance, the hours of continuing education provided to Board members, and an evaluation of whether the Board

FOR MORE INFORMATION

This newsletter is published by Steinecke Maciura LeBlanc, a law firm practising in the field of professional regulation. If you are not receiving a copy and would like one, please contact: Steinecke Maciura LeBlanc, 401 Bay Street, Suite 2308, P.O. Box 23, Toronto, ON M5H 2Y4, Tel: 416-599-2200 Fax: 416-593-7867, E-Mail: info@sml-law.com

Grey Areas



A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

members accurately responded to questionnaires about their understanding of their public interest role. Most of the dashboards for this portion of the report contained targets that the regulator was attempting to achieve.

Regulatory Performance

As noted in Part 1, all of the health regulators are required to report on a government-required College Performance Measurement Framework (CPMF). In addition, one of the regulators has developed its own voluntary performance measurement framework that uses criteria analogous to that used by the Professional Standards Authority of the United Kingdom. The regulator assessed whether it has met the twenty standards (e.g., Regulation is proportionate to the risk of harm being managed).

Other Unique Features

Some of the reports contained additional measures of performance that were not found in the other reports.

One regulator had a link to separate report on its EDI initiative. That report contained information about the number of visits to the EDI page on its website compared to total visits to its website (0.03% of total site traffic). The report also gave the number of pageviews of its five EDI cover stories in its newsletter, which figure was more than six times the number who had visited its EDI page. One could describe this kind of reporting both courageous and informative.

One of the reports limited the information reported to a single theme (i.e., how the regulator is strengthening the health care system, especially during the pandemic).

As noted in Part 1, one of the reports was in a webpage format with multiple links to specific documents. The cumulative report was hundreds of pages long. It was quite difficult for someone not

familiar with the organizational structure to navigate or to locate specific information. However, there were scores, if not hundreds, of performance measures to be found on many aspects of its operations.

Another regulator contained statistics of the use of online communities it had set up, including the number of active users, the number of users who had posted discussions, and the number of volunteers that were involved.

One of the reports contained information about its privacy improvements including a 52% reduction in boxes of paper stored off-site.

Another regulator reported on its commitment to providing services in French. Interestingly, despite its receiving over a hundred thousand calls, only 15 were in French. In addition, despite receiving over 2000 complaints, only one was in French.

Conclusion

Regulators continue to work towards trying to identify and publish meaningful measures of their performance. The regulators' annual reports are an intuitive place in which to publish these statistics. However, there is little consensus in identifying which performance measures are relevant, useful, and quantifiable. Much more work needs to be done before consistent and meaningful reporting can be provided by regulators.

In the meantime, regulators will continue to provide qualitative reporting and, occasionally, rely on third party reviews.

To see the reports themselves, go to:

- AOLS
- CMLTO
- CMO
- CNC

Grey Areas



A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

- COptomO
- CPSO
- HRPA
- <u>LSO</u>
- OAA
- RECO



Prepared by Richard Steinecke

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Ontario Bills

(www.ola.org)

Bill 59, Making Sexual Assault Evidence Kits Available Act, 2022 – (Private Members' Bill, first reading) – Bill 59 would require "the Minister of Health to direct every public hospital to have at least 10 sexual assault evidence kits available in the hospital at all times."

Bill 26, Strengthening Post-secondary Institutions and Students Act, 2022 – (Government Bill, passed third reading and received Royal Assent) – Bill 26 allows post secondary educational institutions to discipline and remove any employee who sexually abuses a student. The schools are permitted to define in what circumstances sexual abuse arises beyond criminal behaviour or breaches of the Human Rights Code. Provisions also restrict the ability to rehire employees who have engaged in sexual abuse including restricting the use of non-disclosure agreements.

Proclamations

(www.ontario.ca/search/ontario-gazette)

There were no relevant proclamations this month.

Regulations

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

Regulated Health Professions Act, 1991 – This amendment to the controlled acts regulation authorizes pharmacists to prescribe Nirmatrelvir/ritonavir for patients who test positive for COVID-19 in certain circumstances. (O. Reg. 560/22)

Occupational Health and Safety Act – This regulation requires certain workplaces to maintain naloxone kits meeting certain requirements. (O. Reg. 559/22)



Proposed Regulations Registry

(www.ontariocanada.com/registry/)

Nursing Act – It is proposed to expand the scope of practice of registered practical nurses to independently initiate certain procedures, including those related to wound care, venipuncture, and internal procedures. Comments are due by January 14, 2023.

Bonus Features

These include early drafts of some of the items that will appear in our blog: (www.sml-law.com/blog-regulation-pro/)

Off-Duty Defence Is Offside

Registrants cannot avoid professional accountability by trying to separate questionable conduct from their professional practice. That is the message from the decision in <u>Klop v College of Naturopathic Physicians of British Columbia</u>, 2022 BCSC 2086 (CanLII).

In that case the registrant, a Naturopathic Doctor, used various businesses to manufacture and promote the use of fecal microbiota transplant ("FMT") materials especially for use for children with autism. "FMT involves the transfer of bacteria and natural antibacterials obtained from the feces of a healthy individual into the gut of a patient through enema, colonoscopy or other means, with the aim of re-establishing a healthy microbial community in the recipient." Health Canada published a guideline stating that FMT was a new biologic drug with very limited indication [i.e., to treat clostridium difficile ("CDI")] and for which significant safeguards were necessary in order to prevent harm to recipients. The registrant facilitated the administration of FMT in Mexico including, for a time, to Canadian patients.

The regulator investigated the conduct and eventually imposed an interim order prohibiting the registrant from producing or promoting FTM. The registrants appealed the interim order and also sought judicial review to halt the investigations. The registrant initially asserted, but then withdrew, his argument that the regulator had no jurisdiction to regulate his conduct related to Mexico.

The registrant also argued that this was off-duty conduct outside of the jurisdiction of the regulator since FMT was not a recognized form of naturopathic treatment. The Court said that "it is well settled that off-duty conduct can give rise to discipline when it has a negative impact on the individual's ability to carry out their professional obligations or where the conduct has a negative impact on, or conflicts with the core values of, the profession". In addition, there was

ample evidence that the registrant used his professional designation in his promotional activities and that he advocated FMT as a treatment for a health condition (despite denials to the contrary). The Court also rejected the argument that the regulator was not allowed to use its processes to enforce another statute (i.e., the federal *Food and Drugs Act*).

In terms of the interim order, the Court supported the regulator's inference of risk of harm (BC uses a different test for interim orders than Ontario) from the Health Canada guidelines. The Court also rejected the need for expert evidence at this stage indicating "that to import a requirement for expert evidence at this stage of the administrative process would have the effect of conflating the investigatory stage of the process with the disciplinary stage". Also, it was no barrier to imposing an interim order that the regulator had not directly prohibited the use of FMT: "restricting inferences of harm to being made only where conduct is specifically prohibited by the College would unduly tie the College's hands in its oversight of registrants, and negatively impact—rather than promote—the public interest and confidence in the profession."

The Court also concluded that it was premature to consider the challenge to the investigation by the regulator.

Some of the reasons why judicial review will only be entertained in exceptional circumstances during an ongoing administrative process include:

- a) judicial intervention may fragment the tribunal's proceedings;
- b) the tribunal may resolve the dispute to the parties' satisfaction;
- c) the court's decision may be rendered moot because of the tribunal's decision on some other aspect of the proceedings;
- d) it is helpful for the court to have an evidentiary record and the tribunal's analysis of the dispute, especially in areas where the tribunal has special expertise; and
- e) courts are to avoid deciding constitutional and Charter issues on hypothetical facts or in a factual vacuum.

The Court found that there were no exceptional circumstances.

The attempt to separate this registrant's conduct from his professional practice was unsuccessful.

Resignation as an Alternative to Discipline

When facing serious allegations, registrants may offer to resign, (and sometimes undertake to never reapply), in return for avoiding a discipline hearing and a formal finding of misconduct. While regulators often have discretion to consider this option, they will frequently refuse to do so where a public hearing is necessary to maintain public confidence in the regulator. The issue

of whether a regulator could be forced to accept an offer of resignation arose in <u>Sturt v Chartered</u> <u>Professional Accountants of Alberta</u>, 2022 ABKB 801 (CanLII).

In that case, the registrant, an accountant, was alleged to have misappropriated funds from a former client. The registrant offered to resign and never again practise as a professional accountant. Under the applicable legislation the regulator could only accept this offer if the registrant admitted to the allegations. The registrant declined to do so in part because a complaint had been made to the police some years previously. Any requirement to admit the conduct, he argued, could affect his rights under the *Canadian Charter of Rights and Freedoms* to not incriminate himself. The registrant argued he was not able to afford a lengthy discipline hearing and the stress of a hearing would negatively affect his mental and physical well-being.

The registrant brought an application for an injunction against the regulator from proceeding with the discipline hearing.

In deciding whether to order an injunction (or stay), the first part of the test is whether there is a serious issue to be tried. That test is quite low and is usually easily met. In this case, however, the Court concluded that there was no merit to the registrant's arguments. There were no criminal proceedings pending or even imminent. The legislation required the registrant to admit the allegations before his offer to resign would be accepted. Even if there was discretion, there were no special circumstances, such as an abuse of process, to require the regulator to exercise any discretion in the registrant's favour.

The registrant also argued that the investigation was procedurally unfair because the regulator did "not fully investigate the explanations or corroborating evidence suggested by him that would lead to his exoneration". The Court found that the duty of procedural fairness was quite limited at the investigation and screening stages and that there was ample evidence to warrant a referral to discipline. The challenge was also premature as the sufficiency of the evidence would be tested at the discipline hearing.

The Court also found that the two other parts of the test for a stay (i.e., irreparable harm to the registrant and balance of convenience) strongly favoured the regulator. The Court said, in part:

having voluntarily entered into and enjoyed the benefits of the regulated profession of accounting, [the registrant] cannot now avoid the obligation of participating in a disciplinary hearing which is required under the Act. As such, the potential of a large financial commitment by [the registrant], and of health impacts such as they are, are not irreparable harm

The Court also found that the three-year period of time since the original complaint did not amount to an abuse of process under the test set out in <u>Law Society of Saskatchewan v. Abrametz</u>, 2022 SCC 29 (CanLII).

This case suggests that it would be rare for a regulator to be forced to accept a resignation of a registrant rather than to proceed with a discipline hearing if the regulator so chose.

Not Properly Constituted

The composition of a regulator's Council (or Board of Directors) is often set out in its enabling legislation. Where the legislation does not provide for vacancies, questions arise as to the impact of an unfilled position on the Council. In <u>Yan v. College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario</u>, 2022 ONSC 6842 (CanLII), a registrant tried to argue that the regulator was unable to even respond to a human rights complaint against it when the Council was not properly constituted. The registrant had made a complaint that the regulator's discipline proceedings against her were discriminatory. The Human Rights Tribunal dismissed the complaints on various grounds including that the compliant was made too late, that the Tribunal had no jurisdiction over adjudicative decisions of other bodies, and that the complaint could not be proved because the regulator's records were statutorily inadmissible in civil proceedings. It also dismissed the registrant's request to reconsider the decision.

On judicial review the registrant raised the concern that the regulator should not have even been able to participate in the human rights proceedings because its Council was not properly constituted (there was a vacancy in one of the public member positions). The Court said that even if the Council was not properly constituted, the legislation permitted its Executive Committee to act on its behalf. In addition, the regulator was not an active participant in the human rights process because it never reached the hearing stage. While the Court did not say this, this analysis suggests that the regulator's other committees (e.g., registration, complaints, discipline) could also continue to function even where the Council is not properly constituted.

It would have been preferable if the enabling legislation had expressly addressed the issue of vacancies. Of course, the government should have immediately filled the vacancy in the public member position as soon as it arose.

The Court made several other observations including:

- There is nothing inherently unfair in a tribunal correcting minor errors in its decision and reasons (e.g., to correctly name the relevant committee) after rendering its decision when the errors are pointed out by a party.
- Where reconsiderations are permitted, it is generally acceptable for the same person (or panel) to conduct the reconsideration.
- It is appropriate for the Human Rights Tribunal not to scrutinized adjudicative decisions made by other tribunals (i.e., adjudicative immunity).

 Where a legislative provision prevents regulatory documents from being admitted in civil proceedings, it was appropriate for the Tribunal to conclude in this case that there was no reasonable prospect of proving the complaint.

This is another example of where courts are reluctant to permit an interpretation of legislation that will lead to absurd results.

More Support for Compassionate Regulation

The dental regulator in the United Kingdom recently released a study it commissioned on its complaints and discipline process. The report is entitled: Experiences of GDC fitness to practise participants 2015 – 2021: A realist study. Using a methodology that included researching the literature, interviewing various participants in the process, reviewing documentation from files, and observing hearings, the authors found dissatisfaction with the process. Even though there was consensus that the outcome was generally fair, most participants found the process stressful and caused anxiety. Registrants, in particular, said the process negatively affected their health, wellbeing, behaviour, and practice. Some engaged in a defensive practice going forward and some even withdrew from the profession.

Complainants and, sometimes, registrants were unclear about the process and found the length of the process and lack of ongoing communication from the regulator challenging. The adversarial nature of the process was seen as problematic for many participants. Racialized participants felt that the process was disproportionately applied to them. Many registrants felt that minor concerns were allocated excessive resources.

Some recommendations include:

- Regulators should enhance their "upstream" activities including ensuring awareness of candidates for registration on the role and processes of the regulator and using effective communication techniques, including employing real-world examples, on professional standards.
- Gender and ethnic diversity of panels should be maintained where possible.
- The tone of communications from the regulator should be less legalistic and clearer. The underlying messaging should be reassurance that the "focus is on finding facts on whether [there is misconduct] so that registrants are considered innocent until proven guilty."
- There should be one contact person from the regulator who is authorized to provide individual support to each participant, including non-registrants. There should be frequent updates.



- Recognizing that the process can aggravate or even trigger mental health issues, there
 should be "self-referral processes for mental health needs assessments" and "early
 identification of vulnerable registrants."
- There should be enhanced training of regulatory staff regarding empathy.

Earlier screening of matters that need not enter the adversarial discipline process was also encouraged.

This study complements recent discussions on compassionate regulation.

Functional and Contextual

Courts use the reasons of discipline tribunals as the basis for their review of the disciplinary decisions. However, that is not to say that a disciplinary decision will be set aside simply because its reasons are not perfect. In <u>Cann v. Ontario College of Teachers</u>, 2022 ONSC 6988, the Court said that reasons for decision must be reviewed in a functional and contextual manner. This means that the reasons must be considered in light of the evidence, the actual issues in dispute, and the submissions made by the parties.

In that case, the allegation was that the registrant (a teacher) performed sexual acts in the presence of a preteen "little brother" that the registrant was mentoring. The registrant denied the allegation. The discipline panel accepted the evidence of the now sixteen-year-old. In reviewing the decision, the Court made the following points may be of interest to discipline tribunals in general:

- Where the panel correctly states the burden of proof (i.e., a civil burden on a balance of probabilities relying upon clear, cogent and convincing evidence), it is assumed that the panel applied that test unless the contrary can be demonstrated.
- Where it is clear that the panel turned its mind to credibility being in issue, it does not
 have to make an overall finding of the credibility of each witness. In this case, the panel
 identified the considerations for assessing whether evidence is honest and reliable and
 applied those considerations to the evidence of the complainant.
- While it is generally important for the panel to specifically address the credibility of the registrant when making a finding against them, there is no palpable and overriding error in failing to do so where the finding that the complainant is credible necessarily means that the registrant was found not to be credible. In this case, there was substantial agreement in the evidence about everything other than the core allegation. Thus, finding that the complainant was credible in saying the sexual acts occurred meant that the panel found the registrant was not credible on that point. In other cases where there are several facts in dispute, the panel may need to specifically address the credibility of the registrant.

- The panel's summary of the registrant's evidence was an indication that it took that evidence into account.
- It was of great assistance to the Court that the panel had addressed each of the
 inconsistencies in the evidence of the complainant and identified which of those were
 peripheral to the core allegations and which were part of the core allegation. In this case,
 the panel's explanation around why the inconsistency related to the core of the allegation
 was understandable and clarified why the inconsistency did not undermine the
 complainant's evidence as a whole.
- Expert evidence is typically not required on the issue of how memories operate. Common sense can generally be used.
- It is an error to say that a complainant has no motivation to fabricate their evidence simply because there was no evidence of such a motive. However, no such incorrect statement was made in this case. Rather, the panel simply concluded that the motives to fabricate suggested by the registrant were not established. That is a different kind of statement.

While a discipline panel's reasons for decision are important to a reviewing court, especially in credibility cases, the decision will be upheld where the basis of the panel's conclusion is apparent in all of the circumstances.

Screening Committee Reasons for Decision

Committees that screen complaints and investigations do not make findings of wrongdoing or impose disciplinary sanctions. As such, a lower degree of procedural fairness is required compared to disciplinary proceedings. However, the consequences of screening committee decisions can be somewhat significant, including being required to participate in remedial measures and having those measures noted on the public register.

In <u>Young v. College of Nurses of Ontario</u>, 2022 ONSC 6996 (CanLII), reports of substandard care about two registrants were investigated by the regulator. In both cases there was approximately an eighteen-month delay in notifying the registrants and a further two years taken to complete the investigation. The screening committee decisions requiring remedial measures (a caution and, in one case, remedial educational measures) were issued about four years after the regulator was first notified of the concerns. Both registrants made thorough submissions that the delay was an abuse of process and resulted in prejudice to their wellbeing and to the ability to investigate the matters (i.e., some witnesses and documents were no longer available). One of the registrants also submitted that their mental health was a relevant factor when considering the nature of their conduct. Both argued that, because of the delay, remediation no longer made sense.

The decision and reasons of the screening committee only addressed the merits of the concerns about the registrants' conduct and did not address their arguments of abuse of process and violation of their human rights (based on disability). The Court found that the failure to address these legitimate issues raised by the registrants rendered the decisions unreasonable. Even though the screening committee was not an adjudicator, it should have, at a minimum, considered whether delay and the human rights concerns should have impacted the disposition. The Court said: "The reasons do not address how or why, given the passage of time, the remedial measures remained appropriate." The matters were returned to the screening committee for a new decision.

Screening committee reasons should address legitimate issues raised by registrants that might affect the appropriate disposition, even where those issues do not go to the merits of the underlying conduct.

Registrant Working from Home Stymies Regulator

While regulators are often given search and seizure powers, they are rarely used. Generally, the authority to enter business premises without a warrant, the duty of registrants to cooperate, and the authority to summons witnesses and documents are sufficient to elicit cooperation. However, in the case of <u>The Law Society of Ontario v Bowie</u>, 2022 ONSC 7144 (CanLII), a Court agreed that the usual investigative powers were insufficient.

In that case, the regulator was investigating allegations of sexual harassment of more than one person by the registrant. The regulator wanted to confirm that the messages received by the individuals originated from the registrant's devices and social media. The regulator also sought evidence of harassment of other potential victims. The registrant refused to surrender his electronic devices and the regulator could not obtain them because they were not located at his business premises; the registrant generally worked from home or his vehicle. There was urgency to obtain the social media posts before they expired.

The Court granted the order authorizing searching and accessing the devices and social media accounts even from his home or vehicle. The Court said: "The allegations against the respondent are of a predatory nature." The Court approved of the arrangements by the regulator for a third party to hold the information to protect the privacy and privilege of information unrelated to the investigation. The Court also agreed to a temporary sealing of the file to protect the integrity of the investigation and the privacy of the complainant. The Court also delayed the release of its decision and reasons for a brief time until the search could be executed.

This case illustrates the kind of circumstances, and manner, in which search and seizure powers can be exercised by a regulator.

Understanding the Public Interest

In carrying out its objects, the College has a duty to serve and protect the public interest (section 3(3) of the Regulated Health Professions Act, 1991 (RHPA).

The term "public interest" is not defined in any legislation or regulation. What is the public interest?

- It is first and foremost a concept.
- It is contextual, the circumstances of decision-making help determine what it is.
- It is an unbiased concern for society.
- Places the benefit to the whole ahead of the benefit to a group, a few, or any one person.

Serving the public interest means ensuring the following.

- The public has access to professions of choice.
- Individuals are treated with sensitivity and respect.
- There are appropriate standards for the profession.
- There are ethical, safe, competent professionals and services.
- The patient interest is placed over professional interest.
- The principle-driven governance and operations are fair, objective, transparent and accountable.

The public interest is also about public protection and safety. Protecting the public from:

- Harm (physical, psychological, financial).
- Dishonesty and disrespect.
- Poor quality care.
- Sexual abuse.
- Breach of laws.
- Ineffective or unnecessary care.

In its deliberations, Council and Committees should consider the following factors.

- Is the decision fair to all parties?
- Is the decision objective, e.g. evidence-based?
- Is the decision impartial, e.g. made without bias?
- Is the decision transparent, e.g. are all of the relevant considerations clearly articulated and in the public domain?

Considerations/Questions to ask oneself during deliberations include:

- Does the matter relate to the College's statutory objects (section 3(1) of the Code)?
- Does the decision further one of the College's four regulatory activities?
- Is the decision being done transparently?
- Who is the primary beneficiary of the initiative?
- Would this better fit into another's mandate (e.g. the educators, the associations)?
- Who would be unhappy with the initiative and why?

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- How would it look on the front page of (any local or national newspaper) or on the evening newscast?
- How would our accountability bodies (e.g. the Government of Ontario, Office of the Fairness Commissioner, Health Professions Appeal Review Board) respond?
- Is our decision consistent with the mandate of the College (e.g. to ensure that Ontarians who wish to receive naturopathic services have access to individuals who have the knowledge, skill and judgment to practice safely, ethically and competently) and with other recent similar decisions.

What the public interest is NOT!

- Advancing the profession's self-interest (e.g. increasing fees charged by or earnings of the
 profession by limiting the number of members through creating barriers to access to the profession,
 or by expanding the scope of practice of the profession).
- Advancing personal interests of Council members (e.g. getting good PR in the profession in a reelection year).
- Advancing the interests of a small group of patients who feel that the general health care system is not serving them sufficiently (e.g. patients advocating for expanded scope for illness-specific purposes).

UNDERSTANDING THE RISK ANALYSIS TERMINOLOGY

The risk analysis provided to Council as part of its briefing process is becoming more sophisticated. New terminology will begin to be introduced that may be unfamiliar to many Council members and stakeholders. The table below provides information to allow a reader to interpret the information being provided.

RISK CATEGORY	Risk Type	Type Description	Indicators
HAZARD	People	Loss of key people.	Sudden and unforeseen loss of CEO or senior staff due to resignation, retirement, death or illness.
	Property	Damage or destruction.	Property damage due to fire, weather event, earthquake etc.
	Liability	Claims, and cost of defense claims.	Cost of defending a liability claim or awards paid due to a liability claim.
	Net Income Loss	Net Income loss from hazards.	Loss of Net Income (after expenses) from any of the above noted hazard risks.
OPERATIONAL	People	Risks from people selected to run an organization.	Education, professional experience, staffing levels, employee surveys, customer surveys, compensation and experience benchmarking, incentives, authority levels, and management experience.
	Process	Procedures and practices of an organization.	Quality scorecards, analysis of errors, areas of increased activity or volume, review of outcomes, internal and external review, identification of high-risk areas, and quality of internal audit procedures.
	Systems	Technology or equipment owned by an organization.	Benchmark against industry standards, internal and external review, and analysis to determine stress points and weaknesses.
	External Events	Failure of others external to an organization.	Suppliers unable to provide or deliver supplies, or consultants unable to complete projects on time or on budget.

		Currency price, interest rates, commodity price, equity price, and liquidity risk.	Interest rates, savings, and return on investments.
	Credit risk	Risk of people in an organization lent money to defaulting.	If the College were to lend money or credit to Registrants, the risk of defaulting.
	Price risk	Risk of prices of an organization's products or services, price of assets bought or sold by an organization.	Price increases of supplies, consultants, and personnel.
STRATEGIC (external to an	Economic environment	GDP changes, inflation, financial crises, and international trade.	GDP, CPI, and Interest rates.
organization)	Demographics	Changing landscape of people, i.e., aging.	Aging population, lower birth rates.
	Political	Changes in the politics where an organization operates.	Changes in government or government policy, locally, regionally, or nationally.
	Reputation	Damage to the reputation of the organization based on decisions taken or perils encountered.	Confidence and trust of stakeholders, the public, and Registrants.

Risk Treatment or Mitigation Techniques

	Technique	Description	General Usage?
Avo	oidance	Stop or never do an activity to avoid any loss exposure	All risk categories
Mo	odify		
	Separation	Isolate the loss exposures from one another to minimize impact of one loss. Relates to correlation of risks.	Financial risk
	Duplication	Use of back up or spares to keep in reserve to offset exposures.	Operational risk
	Diversify	Spread loss exposure over numerous projects, products, or markets.	Financial risk
Tra	nsfer	Transfer risk to another organization, typically an insurer.	Hazard risks
Ret	tain	Assume the risk of loss within the organization, typically done when severity and frequency are both low and sometimes when frequency is high, but severity is always low.	Hazard, Operational
Exp	oloit	Use the risk to your advantage	Strategic

To Treat or Not to Treat	Techniques
Do Not Treat	If potential impact is low and likelihood of occurring is low, do not need to treat the risk. May also choose
	not to treat a risk that has low potential impact and high likelihood in some circumstances.
Treat the risk	Treat a risk that has a high potential impact and high likelihood of occurring. Also treat a risk that has a high
	potential impact and low likelihood. Treatment methods
	1. Avoidance
	2. Change the likelihood or impact
	3. Finance risk – transfer (insurance or hedging for market risk) or retain

UNDERSTANDING THE COLLEGE'S COMMITMENT TO TRANSPARENCY

To help protect the public, the College and its Council are committed to transparency. This means providing Ontarians with the tools to make informed decisions, and ensuring that our own decision-making processes are easily understood.

The College and its Council have adopted the Transparency Principles developed by the Advisory Group for Regulatory Excellence (AGRE), a working group of health regulators, as the framework for its decisions.

The following table summarizes the transparency principles adopted by the Council.

Principle	Description
Information to foster trust.	The mandate of regulators is public protection and safety.
	The public needs access to appropriate information in
	order to trust that this system of self-regulation works
	effectively.
Improved patient choice and	Providing more information to the public has benefits,
accountability.	including improved patient choice and increased
	accountability for regulators.
Relevant, credible, and accurate	Any information provided should enhance the public's
information.	ability to make decisions or hold the regulator
	accountable. This information needs to be relevant,
	credible, and accurate.
Timely, accessible and contextual.	In order for information to be helpful to the public, it must
	be;
	a) timely, easy to find, understandable and,
	b) include context and explanation.
Confidentiality when it leads to better	Certain regulatory processes intended to improve
outcomes.	competence may lead to better outcomes for the public if
	they happen confidentially.
Balance.	Transparency discussions should balance the principles of
	public protection and accountability, with fairness and
	privacy.
Greater risk, greater transparency.	The greater the potential risk to the public, the more
	important transparency becomes.
Consistent approaches.	Information available from Colleges about Registrants and
	processes should be similar.



Council Meeting Evaluation November 30, 2022 9 Evaluations Received

Topic	Question	Data	Overall
Were issues discussed	Please rate how essential you feel	0@1	
essential?	the issues covered in today's	0@2	
	meeting were using a scale:	1@3	4.8
	1 - Not all all essential to	0@4	
	5 - Very Essential.	8@5	
Achieve Objectives?	Please rate how well you feel the	0@1	
	meeting met the intended	0@2	
	objectives using the following scale:	0@3	4.9
	1 - Not at all met to	1@4	4.9
	5 - All objectives met.	8@5	
Time Management	Please rate how well you feel our	0@1	
-	time was managed at this meeting	0@2	
	using the following scale:	0@3	4.9
	1 - Not at all managed to	1@4	
	5 - Very well managed.	8 @ 5	
Meeting Materials	Please rate how helpful you feel the	0@1	
Ü	meeting materials for today's	0@2	
	meeting were using the following	1@3	A 0
	scale:	0@4	4.8
	1 - Not at all helpful to	8@5	
	5 - Very helpful.		
Right People	Please rate the degree to which you	0@1	
	felt the right people were in	0@2	
	attendance at today's meeting using	0@3	10
	the following scale:	1@4	4.8
	1 - None of the right people were	8@5	
	here to		
	5 - All of the right people were here.		
Your Preparedness	Please rate how you feel your own	0@1	
'	level of preparedness was for	0@2	
	today's meeting using the following	0@3	A 0
	scale:	1@4	4.8
	1 - Not at all adequately prepared to	8@5	
	5 - More than adequately prepared.		
Group Preparedness	Please rate how you feel the level of	0@1	
, , , , , , , , , , , , , , , , , , , ,	preparedness of your Council	0@2	4.0
	, , , , , , , , , , , , , , , , , , , ,	1@3	4.8

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	colleagues was for today's meeting	0 @ 4	
	using the following scale:	8 @ 5	
	1 - Not at all adequately prepared to		
	5 - More than adequately prepared.		
Interactions between	Please rate how well you feel the	0@1	
Council members	interactions between Council	0 @ 2	
	members were facilitated using the	0@3	4.8
	following scale:	2 @ 4	
	1 - Not well managed to	7 @ 5	
	5 - Very well managed.		
What Worked Well	From the following list, please select t	he elements of too	day's meeting
	that worked well.		
	Meeting agenda		9/9
	Council member attendance		9/9
	Council member participation		9/9
	 Facilitation (removal of barriers) 		9/9
	 Ability to have meaningful discuss 	ions	8/9
	Deliberations reflect the public interest		9/9
	 Decisions reflect the public interest 	st	9/9
Areas of Improvement	From the following list, please select t	he elements of too	day's meeting
	that need improvement.		
	Meeting agenda		0/9
	Council member attendance	0/9	
	Council member participation	0/9	
	Facilitation (removal of barriers)		0/9
	 Ability to have meaningful discuss 	1/9	
	Deliberations reflect the public int	0/9	
	Decisions reflect the public interes	st	0/9
Things we should do	Are there things that you feel that		
	the Council should be doing at its		
	meetings that it is not presently		
	doing?		
Final Feedback	None.		

Comparison of Evaluations by Meeting 2022-2023

	2021/22 Overall			2	2022-2023			
Topic		May 2022	July 2022	Sept 2022	Nov 2022	Jan 2023	Mar 2023	Ave
Were issues discussed essential? 1 - Not at all essential to 5 - Very Essential.	4.5	4.5	4.9	4.5	4.8			4.7
Achieve Objectives? 1 - Not at all met to 5 - All objectives met.	4.8	4.5	5	5	4.9			4.85
Time Management 1 - Not at all managed to 5 - Very well managed.	4.7	4.6	4.7	5	4.9			4.8
Meeting Materials 1 - Not at all helpful to 5 - Very helpful.	4.8	4.8	5	5	4.8			4.9
Right People 1 - None of the right people to 5 - All of the right people.	4.7	4.1	5	4.75	4.8			4.7
Your Preparedness 1 - Not at all adequately prepared to 5 - More than adequately prepared.	4.6	4.4	4.6	4.5	4.8			4.5
Group Preparedness 1 - Not at all adequate 5 - More than adequate.	4.5	4.4	4.9	4	4.8			4.5
Interactions between Council members 1 - Not well managed to 5 - Very well managed.	4.6	4.6	5	4.25	4.8			4.7
Number of Evaluations	10.7	9	7	4	9			7.25

From: <u>DiFeo, Carmela (MOH)</u>
Cc: <u>Bougram, Christine (MOH)</u>

Subject: Pay Date and Deadlines for Public Members - 2023

Date: Tuesday, December 6, 2022 9:05:50 AM

Good morning,

As the new year is fast approaching, the HBS would like to provide you with the 2023 pay date calendar which also provides the deadline to submit claims per pay date. We ask that you please share this information with your members. If there are any questions, please let us know.

Claim Submission Deadline	Pay Date
December 22, 2022	January 5, 2023
January 5, 2023	January 19, 2023
January 19, 2023	February 2, 2023
February 2, 2023	February 16, 2023
February 16, 2023	March 2, 2023
March 2, 2023	March 16, 2023
March 16, 2023	March 30, 2023
March 30, 2023	April 13, 2023
April 13, 2023	April 27, 2023
April 27, 2023	May 11, 2023
May 11, 2023	May 25, 2023
May 25, 2023	June 8, 2023
June 8, 2023	June 22, 2023
June 22, 2023	July 6, 2023
July 6, 2023	July 20, 2023
July 20, 2023	August 3, 2023
August 3, 2023	August 17, 2023
August 17, 2023	August 31, 2023
August 31, 2023	September 14, 2023
September 14, 2023	September 28, 2023
September 28, 2023	October 12, 2023
October 12, 2023	October 26, 2023
October 26, 2023	November 9, 2023
November 9, 2023	November 23, 2023
November 23, 2023	December 7, 2023
December 7, 2023	December 21, 2023

Please note that the claim will only be paid out by the processing date, *if* the HBS receives the

registers. For that reason, it is highly recommended to submit the claims prior to the submission deadline to allow the HBS ample time to request, and receive, the registers from the College. Errors made on the claim form can also cause a delay in processing. This pay chart is for remuneration only. Expenses reimbursements do not follow this pay chart.

We look forward to continue working with you all and wish you all the best for the year ahead.

Regards,

Carmela DiFeo on behalf of Christine Bougram

(A) Executive Assistant/Researcher Health Boards Secretariat - Ministry of Health 151 Bloor Street West, 9th Floor Toronto, ON M5S 1S4

NOTE: This message and any attachments are intended only for the use of the individual(s) or organization(s) to whom or to which it is addressed and may contain privileged information and should not be read by, disclosed to or delivered to any other individual or organization. If you have received this communication in error or you are not the intended recipient(s), please notify us immediately by e-mail to https://documents.co.2. Any dissemination, distribution, copying or disclosure of this communication in any form whatsoever is strictly prohibited; you must delete permanently the original message and all copies of the original message from your E-mail/Internet Client/Server Software/computer systems; and destroy all hard copies that may exist. Thank you in advance for your cooperation.



Executive Committee Decisions To Be Ratified

Meeting of January 16, 2023

• Approval of the amendments to the Examinations Policy, specifically the accommodation section of the policy.



Conflict of Interest Summary of Council Members Declarations 2022-2023

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

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

16.01 Definition

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

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

Based on positions to which they are elected or appointed;

Based on interests or entities that they own or possess;

Based on interests from which they receive financial compensation or benefit;

Based on any existing relationships that could compromise their judgement or decision-making.

The following potential conflicts have been declared by the Council members for the period April 1, 2022 to March 31, 2023.

Elected or Appointed Positions

Council Member	Interest	Explanation				
	None					

Interests or Entities Owned

Council Member	Interest	Explanation
	None	

Interests from which they receive Financial Compensation

Council Member	Interest	Explanation
Dr. Shelley Burns, ND	Robert Schad Naturopathic	Provides supervision to
	Clinic (at CCNM) – PT	students of CCNM at
	Faculty	theclinic.

Existing Relationships

Council Member	Interest	Explanation		
None				

Council Members

The following is a list of Council members for the 2022-23 year and the date the took office for this program year¹, the date they filed their Annual Conflict of Interest Declaration form and whether any conflict of interest declarations were made.

Council Member	Date Assumed Office	Date Declaration Received	Any Declarations Made
Asifa Baig	May 25, 2022		
Dr. Jonathan Beatty, ND	May 25, 2022		
Dr. Shelley Burns, ND	May 25, 2022	May 11, 2022	Yes
Dean Catherwood	May 25, 2022	May 10, 2022	None
Brook Dyson	May 25, 2022	May 25, 2022	None
Lisa Fenton	May 25, 2022	May 10, 2022	None
Dr. Anna Graczyk, ND	May 25, 2022	May 10, 2022	None
Tiffany Lloyd	May 25, 2022	May 17, 2022	None
Dr. Denis Marier	May 25, 2022	May 10, 2022	None
Sarah Griffiths-Savolaine	May 25, 2022	May 17, 2022	None
Paul Philion	May 25, 2022	May 9, 2022	None
Dr. Jacob Scheer, ND	May 25, 2022	May 10, 2022	None
Dr. Jordan Sokoloski, ND	May 25, 2022	May 15, 2022	None
Dr. George Tardik, ND	May 25, 2022	May 17, 2022	None

A copy of each Council members' Annual Declaration Form is available on the <u>College's</u> <u>website</u>.

Updated: September 6, 2022

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



Report from the Council Chair January 2023

This is the fourth Chair's Report of six for the current Council cycle and provides information for the period from November 1, 2022 to December 31, 2022.

In December, Andrew and I had meetings with the senior leadership of two of our key stakeholders – one with the OAND and another with CCNM. We approached these meetings with a renewed sense of enthusiasm and a goal to work toward building the most effective relationships possible with these organizations. I felt the meetings were both productive. There was general agreement about the benefits of more regular communication and ensuring that we are all educated on the roles of our organizations and what we do for the profession. We also discussed ways in which we can better support each other and share information or resources, when appropriate.

Although our new strategic plan is not quite finalized, it is clear that relationships with stakeholders is a priority for the Council. Pending its acceptance in principle at this month's meeting, I look forward to sharing it with our stakeholders and continuing to develop these relationships over the course of the year.

As always, I encourage Council members not to hesitate to contact me should they have any questions, concerns, or should they wish to discuss any issue that may be before us.

Respectfully submitted,

Dr. Jordan Sokoloski, ND Council Chair 16 January 2023



Report on Regulatory Operations

The College of Naturopaths of Ontario

Regulatory Activity	May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
1.1 Regulatory Activity: Registration							
Registrants (Total)							1830
General Class							1634
In Good Standing	1561	1574	1595	1615			1615
Suspended	16	13	16	19			19
Inactive Class							174
In Good Standing	5	162	160	165			165
Suspended	8	8	9	9			9
Life Members	22	22	22	22			22
Changes in Registration Status							
Suspensions	10	0	4	3			17
Resignations	4	0	1	2			7
Revocations	3	0	9	0			12
Reinstatements	3	3	1	1			8
Class Changes							
GC to IN	0	1	1	3			4
IN to GC (< 2 years)	0	1	1	1			3
IN to GC (> 2 years)	0	0	0	0			0
Life Membership Applications							
Approved	0	0	0	0			0
Not Approved	0	0	0	0			0
Professional Corporations (Total)							
New applications approved	0	3	2	3			8
Renewed	14	15	12	22			63
Revoked	0	0	0	0			0
Resigned/Dissolved	0	1	0	1			2
1.2 Regulatory Activity: Entry-to-Pract	ise						
New applications received	10	3	31	28			72
On-going applications	20	11	33	57			57
Certificates issued	11	9	4	39			63
Referred to RC	1	0	2	1			4
Approved	1	0	0	1			2
Approved – TCLs	0	0	0	0			0
Approved – Exams required	0	0	0	0			0
Approved – Education required	0	0	0	0			0
Denied	0	0	0	0			0

Regulatory Activity	May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
1.2 Regulatory Activity: Entry-to-P	ractise continu	ed					
PLAR Applications							0
New	0	0	1	0			1
On-going	1	1	1	2			2
1.3 Regulatory Activity: Examinati	ons						
CSE							
Scheduled	0	1	0	0			1
Held	0	1	0	0			1
Candidates	N/A	98	N/A	N/A			98
BME							
Scheduled	0	0	1	0			1
Held	0	0	1	0			1
Candidates	N/A	N/A	95	N/A			95
Clinical Practical Exam							
Scheduled	0	1	1	0			2
Held	0	1	1	0			2
Candidates	N/A	46	44	N/A			90
Therapeutic Prescribing							
Scheduled	0	0	1	0			1
Held	0	0	1	0			1
Candidates	N/A	N/A	31	N/A			31
IVIT							
Scheduled	1	0	0	1			2
Held	1	0	0	1			2
Candidates	19	N/A	N/A	22			41
Exam Appeals							
CSE	1						
*** Granted	0	0	0	0			0
*** Denied	0	0	0	1			1
BME							
*** Granted	0	0	0	0			0
*** Denied	0	0	0	0			0
Clinical Practical	i						
*** Granted	0	0	0	0			0
*** Denied	0	0	0	0			0
Therapeutic prescribing							
*** Granted	0	0	0	0			0
*** Denied	0	0	0	0			0
IVIT	T T						
*** Granted	0	0	0	0			0
*** Denied	0	0	0	0			0
Exam Question Development							
*** CSE questions developed	0	0	0	0			0
*** BME questions developed	0	83	0	0			83

Regulatory Activity	May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
1.4 Regulatory Activity: Patient Relation	ons						
Funding applications							
New applications	0	0	0	0			0
Funding application approved	0	0	0	0			0
Funding applilcation declined	0	0	0	0			0
Number of Active Files	5	5	5	5			5
Funding Provided	\$1,320	\$325	\$730	2,640			\$5,005
1.5 Regulatory Activity: Quality Assur	ance						
Peer & Practice Assessments							
Scheduled	0	0	45	44			89
Completed	0	0	45	44			89
CE Reporting							
Number in group	0	0	487	0			487
Number received	0	0	483	0			483
P&P Assessment required	0	0	0	0			0
QAC Reviews							
Accepted	0	0	0	0			0
Work Required	0	0	0	0			0
QAC Referrals to ICRC	0	0	0	1			1
1.6 Regulatory Activity: Inspection Pro	ogram						
New premises registered	3	7	2				12
New Premise Inspection							
Part I Scheduled	0	3	10	4			17
Part I Completed	0	3	10	4			17
Part II Scheduled	5	1	0	1			7
Part II Completed	5	1	0	1			7
New premises-outcomes							
Passed	6	1	8	4			19
Pass with conditions	0	2	1	5			8
Failed	0	0	0	0			0
Secondary Inspections							
Scheduled	6	2	8	6			22
Completed	6	2	8	6			22
Second inspections							
Passed	9	2	4	8			23
Pass with conditions	3	0	1	3			7
Failed	0	0	0	0			0
Type 1 Occurrence Reports							
Patient transferred to emergency	4	1	3	1			9
Patient died	1	0	0	1			2
Emergency drug administered	0	0	0	1			1

	Regulatory Activity	May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
1.7	Regulatory Activity: Complaints and	d Reports						
1	New complaints/reports							
	Complaints	1	7	1	3			12
	CEO Initiated	1	1	1	1			4
I	CRC Outcomes							
	Letter of Counsel	6	2	5	2			15
	SCERP	4	0	0	0			4
	Oral Caution	1	0	0	1			2
	SCERP & Caution	0	1	1	0			2
	No action needed	3	1	0	0			4
	Referred to DC	0	6	3	0			9
9	Summary of concerns							
	Advertising	0	2	1	2			5
	Failure to comply	1	1	0	0			2
	Ineffective treatment	0	4	1	0			5
	Out of scope	0	2	2	1			5
	Record keeping	0	2	0	0			2
	Fees & billing	0	2	1	1			4
	Lab testing	0	0	0	0			0
	Delegation	0	0	0	0			0
	Harassment	1	0	0	0			1
	QA Program comply	0	0	0	0			0
	C&D compliance	0	0	0	0			0
	Failure to cooperate	0	0	0	0			0
	Boundary issues	1	0	0	0			1
	Practising while suspend.	0	1	0	1			2
	Unprofessional, unbecoming conduct	2	1	1	0			4
1.8	Regulatory Activity: Cease & Desis	t						
	C&D Issued	0	2	1	0			3
	C&D Signed	0	1	0	0			1
I	njunctions	0	0	0	0			0
	Sought	0	0	0	0			0
	Approved	0	0	0	0			0
	Denied	0	0	0	0			0
	Regulatory Activity: Hearings							
F	Pre-hearing conferences							
	Scheduled	0	0	0	2			2
	Completed	1	0	0	0			1
	Discipline hearings							
	Contested	0	0	0	1			1
	Uncontested	2	0	1	2			5
(Contested Outcomes							
	Findings made	0	0	0	0			0
	No findings made	0	0	0	0			0
F	FTP Hearings	0	0	0	0			0

Regulatory Activity	May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
1.10 Regulatory Activity: Regulatory (Guidance						
Inquiries							
E-mail	56	47	54	48			205
Telephone	54	35	44	44			177
Top inquiries							
COVID-19	7	0	0	0			7
Scope of practice	9	6	11	8			34
Conflict of interest	6	0	0	0			6
Tele-practice	4	8	9	7			28
Inspection program	10	6	0	5			21
Patient visits	9	6	6	8			29
Advertising	0	2	3	0			5
Lab testing	4	6	5	4			19
Notifying patients when moving	0	0	0	5			5
Fees & billing	10	7	12	13			42
Record keeping	0	0	9	5			14
Consent and Privacy	4	4	0	5			13
Grads Practising with Registrant	0	3	0	0			3
Injections	0	6	0	0			6
Discharging a patient	0	0	3	0			3
Registration & CPR	0	0	8	0			8
Delegation and Referrals	6	0	3	4			13
1.11 Regulatory Activity: HPARB App	eals	•					
RC Appeals							
Filed	0	0	0	0			0
Upheld	0	0	0	0			0
Returned	0	0	0	0			0
Pending	0	0	0	0			0
ICRC Appeals							
Filed	0	2	0	0			2
Upheld	0	0	0	0			0
Returned	0	0	0	0			0
Overturned	0	0	0	0			0
Pending	0	0	2	2			2
I.12 Regulatory Activity: HRTO Matte	rs						
In progress		1	1	1			1
Decided							
In favour of applicant							0
In favour of College							0

MEMORANDUM

DATE: January 25, 2023

TO: Council members

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

Chair, Governance Policy Review Committee

RE: Review of the Governance Process Policies (Part 1)

The Governance Policy Review Committee (GPRC) met on January 10, 2023, to review the Governance Process Policies (Part 1) suggestions that had been submitted as part of the regular policy review, as well as to consider on-going changes to other policies.

1. Governance Process Policies (Part 1).

In keeping with the revised Council Annual Cycle, the January meeting of the Council includes a detailed review of the Governance Process Policies (Part 1):

- GP01.01 Governance Commitment
- GP02.02 Governing Style
- GP03.03 Code of Conduct
- GP04.02 Council Job Description
- GP05.04 Role of the Council Chair
- GP06.08 Committee Principles
- GP07.02 Cost of Governance
- GP08.04 Annual Planning Cycle
- GP09.02 Council Communication
- GP10.01 Conflict Resolution
- GP11.01 Avoiding Conflict of Interest
- GP12.01 Confidentiality
- GP13.01 Intellectual Property
- GP14.01 Council Business Meetings
- GP15.02 Linkage with the Public and Registrants
- GP16.02 Governance Evaluation

The staff circulated information to Council members in advance of the Committee meeting. Feedback was provided by Council members with respect to any of the Governance Process (Part 1) policies; in addition, the Committee has reviewed the policies in detail and has several recommendations for the consideration of Council.

GP05.04 - Role of the Council Chair

The Committee reviewed this policy and made a grammatical amendment within paragraph 1 and to bullet points #3b and f.

Recommendation – That the policy being referenced have the word 'by' added within paragraph 1 and 'specifically' added to bullet points #3b and f.

GP07.02 - Cost of Governance

The Committee reviewed this policy and made a grammatical amendment within bullet point #2d.

Recommendation – That the policy being referenced have the wording "...will be conducted..." added to bullet point #2d.

GP10.01 - Conflict Resolution

The Committee reviewed this policy and made a grammatical amendment within bullet point #7.

Recommendation – That the policy being referenced have the removal of the Executive Committee reference and change it to the CEO Review Panel and also add the wording "…on the part of the CEO,…" within bullet point #7.

GP11.01 - Avoiding Conflict of Interest

The Committee reviewed this policy and made a grammatical amendment within bullet point #4 and #5.

Recommendation – That the policy being referenced have the wording "…ensure that…" moved within the sentence of bullet point #4 and have bullet point #5 changed to present tense wording.

GP13.01 - Intellectual Property

The Committee reviewed this policy and made a grammatical amendment within the opening paragraph.

Recommendation – That the policy being referenced have the term public representatives added to the opening paragraph as defined by the College by-laws.

<u>GP14.01 - Council Business Meetings</u>

The Committee reviewed this policy and made a grammatical amendment within the opening paragraph and bullet point #2a.

Recommendation – That the policy being referenced remove the word 'the' within the opening paragraph and italicizing the Code and Act within item #2a.

GP15.02 - Linkage with the Public and Registrants

The Committee reviewed this policy and required additional time to review feedback and suggestions of amendments.

Recommendation – That the policy being referenced be deferred to the March meeting for acceptance of any changes should they be presented.

<u>GP16.02 - Governance Evaluation</u>
The Committee reviewed this policy and required additional time to review feedback and suggestions of amendments.

Recommendation – That the policy being referenced be deferred to the March meeting for acceptance of any changes should they be presented.

Respectfully submitted,

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

January 2023

	Policy Type GOVERANCE PROCESS	COUNCIL POLICIES Item 5.02
	Title	Policy No. GP05.045
The College of Naturopaths of Ontario	Role of the Council Chair	Page No.

The Council Chair assures the integrity of the Council's governance processes and, secondarily, represents the Council to outside parties in a defined manner. Accordingly,

- The result of the work of the Council Chair is that the Council acts in a manner that is in keeping with the rules legitimately imposed upon it from outside the organization and by its own governance policies and processes, including but not necessarily limited to all of the following.
 - a) The Regulated Health Professions Act, 1991, including Schedule 2, the Health Professions Procedural Code, with specific attention to section 3(1), the Objects of the College, and the regulations made under that Act.
 - b) The Naturopathy Act, 2007, and the regulations made under that Act.
 - c) The by-laws of the College.
 - d) The Council's Ends policies, Council-CEO linkage policies and Governance Process policies.
- The authority of the Council Chair is as it is set out in the foundational documents enumerated in paragraph 1 and includes the following duties and responsibilities.
 - a) Making decisions that fall within topics covered by Council policies on Governance Process and Council-CEO Relationship, except
 - i) where the Council specifically delegates portions of this authority to others;
 - ii) making decisions about policies created by the Council within Ends and Executive Limitations policy areas; and
 - iii) independently supervising or directing the CEO.
 - b) Reasonably interpreting the provisions of the Council's Governance Process policies.
 - c) Representing Council to outside parties in announcing Council-stated positions regarding the regulation of the profession and governance of the Council.
 - d) Delegating their authority while remaining accountable for its use.
 - e) Ensuring security and maintenance of Council-owned files such as bylaws, agendas, minutes and monitoring reports;
 - f) Sharing with the CEO responsibility for the orientation of new Council members.
 - g) Orienting the CEO to the College of Naturopaths of Ontario.
- The Council Chair is elected by the Council and as such, represents an important part of the integrity of the Council's commitment to good governance. Accordingly, the Council Chair shall oversee and be responsible for the implementation and application of the Governance process policies, including but not necessarily limited to the following duties and responsibilities.
 - a) Ensuring the on-going commitment of the Council and individual Council members to the Council's governing style and Ends policies.
 - b) Ensuring that the Council generally, and individual Council members specifically, adhere to the GP03 Code of Conduct for Council and Committee members.

DATE APPROVED	DATE LAST REVISED
April 27, 2011	January 25, 2023 March 30, 2022

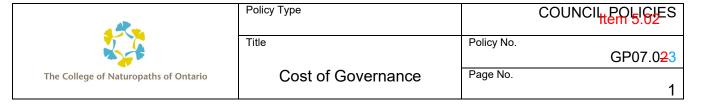


Policy Type GOVERANCE PROCESS		COUNCIL POLICIES
Title	Policy No.	GP05.045
Role of the Council Chair	Page No.	2

- c) Ensuring that the Council in the performance of its duties and responsibilities, adheres to the Job Description of Council.
- d) Ensuring that the Council's Committees fulfill their respective mandates as set out by the Council.
- e) Ensuring that the Council adheres to its Annual Planning Cycle.
- f) Ensuring that the Council generally, and individual Council members specifically, demonstrate an on-going commitment to the Council Communications policy.
- g) Ensuring that Council members and committee appointees attend all Council and Committee meetings as required, except when excused for good reason, come to the meeting prepared and participate in discussions, conducting any necessary follow up on issues that arise.
- h) Providing the Council with a report on their activities bi-monthly.
- i) Ensuring that Council members properly disclose conflicts of interest.
- j) Adhering to GP25 (Role of the Committee Chair) as the Chair of the Executive Committee.

DATE APPROVED	DATE LAST REVISED
April 27, 2011	January 25, 2023 March 30, 2022

Council Meeting January 25, 2023 Page 72 of 164



The Council will invest in ensuring that Council skills, processes and supports will remain sufficient to assure their regulatory and governance responsibilities.

Definitions Direct Means meeting costs, legal advice, witness expenses, third party

monitoring of regulatory performance, external support, and training expenses

of statutory committee members.

Means all activities associated with regulating Registrants of the Regulatory work

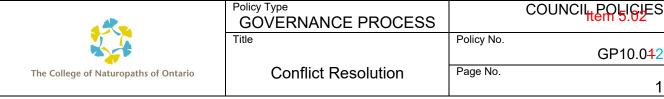
profession, including all statutory functions of the College.

Accordingly,

- 1 The Council will determine an annual budget for direct expenses associated with fulfilling its broad regulatory Council objectives. As such:
 - a) Chairs of Statutory Committee's will propose an annual work plan and budget which will be submitted to the Chief Executive Officer (CEO) as part of their budget cycle;
 - b) The CEO will budget for the direct expenses associated with internal College governance, including meeting expenses of the Council and its Committees.
- 2 Council skills, processes and supports will be sufficient to assure governing with excellence. In this regard, the Council commits to the following duties and responsibilities.
 - a) Training, retraining and mentoring to orient Council members and candidates for Council membership, as well as maintaining and increasing existing Council member skills and understanding in all areas.
 - b) Outside monitoring assistance will be arranged so that the Council can exercise confident control over organizational performance. This includes but is not limited to a financial audit.
 - c) Outreach mechanisms will be used as needed to ensure the Council's ability to gather and assess other viewpoints.
 - d) Evaluation processes for the Council will be conducted to understand its effectiveness as a whole and as individual members of the Council.

DATE APPROVED	DATE LAST REVISED
July 30, 2013	January 25, 2023 May 26, 2021

Council Meeting Page 73 of 164 January 25, 2023



Conflict will naturally occur in any organization. Such conflict requires a fair and reasoned approach to ensure a resolution that is in the best interests of the organization and considers the views of all parties. Conflict will occur within the organization between Council members, Council members and Registrants, staff and Registrants, staff and Council members.

Accordingly,

- When conflict has occurred, the Council Chair shall be notified in order to activate this policy. The responsibility to notify the Council Chair rests with:
 - a) Council members when the conflict is between
 - i. two or more Council members;
 - ii. the CEO and one or more Council members.
 - b) The CEO when the conflict is between
 - i. staff and one or more Council members or
 - ii. the CEO and one or more Registrants.
- 2 Issues of conflict shall be addressed by the Executive Committee of the Council.
 - a) Where a member of the Executive Committee is directly involved in the conflict, they shall absolve themselves of the matter, in which case the Executive Committee may ask another member of Council to participate in the conflict resolution process.
 - b) Where a majority of the Executive Committee members are involved, the matter shall be referred to the full Council.
- The parties to the conflict shall be notified as soon as possible following the reporting of the conflict that the matter has been referred to the Executive Committee.
- The Executive Committee shall review the matter that has become a point of conflict and shall seek the input of all parties individually to develop an understanding of the issues.
- The Executive Committee shall work with all parties, by whatever means possible, to affect a resolution of the issue that is acceptable to all parties.
- If an acceptable resolution is not possible, the matter shall be referred to the Council for evaluation within the context of its policies.
- Information obtained during the process of conflict resolution, including any remedial actions taken on the part of the CEO, shall be considered by the CEO Review Panel Executive Committee as a part of the annual CEO Performance Review process.
- When conflict is between Registrants and staff other than the CEO, the matter shall be referred to the CEO.

DATE APPROVED	DATE LAST REVISED
July 30, 2013	January 25, 2023 January 27, 2021



Policy Type		COUNCIL POLICIES
GOVERNANCE PROCESS		πem 5.02
Title	Policy No.	
		GP11.0 <mark>42</mark>
Avoiding Conflict of Interest	Page No.	
		1

All Council and Committee members have a duty to carry out their responsibilities in a manner that serves and protects the public interest. As such, they must not engage in any activities or in decisionmaking concerning any matters where they have a conflict of interest.

Definitions

of

Conflict Means a situation where a reasonable person would conclude that a Council or Committee member's personal or financial interest may affect their Interest judgment or the discharge of their duties to the College. A conflict of interest may be real or perceived, actual or potential, direct or indirect.

Accordingly, all Council and Committee members,

- 1 Have a duty to uphold and further the intent of the Act to regulate the practice and profession of naturopathy in Ontario, and not to represent the views of advocacy or special interest groups.
- 2 Must immediately declare any conflicts that arise from their involvement with external organizations and take the appropriate action in accordance with section 16 of the by-laws.
- 3 Must annually complete the Conflict of Interest Questionnaire provided by the CEO in which they shall disclose any other organizations of which they are an owner, director, officer, member, or employee and return it to the CEO by the date required.
- 4 Who believe that a matter that has come before the Council or their Committee ensure that where there is a conflict of interest ensure that they have taken the necessary measures to consult with the Council Chair or Chair of the Committee, decline to take part in the discussion, recuse themselves from the discussion and make no attempts to influence the decision-making of the Council or Committee.
- 5 Will declare all conflict of interests, which will must be recorded in the minutes of the Council or the Committee meeting where the declaration is has been made.
- 6 Must refrain from using College property or information of any kind to advance his or her own interests, direct or indirect.
- 7 Must, when participating in organizations other than the College, including but not necessarily limited to professional associations, carefully consider the appropriateness and impact of expressing opinions and when deciding to express their opinion, must state that the opinion is their own opinion and not that of the Council or the College.
- 8 Shall review and sign the "Acknowledgment and Undertaking regarding" Fiduciary Duties" prior to assuming their responsibilities and duties on behalf of the College.

DATE APPROVED	DATE LAST REVISED
July 30, 2013	January 25, 2023 27, 2021



Policy Type GOVERNANCE PROCESS		COUNCIL POLICIES
Title	Policy No.	GP13.042
Intellectual Property	Page No.	1

The College, its Council and Council Committees rely heavily on the efforts of its professional members, public representatives and those individuals appointed by the Lieutenant Governor in Council in order to undertake the tasks assigned to the College. These individuals will create work products and innovations by their involvement in the College.

Accordingly, all members of the Council and its Committees,

- Acknowledge that all work, discoveries, improvements and inventions conceived of or made by any Council or Committee members in connection with the work, products, equipment or other activities of the College during their involvement belong to the College, unless a written agreement between the individual and the College CEO, signed in advance, provides otherwise.
- 2 Assign and release all interest in any such work, discoveries, improvements or inventions to the College.
- 3 Undertake to execute all documents required to apply for and obtain patent or copyright in Canada or any other country.
- 4 Shall review and sign the "Acknowledgment and Undertaking regarding Fiduciary Duties" prior to assuming their responsibilities and duties on behalf of the College.

¹As defined within the College by-laws.

DATE APPROVED	DATE LAST REVISED
July 30, 2013	January 25, 2023 27, 2021



Policy Type GOVERNANCE PROCESS		COUNCIL POLICIES
Title	Policy No.	
		GP14.01
Council Business Meetings	Page No.	1

The Council is responsible for the conducting its business meetings in an organized, fair, transparent and collegial manner that is consistent with the values of the profession and the College.

Accordingly,

- Council meeting agendas will be established by the Council Chair with the advice of the Chief Executive Officer (CEO).
 - a) Agendas will be based on the Annual Planning Cycle established in GP08.
 - b) It may be expected that materials from Committees will come forward at each meeting.
 - c) There will be policy making, modifying and monitoring on each agenda.
 - d) Committees should be aware when in-depth program reporting will be required.
 - e) Meetings will include a brief report from the Council Chair and a Report on Regulatory Operations from the CEO.
- 2 Elections shall be undertaken as per the *Regulated Health Professions Act*,1991, the College by-laws.
 - a) Election of Council members shall take place in accordance with the *Health Professions Procedural Code*, the *Naturopathy Act, 2007* and in accordance with the requirements established by the College by-laws under the supervision of the CEO and the Governance Committee.
 - b) Election of the Executive Committee shall be conducted at the first meeting of the new Council annually under the supervision of the CEO.
 - c) Committee Chairs and Committee members will be appointed annually by the Council.
- Council meetings shall be accessible to the public as per the RHPA but Council will exclude the public from meetings with respect to personnel matters, matters restricted by legislation regarding protection of privacy, or matters in which public discussion could prejudice Council's legal position.
- Any alteration to existing regulations or additions or deletion of regulations must be approved by a majority of Council, and in the case of substantive alterations only after consultation with members of the College. Committees may present recommendations to Council with respect to regulations but have no power for College decision-making.
- All issues/proposals raised will first be discussed in relation to existing policies in order to ascertain (a) whether it is a question for Council or the CEO to determine (b) the extent to which the policy/proposal is satisfactorily covered by existing policy and whether existing policy needs to be modified. The discipline of making policies at the broadest level first and relating to present policies with new issues/proposals preserves the principle of efficient policy making through encompassment and modification rather than creating new policy with each new proposal.

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



Policy Type		COUNCIL POLICIES
GOVERNANCE PROCESS		πem 5.02
Title	Policy No.	
	,	GP14.01
		GF 14.01
Council Business Meetings	Page No.	
Council Dusiness Mcclings		2
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- Preparation and planning for meetings is critical as policy decisions often require appropriate information. Since proposals usually come from Committees or the CEO it is appropriate that briefing material be prepared and circulated in advance of a meeting of the Council and, in the event that the Council does not believe it has sufficient or all of the necessary information for decision-making, it may direct the CEO or Committees to bring additional information and therefore defer a matter from one meeting to a future meeting.
- 7 The process for the conducting of business will follow that which is outlined in Schedule 2 of the by-laws.

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



BRIEFING NOTE Emergency Class of Registration

To seek Council approval for the proposed provisions relating to the

	creation of an emergency class of registration.						
OUTCOME	Appr	oval in p	orinciple	is sought t	o enable a 60-da	y cons	sultation period.
NATURE OF DECISION		Strate	egic 🔽	Regula & Action	atory Processes ons		Other
PROCESS:							
Activity:	Activity: Review of briefing note followed by discussion.						
Results:	Lesults: Understanding of the proposed revisions and enabling consultation.					abling consultation.	
Overall Timing: How much time is allocated on the agenda for this item.							
Steps/Timing	g:	1.	Review	of briefing		10 m	ninutes
		2.	Counsel Q&A		10 m	ninutes	
·	-	2	Mation			E mai	aut a a

BACKGROUND:

PURPOSE:

In April 2022, the Ontario Government approved the *Pandemic and Emergency Preparedness Act, 2022* (PEPA) which subsequently received Royal Assent on April 14, 2022. PEPA amended the *Regulated Health Professions Act, 1991* by:

- 1. Prohibiting health regulatory Colleges from requiring applicants to have Canadian experience unless an exception is provided in the regulations;
- 2. Requiring timely registration decisions;
- 3. Streamlining requirements for demonstrating language proficiency;
- 4. Requiring health regulatory Colleges to have emergency classes of registration to enable expedited registration where necessary; and
- 5. Providing regulation making power to operationalize these changes.

This Briefing deals specifically with item 4 above, the requirement that there be an emergency class of registration.

In December 2022, Dr. Karima Velji, Assistant Deputy Minister (ADM) at the Ministry of Health released guidance to the Colleges regarding the creation of the emergency class of registration which is attached as Appendix 1. At the outset, it is important to note that PEPA requires that each College have a regulation in place for an emergency class no later than August 31, 2023. This means that the draft regulations must have completed Ministry review and gained approval from Cabinet by this date. To facilitate this, the Ministry has indicated that all Regulations <u>must</u> be submitted no later than April 1, 2023.

This briefing sets out the policy elements that would form provisions to be included in a draft amending regulation. Attached as Appendix 2 is the Registration Regulation with amended provisions based on this policy discussion set out in red.

DISCUSSION POINTS:

About the Registration Regulation

The College's Registration Regulation establishes the classes of registration available and the requirements for admission to those classes. Additionally, it also establishes certain requirements that will apply to all classes of registration.

In this regard, the following sections of the Registration Regulation would continue to apply to all classes of registration, including the proposed emergency class:

- Section 2: that to apply, an applicant must use a form provided by the Registrar¹ and pay any applicable fees.
- Section 3: the requirements that apply to all classes around good character, language
 proficiency, the absence of physical or mental conditions or disorders which in the public
 interest would necessitate the application of terms, conditions or limitations or refusal of
 registration, good standing with respect to other registrations they may hold or have
 previously held, and proof of professional liability insurance coverage (section 3).
- Section 4: the terms, conditions and limitations on every certificate of registration, including such things as reporting misconduct, incompetence or incapacity findings and proceedings, findings of professional negligence, a refusal to be registered, failing an entry-to-practice examination among others.
- Sections 11-15: that examinations be offered twice per year (section 11), appeal provisions (section 12), suspension, revocation and reinstatement provisions.

Emergency Class Requirements

The emergency class registration requirements set out by the Government are very specific and must include that:

- It is a separate class of registration.
- It specifies the circumstances in which the class is open to applicants (which assume that the applicants cannot apply to the class except when there is an emergency).
- It specifies that the term of registration is a period of up to one-year, and renewable.
- It provides a means for the individuals in this class to transfer to another class of registration without having to meet all the usual registration requirements.

Each of these requirements will be addressed below. References to the draft of the amended Registration Regulation (Appendix 2) have also been provided.

Separate Class of Registration

There is a general understanding that since the emergency class of registration will be a new class among existing classes, the process for enacting the class will be a regulation that will amend the College's *Registration Regulation*, *Ontario Regulation 84/14*. To bring about the emergency class, section 1 of the Regulation, which sets out the classes of registration under the College, will need to be amended class. Please see paragraph 3 of section 1 of Appendix 2.

Criteria for Availability of the Emergency Class

The ADM's memorandum identifies three criteria that might be used, alone or in combination, to open the emergency class for application as well as noting that a process needs to be developed for determining the existence of emergency circumstances.

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¹ Although the Council has required that all references be updated to refer to the CEO as opposed to the Registrar and to Registrants rather than members, the Regulations themselves have not been amended. To ensure clarity, this briefing will use the terminology from the regulations.

Decision-making Process

The Registration Committee is recommending that all decisions relating to the opening of the emergency class of registration would be made by the Council acting upon a recommendation from the Registration Committee. It is anticipated that the senior staff of the College would alert the Registration Committee that the circumstances to open the class of registration have been or are about to be met thereby initiating Committee discussions and a recommendation to the Council.

Emergency circumstances

The Registration Committee has considered what emergency circumstances should exist for the Council to be authorized to open this class of registration. Ministry guidance suggested a "significant interruption of a registration pathway leading to a lengthy delay ... in registration" be one of the identified circumstances. With respect to this College, the only delays experienced to-date have related to the ability of the College to deliver the clinical (practical) examinations. The College has proven itself to be very adept at maintaining all other registration requirements through remote office functionality and on-line examination opportunities.

Nonetheless, there is the potential for exam delivery issues to arise with respect to all the College's entry-to-practice examinations. This therefore is the focus the Registration Committee has used in defining the emergency circumstances.

The Ministry's guidance suggested that there should exist a "significant interruption" and this would lead to a "lengthy delay". Both of these need to be contemplated.

<u>It is recommended</u> that the emergency circumstances speak to the current or likely inability of the College (or its agent) to deliver one or more of the entry-to-practice examinations for a period of nine months or longer.

Theoretical example of use: The College offers two of its three entry-to-practice examinations on-line. Despite best efforts, this exam could be compromised either by candidates releasing information or an external organization hacking into the examination system. If this were to occur, the College would be required to redevelop the compromised examination which could take a year or longer to complete. In turn, this would create a barrier in the pathway to registration which the Council might turn to the emergency certificate to resolve temporarily.

Request of the Minister

Ministry guidance recommends that we enable the Minister to request that the College initiate registrations under this class if in their opinion emergency circumstances call for it.

<u>It is recommended</u> that this type of provision be included in the amending regulation.

Theoretical example of use: The Minister might have identified a difficulty with the health care system which they feel the emergency class could mitigate. They would then ask one or more of the Colleges to open this class.

Public Interest

Again, Ministry guidance recommends that there be a general provision that allows the opening of the class where there is a public interest to do so.

<u>It is recommended</u> that this be included such that where the Council believes other emergency circumstances exist where it is in the public interest to issue certificates in the emergency class of registration.

Theoretical example of use: External circumstances, such as a new pandemic or medical emergency, could emerge that would limit the ability of all Registrants of the College to practice resulting in shortages of ND to support their patients. Opening the emergency class might allow those NDs who are able to work to provide greater coverage to patients by utilizing individuals who become registered in the emergency class.

Please see section 1.1 of Appendix 2, a new proposed provision for the draft amended Registration Regulation.

Expiry of Emergency Class Registration

The Ministry requires that the College sets the length of time the initial certificate will be valid and allow for it to be renewable for the same period while the emergency circumstances exist.

It is recommended that the following approach be considered:

- A certificate of registration in the emergency class expires 12-months after it is issued or on March 31st, whichever occurs first, unless it is renewed.
- A renewed certificate of registration in the emergency class expires 12-months after it is issued or on March 31st, whichever occurs first, unless if is further renewed.
- Notwithstanding the preceding points, a certificate of registration in the emergency class expires six months after the date the Council of the College determines that emergency circumstances no longer exist, even where the certificate would otherwise expire before or after that time.

The logic here is that the certificate when first issued would align with all other certificates of registration for renewal. If this is not the approach taken, each certificate would be renewable on a different schedule resulting in the College operating renewals on a constant basis. In other words, if there were 150 emergency certificates issued all with different expiry dates, the process of renewing these becomes a constant endeavour and not aligned with renewals in the Inactive or General classes.

Assuming certificates are issued and aligned with the renewal period, the College would be addressing all renewals at the same time each year. The ability of individuals to renew would continue for as long as Council has not declared an end to the emergency.

Finally, as soon as the Council makes a declaration that the emergency no longer exists, expiration dates on the certificate would no longer apply. Instead, each person holding the emergency certificate would have six months to transition to the General class. This timeframe is seen as sufficient to allow the Registrants to take the necessary steps and the College (and Registration Committee) to process these class changes.

Please see section 10.2 of Appendix 2, a new proposed provision for the draft amended Registration Regulation.

Requirements for Issuance of a Certificate in the Emergency Class

The regulation must stipulate what the requirements for the issuance of a certificate of registration in the emergency class must be as in so doing, the College can identify which of the requirements for the General class do not apply. Given the suggestion that the primary potential for a significant interruption of the path to registration would relate to the College's ability to offer the examinations, this should likely be the point of departure from the General Class requirements.

This would mean that to be eligible for a certificate of registration in the emergency class, an applicant must have:

- Successfully completed a CNME-accredited program in naturopathy or have been deemed substantially equivalent through the College's PLAR program.
- Successfully completed the Ontario Jurisprudence Examination.
- Met all requirements set out in section 3 of the Registration Regulation.
- Submitted an application for registration and paid the application and initial registration fees.
- Submitted an original CPIC report.
- Provide proof of valid HCP level CPR certificate acquitted through an in-person course, unless otherwise exempted by the CEO (where a situation exists that no course is available, it allows for the applicant to appoint a CPR designate and to have six months to complete the course).
- Provide proof of professional liability insurance in the type and amount set out in the bylaws.
- Provide a photograph for use on the public register.

It is important to note that this provision has been further amended since the Registration Committee discussion. The change made was the removal of any entry-to-practice (ETP) requirements for the emergency certificate. Previously, it stated that any ETP exams available had to be completed. The reason for this change is because if the emergency class is opened for any reason other than the College's inability to deliver one or more exams, the requirements for the emergency class were the same as the General class certificate which was problematic and thus negated the emergency class.

Please see section 5.1 of Appendix 2, a new proposed provision for the draft amended Registration Regulation.

Terms, Conditions and Limitations

The Ministry requires that the Council set out any terms, conditions or limitations (TCLs) that would apply to the emergency class certificate of registration. It is recommended that the following TCLs be applied:

- The TCLs set out in section 4 of the Registration Regulation.
- That the Registrant may only practice under the direct supervision of a Registrant who holds a General Class certificate of registration in good standing.
- That the Registrant may only perform controlled acts by way of a delegation made to them in accordance with Part III of the General Regulation.
- That the Registrant may not communicate a Naturopathic Diagnosis and may not delegate any controlled acts to another person.
- That the Registrant may not supervise another person in the practice of naturopathy.
- That the Registrant may only use the title Naturopathic Doctor (Supervised) or ND (Supervised) or their French equivalents.
- That the Registrant is subject to the requirements of the Quality Assurance Regulation.
- That the Registrant must practice the profession for a minimum of 250 hours during every 12-month period that they hold a certificate of registration in the emergency class.
- That the Registrant may not transfer directly to the Inactive class of registration.

The terms, conditions and limitations will appear in more than one location in the draft amended Regulation. Please see the following sections of Appendix 2:

- Paragraph (iii) of section 4.(3).
- Section 6.(1.1).
- Section 6.(2.1).
- Section 6.(4) and 6.(5).

The Ministry requires that the College stipulate the requirements for a person who holds an emergency class of registration to transfer to another class of registration. It is recommended that this class be treated the same as a new applicant insomuch as that they cannot access the Inactive class without having ever held a General class certificate of registration.

In order for a Registrant who holds an emergency class certificate of registration to move to the General class, it is recommended that they be required to meet the following requirements:

- That an application must be made, and any application fee paid.
- That the applicant must not owe the College any fees or penalties and must not have any outstanding information due to be provided to the College.
- That the applicant must pay the difference in annual registration fees between those in the emergency class and the fees for a General class certificate of registration.
- That any orders of the Discipline Committee or Fitness to Practise Committee of the College must have been satisfied.
- That where the applicant has been found by one or more panels of the Discipline
 Committee to be incompetent or to have committed acts of professional misconduct, that
 a panel of the Registration Committee must be satisfied that it is not a matter of public
 interest that they not be issued the General Class certificate.
- That where an applicant has held the emergency class registration for more than two
 years, that they must also satisfy a panel of the Registration Committee that they have
 the knowledge, skill and judgment that would be expected or a person who holds a
 General class certificate or, have completed such additional education, training or
 examinations determined to be necessary by a panel of the Registration Committee.
- That where an applicant has held the emergency class registration for two years or less, that they must successfully complete the entry-to-practice examinations.

It should be noted that a person who holds an emergency certificate is not prohibited from working towards the General class certificate by completing any entry-to-practice examinations the College may be offering during the emergency period. This means that a person who holds an emergency certificate could transfer to the General certificate at any time and is not restricted to waiting until the emergency no longer exists, unless the emergency is due to the inability of the College to deliver entry-to-practise exams.

Please see section 10.1 of Appendix 2, a new proposed provision for the draft amended Registration Regulation.

Next Steps

In order to meet the timelines set by the Government, the following schedule has been established.

Step	Description	Due Date/Status
Initial Drafting	Prepare an initial draft of the regulation.	Complete
MOH Requirements	Review the requirements from the MOH	Complete
Revise draft	Revise the draft based on MOH requirements and tools provided by Richard.	Complete
RC Review	Discuss policy considerations with RC	Complete
Update	Incorporate any changes from RC.	Complete
Council Approval	Seek approval in principle from Council to initiate consultation.	January 25, 2023
Initiate Consultation	Start consultation of profession and stakeholders.	January 26, 2023
Consultation Ends	End of consultation period.	March 28, 2023
Council Approval	Council is presented with final draft of amending regulation.	March 29, 2023

Submission	Approved regulation is submitted to Ministry of Health.	April 1, 2023

ANALYSIS

Risk Assessment – The risk assessment is based on the document *Understanding the Risk Analysis Terminology*, a copy of which is included in the Information Items of the Consent Agenda. At the outset, it should be noted that the concept of the emergency class of registration is a risk mitigation initiative intended to ensure that any time an emergency exists that may prevent individuals from becoming registered, there is an alternative pathway to registration. That said, the risks associated with this matter are primarily strategic:

- Political there is a risk that the proposed approach may not be acceptable to the Government or may not achieve the Government's intended outcomes. Those will be identified in the consultation process and brought back to the Council when final approval is sought.
- Reputation Although relatively small, there is a risk that stakeholders may believe that the
 criteria for the emergency or the terms, conditions and limitations are not appropriate for the
 new class. Again, those will be identified in the consultation process and brought back to the
 Council when final approval is sought.

<u>Privacy Considerations</u> – There are no privacy considerations.

<u>Transparency</u> – The transparency assessment is based on the document *Understanding the College's Commitment to Transparency*, a copy of which is included in the Information Items of the Consent Agenda. Given that this initiative will play out across all 26 of the health regulatory College, there will be a high degree of information available, the approaches, while not exactly the same will have some consistency and timely, relevant information will be provided to stakeholders as part of the process.

<u>Financial Impact</u> – The process of developing and consulting on the regulation and making a final decision and submission will be borne by the College from within existing budgets; however, once approved, the addition of the emergency class will result in additional expenses in changing programming surrounding the public register and the processes for applying, issuing and renewing this class of registration.

<u>Public Interest</u> –The public interest assessment is based on the document Understanding the Public Interest, a copy of which is included in the Information Items of the Consent Agenda. Only those relevant factors have been identified and addressed. Fundamentally, the question will be whether the College has struck the correct balance between providing individuals who have not yet completed the entry-to-practise examinations a pathway to registration in an emergency situation where they otherwise would not be registered for some time and protecting the public through the application of terms, conditions and limitations that ensure public safety.

<u>EDIB</u> – The Council and the College have made a commitment to equity, diversity, inclusion and belonging (EDIB) generally and to ensuring that its policies and programs do not include any elements of racism and promote EDIB principles. There are no EDIB issues at this time; however, they will become more prominent when the processes surrounding registration are set out.

RECOMMENDATIONS

The Registration Committee is recommending that the Council approve the policy surrounding the establishment of an emergency class, along with the draft version of the Registration Regulation to allow the CEO to initiate the 60-day consultation period.

ACTION ITEMS

- A consultation document will be released on or about January 26, 2023.
- Final recommendations will come back to the Council at its March meeting.

Andrew Parr, CAE Chief Executive Officer January 18, 2023

Ministry of Health

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Ministère de la Santé

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Téléphone : 416 212-5494

December 14, 2022

MEMORANDUM TO: Registrars and Executive Directors

FROM: Dr. Karima Velji

Chief of Nursing and Professional Practice and Assistant Deputy

Minister

Ministry of Health

RE: Ontario Regulation 508/22 (Registration Requirements) made under

the Regulated Health Professions Act, 1991 (RHPA).

On October 27, 2022, the Lieutenant Governor in Council approved a regulation made under the RHPA that, amongst other things, requires health regulatory Colleges to develop regulations creating an emergency class of registration¹. Features of this class must include:

- 1. The specific emergency circumstances that will cause the class to be open for registration.
- 2. A time period of no more than a year duration, but renewable for the same period of time with no limit on the number of times they may be renewed as long as the emergency circumstance persists.
- 3. Circumstances in which a member of the emergency class must become eligible for registration in another registration class and be exempt from at least some registration requirements that would ordinarily apply to that other class of registration.

These regulations must be approved by the Lieutenant Governor in Council by August 31, 2023. To achieve this, this memo offers several considerations intended to assist in the development of your regulations whilst respecting the Colleges' authority to make these regulations.

Specifying emergency circumstances

The term 'emergency circumstance' should be broader than a declared state of emergency made under the Emergency Management and Civil Protection Act, 1990. For example, an emergency circumstance might include situations where:

- a. There is a significant interruption of a registration pathway leading to a lengthy delay for many applicants in their being registered.
- b. Where the Minister of Health requests the College to initiate registrations under this class based on her opinion that emergency circumstances call for it; or

¹ As required by section 16.3 of the Health Professions Procedural Code.

c. Any other emergency circumstance where it is in the public interest to issue emergency class of registration.

To support the regulations, it is suggested that the Colleges develop the process for determining the existence of emergency circumstances, as well as the process for determining when the emergency circumstance has resolved.

Similarly, it is suggested that Colleges consider what terms, conditions and limitations should be placed upon the holder of the emergency class of registration, if any, including any supervisory requirements.

Expiry of emergency class of registration

Colleges should determine the appropriate length of time for the initial issuance emergency class certificates (up to one year). Certificates must be renewable for the same period whilst the emergency circumstances exist.

Colleges should consider the impact on employers and the broader health system for determining when emergency class certificates terminate. If the termination occurs prior to the renewal date, consideration needs to be given to the way sufficient notice of expiry will be provided to the certificate holder and their employer to avoid disruptions in patient care.

Transition from emergency class of registration to another class

This class is another tool that may be used to mitigate the potential disruption to Ontario's supply of regulated health professionals and serves as another pathway to registration when emergency circumstances exist. Those who will be practising the profession under an emergency class of registration must be provided with a route to continue to practise under a different class of registration.

Consideration may be given to such factors as the length of time an applicant has practised under an emergency class of registration and to the demonstrated ability to practise safely. Colleges might also want to consider an active practice requirement rather than relying on the length of time a person holds the emergency class certificate.

Timelines

As noted above, these regulations are required to be approved by the Lieutenant Governor in Council by August 31, 2023. To give sufficient time to secure that approval, health regulatory Colleges should submit their proposed regulations to the Ministry on or before May 1, 2023.

We understand that this is an expedited timeline, however, given the substantial nature of these changes, we are recommending that Colleges plan for a 60-day circulation period. We acknowledge that this may necessitate the scheduling additional Council meetings to seek various approvals that are required as part of your own processes and procedures. Ministry staff will work with you as you develop your proposed regulation submissions in efforts to ensure timelines are met and that any policy issues are resolved. Please contact Allison Henry (allison.henry@ontario.ca) if you have any questions.

The ministry looks forward to working with you and we would like to thank you for ensuring that the province has the supply of safe competent providers to meet the needs of our population now and in the future.

Dr. Karima Velji

Chief of Nursing and Professional Practice and Assistant Deputy Minister

3

Proposed Amendments to the Registration Regulation Emergency Class of Registration

GENERAL

Classes of certificates

- 1. The following are prescribed as classes of certificates of registration:
 - 1. General O. Reg. 84/14, s. 1.
 - 2. Inactive O. Reg. 84/14, s. 1.
 - 3. Emergency, when the Council has declared this class to be open.

Declaration of Emergency

- 1.1 The Council may declare that emergency circumstances exist such that it is in the public interest to issue certificates of registration in the emergency class if:
 - 1. The College has been or will be unable to deliver one or more of the examinations set or approved by the Council in paragraphs 1(i)(B) and paragraph 2 of section 5.(1) of this Regulation for a period of nine months or longer;
 - 2. The Minister of Health has requested the College to initiate registrations under this class based on his or her opinion that emergency circumstances call for it; or
 - 3. Any other emergency circumstances exist where the Council is of the opinion on reasonable and probable grounds that it is in the public interest to issue emergency class certificates of registration.

Application for certificate of registration

- 2. (1) A person may apply for a certificate of registration by submitting a completed application in the form provided by the Registrar together with any applicable fees required under the bylaws and any supporting documentation requested by the Registrar. O. Reg. 84/14, s. 2 (1).
 - (2) An applicant shall be deemed not to have satisfied the registration requirements for a certificate of registration if the applicant makes a false or misleading statement or representation on or in connection with his or her application, and any certificate of registration issued to such an applicant may be revoked by the Registrar. O. Reg. 84/14, s. 2 (2).

Requirements for issuance of certificate of registration, any class

- 3. An applicant must satisfy the following requirements for the issuance of a certificate of registration of any class:
 - 1. The applicant must, at the time of application, provide written details about any of the following that relate to the applicant and, where any of the following change with respect to the applicant after submitting the application but before the issuance of a certificate, the applicant must immediately provide written details with respect to the change:
 - i. A finding of guilt for any of the following:
 - A. A criminal offence.
 - B. An offence resulting in either imprisonment or a fine greater than \$1,000.

- ii. A finding of professional misconduct, incompetence or incapacity, or any similar finding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
- iii. A current proceeding for professional misconduct, incompetence or incapacity, or any similar proceeding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
- iv. A finding of professional negligence or malpractice in any jurisdiction.
- v. A refusal by any body responsible for the regulation of a profession in any jurisdiction to register or license the applicant.
- vi. An attempt to pass a registration examination required for purposes of being licensed or certified to practise any health profession, whether in Ontario or in another jurisdiction, that has not resulted in a passing grade.
- vii. Whether the applicant was in good standing at the time he or she ceased being registered with a body responsible for the regulation of a profession in Ontario or in any other jurisdiction.
- viii. Any other event that would provide reasonable grounds for the belief that the applicant will not practise naturopathy in a safe and professional manner.
- 2. The applicant's previous conduct must afford reasonable grounds for the belief that he or she will practise naturopathy in a safe and professional manner.
- 3. The applicant must possess sufficient language proficiency, in either English or French, to be able to communicate and comprehend effectively, both orally and in writing.
- 4. The applicant must not have a physical or mental condition or disorder that would make it desirable in the interest of the public that he or she not be issued a certificate of registration unless, should the applicant be given a certificate of registration, the imposition of a term, limit or condition on that certificate is sufficient to address such concerns.
- 5. If the applicant is registered by any body responsible for the regulation of any other profession in Ontario or of any profession in any other jurisdiction, the applicant's registration must be in good standing and must continue to be in good standing until such time as the applicant is issued a certificate of registration.
- If the applicant ceased being registered with any body responsible for the regulation of a profession in Ontario or in any other jurisdiction, the applicant must have been in good standing at the time he or she ceased being registered.
- 7. The applicant must provide proof of professional liability insurance coverage in the amount and in the form required under the by-laws. O. Reg. 84/14, s. 3.

Terms, conditions and limitations of every certificate

- 4. Every certificate of registration is subject to the following terms, conditions and limitations:
 - 1. The member shall provide the College with written details about any of the following that relate to the member no later than 30 days after the member becomes aware of it occurring:
 - A finding of professional misconduct, incompetence or incapacity, or any similar finding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - ii. A current proceeding for professional misconduct, incompetence or incapacity, or any similar proceeding, in relation to another regulated profession in Ontario or to any regulated profession in another jurisdiction.
 - iii. A finding of professional negligence or malpractice in any jurisdiction.

- iv. A refusal by any body responsible for the regulation of a profession in any jurisdiction to register or license the member.
- v. An attempt to pass a registration examination required for purposes of being licensed or certified to practise any health profession, whether in Ontario or in another jurisdiction, that has not resulted in a passing grade.
- vi. Whether the member was in good standing at the time he or she ceased being registered with a body responsible for the regulation of a profession in Ontario or in any other jurisdiction.
- vii. Any other event that would provide reasonable grounds for the belief that the member will not practise naturopathy in a safe and professional manner.
- 2. The member shall provide the College with written details about any finding of guilt relating to any offence in any jurisdiction as soon as possible after receiving notice of the finding, but not later than 30 days after receiving the notice.
- 3. A member shall only use titles and abbreviations of titles respecting the profession in accordance with the following:
 - i. A member who holds a General certificate of registration may only use one or more of the titles "Naturopath", "Naturopathic Doctor", "Naturopathe" and "Docteur en naturopathie", and may only use the abbreviation "ND" for an English title and "DN" for a French title.
 - ii. A member who holds an Inactive certificate of registration may only use one or more of the titles "Naturopath (Inactive)", "Naturopathic Doctor (Inactive)", "Naturopathe (Inactif)" and "Docteur en naturopathie (Inactif)" and may only use the abbreviation "ND (Inactive)" for an English title and "DN (Inactif)" for a French title.
 - iii. A member who holds an Emergency certificate of registration may only use one or more of the titles "Naturopath (Supervised), "Naturopathic Doctor (Supervised) "Naturopathe (Supervisé)" and "Docteur en naturopathie (Supervisé)" and may only use the abbreviation "ND (Supervised)" for an English title and "DN (Supervisé)" for a French title.
- 4. The member shall clearly display his or her original certificate of registration issued by the College at his or her principal place of practice.
- 5. The member shall maintain professional liability insurance coverage in the amount and in the form required under the by-laws.
- 6. The member shall provide the College with written details within two days of the member becoming aware that he or she does not have the professional liability insurance that he or she is required to have under the by-laws.
- 7. Immediately before the member's resignation, or the suspension, revocation, expiration or other termination of the member's certificate of registration, the member shall return his or her certificate of registration to the Registrar. O. Reg. 84/14, s. 4.
- 5.(1) The following are non-exemptible registration requirements for a General certificate of registration:
 - 1. The applicant must have,
 - i. successfully completed,
 - A. a program in naturopathy that is accredited by the Council on Naturopathic Medical Education or by another accrediting body that has been approved by Council, and
 - B. such registration examinations that may be approved by Council and administered by a body approved by Council, or

- ii successfully completed a program, other than one described in sub-subparagraph i A, together with an assessment, employing a method approved by Council, that evidences, in the opinion of a panel of the Registration Committee, that the applicant has the knowledge, skills and judgment equivalent to those of a person who has successfully completed a program and the examinations referred to in subparagraph i.
- 2. The applicant must have successfully completed the clinical examinations that are set or approved by Council.
- 3. The applicant must have successfully completed the jurisprudence examination that is set or approved by Council. O. Reg. 84/14, s. 5 (
- (2) Except in the case of an applicant to whom subsection 7 (1) applies, where the applicant has not submitted his or her application for a General certificate of registration and completed the requirements set out in sub-subparagraph 1 i B, where applicable, and paragraph 2 of subsection (1) within the two years immediately following the date that the applicant successfully completed the program referred to in paragraph 1 of subsection (1), the applicant must,
 - (a) have practised the profession for at least 750 hours during the three-year period of time that immediately preceded the date that the applicant submitted his or her application; or
 - (b) have successfully completed such further education or training as is approved by a panel of the Registration Committee. O. Reg. 84/14, s. 5 (2).
- (3) The requirement in paragraph 3 of subsection (1) shall not be considered to be met unless the applicant met that requirement within the 24-month period preceding the date on which he or she submitted his or her application for registration. O. Reg. 84/14, s. 5 (3).
- (4) Subject to subsection (5), the requirements in sub-subparagraph 1 i B, where applicable, and paragraph 2 of subsection (1) are not considered to have been met unless the applicant,
 - (a) sits his or her final attempt at the examinations within the 24-month period preceding the date on which he or she submitted his or her application for registration unless a panel of the Registration Committee is satisfied that exceptional circumstances prevented the applicant from taking the registration examinations within this period; and
 - (b) successfully completed the examinations,
 - (i) within two attempts, or
 - (ii) on a third attempt after having first successfully completed the further education or training, or combination of education and training, if any, required by a panel of the Registration Committee. O. Reg. 84/14, s. 5 (4).
- (5) Where, by virtue of subsection (4), an applicant is not considered to have met the requirements in sub-subparagraph 1 i B, where applicable, and paragraph 2 of subsection (1), the successful completion of the examinations on any further attempt will not be considered as satisfying the requirements in sub-subparagraph 1 i B, where applicable, and paragraph 2 of subsection (1) unless, before sitting the examinations,
 - (a) the applicant completes another program mentioned in paragraph 1 of subsection (1); or
 - (b) a panel of the Registration Committee is satisfied that exceptional circumstances exist that justify the applicant being excused from the requirement in clause (a). O. Reg. 84/14, s. 5 (5).

Emergency class, registration requirements

- 5.1(1) The following are non-exemptible registration requirements for an Emergency certificate of registration:
 - 1. The applicant must have,
 - successfully completed a program in naturopathy that is accredited by the Council
 on Naturopathic Medical Education or by another accrediting body that has been
 approved by Council, or
 - ii. successfully completed a program, other than one described in sub-subparagraph i A, together with an assessment, employing a method approved by Council, that evidences, in the opinion of a panel of the Registration Committee, that the applicant has the knowledge, skills and judgment equivalent to those of a person who has successfully completed a program and the examinations referred to in subparagraph i.
 - 2. The applicant must have successfully completed the jurisprudence examination that is set or approved by Council within the preceding two years of the date of application.

General and Emergency class, conditions, etc., of certificate

- 6. (1) It is a term, condition and limitation of every General certificate of registration that the member shall practise the profession a minimum of 750 hours during every three-year period, with the first three-year period beginning on the day that the member is issued a General certificate of registration, and each subsequent three-year period beginning on the first anniversary of the commencement of the previous period. O. Reg. 84/14, s. 6 (1).
- 6.(1.1) It is a term, condition and limitation of every Emergency certificate of registration that the member shall practice the profession a minimum of 250 hours during each 12-month period that they hold registration in the Emergency class.
- (2) If a member fails to meet the condition described in subsection (1), the Registrar shall refer the member to the Quality Assurance Committee for a peer and practice assessment unless the member.
 - a) has successfully completed a refresher program approved by the Registration Committee;
 - b) has given the College a written undertaking not to practise the profession that is acceptable to the Registrar and with which the member is in compliance; or
 - (c) has resigned his or her General certificate of registration and applied for and received an Inactive certificate of registration. O. Reg. 84/14, s. 6 (2).
- (2.1) If a member who holds an Emergency certificate of registration fails to meet the condition described in subsection (1.1), the Registrar shall refer the member to the Quality Assurance Committee for a peer and practice assessment unless the member,
 - (a) has successfully completed a refresher program approved by the Registration Committee; or
 - (b) has resigned his or her Emergency certificate of registration.
- (3) It is a term, condition and limitation of the General certificate of registration of a member who has given an undertaking described in clause (2) (b) that, if more than two years have passed since giving the undertaking, the member may not resume practising the profession until he or she,
 - (a) satisfies a panel of the Registration Committee that he or she possesses the current knowledge, skill and judgment relating to the practice of the profession that would be expected of a member holding a General certificate of registration; or

- (b) has successfully completed such additional education or training requirements determined to be necessary by a panel of the Registration Committee. O. Reg. 84/14, s. 6 (3).
- (4) It is a term, condition and limitation of the General and Emergency certificate of registration that a member holds and maintains a valid (granted within the prior two years) cardiopulmonary resuscitation certification at the health care provider level.
- (5) The following additional terms, conditions and limitations apply to a member who holds the Emergency certificate of registration.
 - (a) The member may only practice under the direct supervision of another member who holds a General certificate of registration without any terms, conditions or limitations which restrict the member from engaging in direct patient care,
 - (b) The member is not authorized to perform the controlled acts set out in paragraphs 3, 5, and 7 of section 4(1) of the Act,
 - (c) The member is not authorized to perform acupuncture as authorized under section 8(2) of the Controlled Acts Regulation (Ontario Regulation 107/96) made under the *Regulated Health Professions Act, 1991*, unless its performance is delegated by a Registered Acupuncturist or a member of the College of Physicians and Surgeons.
 - (d) The member is not authorized to perform the controlled acts set out in paragraphs 1, 2, 4 and 6 of section 4(1) of the Act unless they have received a delegation under Part III of the General Regulation which is Ontario Regulation 168/15,
 - (e) The member may only accept a delegation under paragraph (d) above if the delegation is made by an authorized member of the College or a member of the College of Physicians and Surgeons of Ontario or a member of the College of Nurses of Ontario in the extended class.
 - (f) The member may not further delegate any controlled acts delegated to them under paragraph (d) above, and
 - (g) The member may not supervise another person in the practice of the profession.

Labour mobility, General class

- 7. (1) Where section 22.18 of the Health Professions Procedural Code applies to an applicant for a General certificate of registration, the applicant is deemed to have met the requirements set out in paragraphs 1 and 2 of subsection 5 (1) of this Regulation. O. Reg. 84/14, s. 7 (1).
 - (2) It is a non-exemptible registration requirement that an applicant referred to in subsection (1) provide one or more certificates or letters or other evidence satisfactory to the Registrar or a panel of the Registration Committee confirming that the applicant is in good standing as a naturopath in every jurisdiction where the applicant holds an out-of-province certificate. O. Reg. 84/14, s. 7 (2).
 - (3) If an applicant to whom subsection (1) applies is unable to satisfy the Registrar or a panel of the Registration Committee that the applicant practised the profession of naturopathy to the extent that would be permitted by a General certificate of registration at any time in the three years immediately before the date of that applicant's application, it is a non-exemptible requirement that the applicant must meet any further requirement to undertake, obtain or undergo material additional training, experience, examinations or assessments that may be specified by a panel of the Registration Committee. O. Reg. 84/14, s. 7 (3).

- (4) An applicant referred to in subsection (1) is deemed to have met the requirement of paragraph 3 of section 3 if the requirements for the issuance of the out-of-province certificate included language proficiency requirements equivalent to those required by that paragraph. O. Reg. 84/14, s. 7 (4).
- (5) Despite subsection (1), an applicant is not deemed to have met a requirement if that requirement is described in subsection 22.18 (3) of the Health Professions Procedural Code. O. Reg. 84/14, s. 7 (5).

Inactive class, registration requirements

- 8. The following are non-exemptible registration requirements for an Inactive certificate of registration:
 - 1. The applicant must be a member holding a General certificate of registration.
 - 2. The applicant must provide an undertaking to the College in a form satisfactory to the Registrar in which the applicant undertakes to,
 - i. abstain from practising the profession in Ontario, and
 - ii. explain that he or she holds an inactive status of registration whenever he or she uses a title or abbreviation set out in paragraph 3 of section 4.
 - 3. The applicant must not be in default of any fee, penalty or other amount owing to the College.
 - 4. The applicant must have provided the College with any information that it has required of the applicant.
 - 5. The applicant must be in compliance with,
 - any outstanding requirements or orders issued by a panel of the Inquiries, Complaints and Reports Committee,
 - ii. any outstanding orders issued by a panel of the Discipline Committee or Fitness to Practise Committee,
 - iii. any outstanding orders of Council or the Executive Committee,
 - iv. any requirement to participate in specified continuing education or remediation programs that was issued by the Quality Assurance Committee, and
 - v. any terms, conditions or limitations that were placed on the applicant's certificate of registration as a result of a direction of the Quality Assurance Committee. O. Reg. 84/14, s. 8.

Inactive class, condition, etc., of certificate

9. It is an additional term, condition and limitation of every Inactive certificate of registration that the member shall not practise the profession. O. Reg. 84/14, s. 9.

Moving from Inactive to General certificate

- 10. (1) The following rules apply where a member who holds an Inactive certificate of registration and wishes to be issued the General certificate of registration that he or she had previously held:
 - 1. An application must be made to the Registrar.
 - 2. The member shall pay the annual registration fee required under the by-laws for a General certificate of registration.
 - 3. The member must pay any other applicable fee required under the by-laws.
 - 4. The member must pay any penalty or other amount owed to the College.

- 5. The member must provide the College with any information that it has required of the member.
- 6. A member who has held the Inactive certificate of registration for more than two years preceding his or her application under this section shall only be entitled to have a General certificate of registration issued if he or she,
 - satisfies a panel of the Registration Committee that he or she possesses the current knowledge, skill and judgment relating to the practice of the profession that would be expected of a member holding a General certificate of registration, or
 - ii. has successfully completed such additional education or training requirements determined to be necessary by a panel of the Registration Committee.
- 7. The member must provide evidence satisfactory to the Registrar that the applicant will have professional liability insurance in the amount and in the form as required by the by-laws for a member holding a General certificate of registration as of the anticipated date for the issuance of his or her General certificate of registration. O. Reg. 84/14, s. 10 (1).
- (2) Where, at the time of applying for an Inactive certificate of registration, a member referred to in paragraph 6 of subsection (1) was subject to a written undertaking as described in clause 6 (2) (b), the two-year period referred to in paragraph 6 of subsection (1) will be considered to have started on the day on which the written undertaking became effective. O. Reg. 84/14, s. 10 (2).

Moving from the Emergency to General certificate

- 10.1(1) The following rules apply where a member who holds an Emergency certificate of registration and wishes to be issued the General certificate of registration:
 - 1. An application must be made to the Registrar.
 - 2. The member shall pay the annual registration fee required under the by-laws for a General certificate of registration.
 - 3. The member must pay any other applicable fee required under the by-laws.
 - 4. The member must pay any penalty or other amount owed to the College.
 - 5. The member must provide the College with any information that it has required of the member.
 - 6. The member must be in compliance with any outstanding orders of the Discipline Committee or Fitness to Practise Committee.
 - 7. Where a member has been found by one or more panels of the Discipline Committee to be incompetent or to have committed acts of professional misconduct, a panel of the Registration Committee must be satisfied that it is not contrary to section 3 of the regulation.
 - 8. A member who has held the Emergency certificate of registration for more than two years preceding his or her application under this section shall only be entitled to have a General certificate of registration issued if he or she,
 - satisfies a panel of the Registration Committee that he or she possesses the current knowledge, skill and judgment relating to the practice of the profession that would be expected of a member holding a General certificate of registration, or

- ii. has successfully completed such additional education, training or examination requirements determined to be necessary by a panel of the Registration Committee.
- 9. A member who has held the Emergency certificate of registration for two years or less preceding his or her application under this section shall only be entitled to have a General certificate of registration issued if he or she, successfully completes examinations set or approved by the Council under paragraphs (1)(i)(B) and 2 of section 5.(1) subject to the same conditions set out in paragraphs 4(b) and (5) of section 5.(1).
- 10. The member must provide evidence satisfactory to the Registrar that the applicant will have professional liability insurance in the amount and in the form as required by the by-laws for a member holding a General certificate of registration as of the anticipated date for the issuance of his or her General certificate of registration.

Expiry of an Emergency Certificate

- 10.2 (1) Unless stated otherwise on the certificate, an emergency certificate of registration expires March 31st following the date it is issued, unless otherwise renewed.
 - (2) Unless otherwise stated on the certificate, a renewed emergency certificate of registration expires on March 31st following the date it was issued, unless otherwise renewed
 - (3) Despite subsections (1) and (2), an emergency certificate of registration expires six months after the date the Council of the College determines that emergency circumstances no longer exist even where the certificate would otherwise expire before or after that time.

Examinations

11. Where the clinical examinations that are a requirement of paragraph 2 of subsection 5 (1) are set by Council, the examinations shall be offered at least twice each year. O. Reg. 84/14, s. 11.

Appeal

- 12(1) An applicant who fails a clinical examination that has been set by Council may appeal the results of the examination to the Examination Appeal Committee and the appeal will be determined by a panel of that Committee. O. Reg. 84/14, s. 12 (1).
- (2) An appeal under subsection (1) shall be limited solely to the question of whether the process followed in sitting the clinical examination was appropriate. O. Reg. 84/14, s. 12 (2).
- (3) Where an appeal under subsection (1) is successful the results of the clinical examination shall be nullified and the examination does not count against the applicant for any purpose, including the application of subsection 5 (4). O. Reg. 84/14, s. 12 (3).

SUSPENSIONS, REVOCATIONS AND REINSTATEMENTS

Failure to provide information

13.(1) If a member fails to provide the College with information about the member as required under the by-laws,

- (a) the Registrar may give the member notice of intention to suspend the member's certificate of registration; and
- (b) the Registrar may suspend the member's certificate of registration if the member fails to provide the information within 30 days after the notice is given. O. Reg. 84/14, s. 13 (1).
- (2) If the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that the former member,
 - (a) has given the required information to the College;
 - (b) has paid any fees required under the by-laws for lifting the suspension;
 - (c) has paid any other outstanding fees, penalties or other amounts owing to the College;
 - (d) will be in compliance, as of the anticipated date on which the suspension is to be lifted, with,
 - i. any outstanding requirements or orders issued by a panel of the Inquiries, Complaints and Reports Committee,
 - ii. any outstanding orders issued by a panel of the Discipline Committee or Fitness to Practise Committee,
 - iii. any outstanding orders of Council or the Executive Committee,
 - iv. any requirement to participate in specified continuing education or remediation programs that was issued by the Quality Assurance Committee, and
 - v. any terms, conditions or limitations that were placed on the member's certificate of registration as a result of a direction of the Quality Assurance Committee; and
 - (e) has provided proof of professional liability insurance coverage in the amount and in the form required under the by-laws. O. Reg. 84/14, s. 13 (2).

Failure to be insured

- 14.(1) The Registrar may immediately suspend a member's certificate of registration if the Registrar becomes aware that the member is not in compliance with the condition set out in paragraph 5 of section 4. O. Reg. 84/14, s. 14 (1).
- (2) If the Registrar suspends a member's certificate of registration under subsection (1), the Registrar shall lift the suspension upon being satisfied that the former member,
 - (a) has professional liability insurance coverage in the amount and in the form required under the by-laws;
 - (b) has paid any fees required under the by-laws for lifting the suspension;
 - (c) has paid any other outstanding fees, penalties or other amounts owing to the College;
 - (d) will be in compliance, as of the anticipated date on which the suspension is to be lifted, with,
 - i. any outstanding requirements or orders issued by a panel of the Inquiries, Complaints and Reports Committee,
 - ii. any outstanding orders issued by a panel of the Discipline Committee or Fitness to Practise Committee,
 - iii. any outstanding orders of Council or the Executive Committee,
 - iv. any requirement to participate in specified continuing education or remediation programs that was issued by the Quality Assurance Committee, and
 - v. any terms, conditions or limitations that were placed on the member's certificate of registration as a result of a direction of the Quality Assurance Committee; and
 - (e) has provided proof of professional liability insurance coverage in the amount and in the form required under the by-laws. O. Reg. 84/14, s. 14 (2).

Suspension for failure to pay fees

- 15. If the Registrar suspends the member's certificate of registration under section 24 of the Health Professions Procedural Code for failing to pay a fee, the Registrar shall lift the suspension upon being satisfied that the former member,
 - (a) has paid the fee in question;
 - (b) has paid any fees required under the by-laws for lifting the suspension;
 - (c) has paid any other outstanding fees, penalties or other amounts owing to the College;
 - (d) will be in compliance, as of the anticipated date on which the suspension is to be lifted, with.
 - i. any outstanding requirements or orders issued by a panel of the Inquiries, Complaints and Reports Committee,
 - ii. any outstanding orders issued by a panel of the Discipline Committee or Fitness to Practise Committee,
 - iii. any outstanding orders of Council or the Executive Committee,
 - iv. any requirement to participate in specified continuing education or remediation programs that was issued by the Quality Assurance Committee, and
 - v. any terms, conditions or limitations that were placed on the applicant's certificate of registration as a result of a direction of the Quality Assurance Committee; and
 - (e) has provided proof of professional liability insurance coverage in the amount and in the form required under the by-laws. O. Reg. 84/14, s. 15.

Lifting of certain suspensions

- 16. If the Registrar suspends a member's certificate of registration under section 13 or 14 of this Regulation or under section 24 of the Health Professions Procedural Code and the suspension has not been lifted, the certificate is revoked on the day that is two years after the day it was suspended. O. Reg. 84/14, s. 16.
- 17. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION). O. Reg. 84/14, s. 17.

Strategic Plan

APRIL 1, 2023 TO MARCH 31, 2027

Council Meeting January 25, 2023 Page 101 of 164

INTRODUCTION

In the fall of 2022, the Council of the College of Naturopaths of Ontario undertook a strategic planning exercise to set the direction of the College for the following four years. The planning was undertaken as a meeting of a Committee of the Whole Council, over three half-day meetings held in November and December 2022, with the final report being presented to the Council for approval and adoption.

BACKGROUND

In 2021, the Governance Policy Review Committee (GPRC), a Committee of the Council, undertook a review of the Council's Ends Statements and Ends Priority Policies with an eye to recommending any changes to the Council. The GPRC noted that the Ends Policies had been prepared in early 2016 and although they had had undergone minor edits since that time, they remained substantially unchanged. The GPRC noted for the Council that it was a best practice to undertake strategic planning every three to five years and recommended that the Council do so in 2022. The Council accepted the recommendation of the GPRC and charged the Chief Executive Officer (CEO) with the task of developing and implementing an appropriate planning opportunity for the Council.

The College engaged Carolyn Everson of The Everson Company, a consultant with extensive experience in supporting strategic planning initiatives in the not-for-profit section and in particular, with health regulatory Colleges. Ms. Everson with the support of the CEO set out a strategic planning process (Appendix 1) that was presented to and adopted by the Council.

RESEARCH

As part of the preparation process, advance work was undertaken by the senior staff of the College to support the Council's deliberations. This work included the creation of a SWOT (Strengths, Weaknesses, Opportunities and Threats) Analysis (Appendix 2), a PESTLE (Political, Economic, Social, Technological, Legal and Environmental) Analysis (Appendix 3), and an Issue Analysis (Appendix 4) all of which were presented to and discussed by the Council at its first planning meeting.

Ms. Everson also interviewed key stakeholders of the College to talk about the Council's current objectives, its overall performance and issues that lay ahead. A detailed report of the outcome of these interviews (Appendix 5) was provided to the Council. At the same time, the College invited all Registrants to participate in a strategic planning survey and although only a small number of Registrants participated, this information was also presented to the Council (Appendix 6).

MANDATE

During the Council's first planning meeting, particular attention was paid to the mandate of the College as set out in the *Regulated Health Professions Act, 1991* and in Schedule 2 of that statute, the Health Professions Procedural Code (Appendix 7). The reason for this focus was, in part, the emphasis placed by one of the College's key stakeholders on the importance of the Council understanding the College's mandate and remaining 'inside the box'. The Council noted that the mandate as set out in statute provided a very clear set of parameters within which the College should be working, and any objectives set by the Council must exist within these parameters.

KEY ISSUES AND CHALLENGES

Throughout the materials presented to the Council, a series of themes emerged that articulated what can be considered as the key issues and challenges being faced by the College and its Council.

The first theme related to engaging its system partners, which includes the public, Registrants, naturopathic associations, naturopathic educators, other naturopathic regulatory bodies, and government(s). This engagement needs to focus on two key elements:

- Each system partner needs to focus on their role and know the role of their partners. As such,
 - Questions about expanding the scope of practice of the profession are association matters and should look towards focusing on national alignment. As the regulator, the College's role is secondary and relates to how to adjust the regulatory model to accommodate any change in scope.
 - Good regulation and public protection with the intent of ensuring that we have the right regulatory model in place to maximize public safety while not being unduly hard on the profession is the focus of the College.
 - Best practices and professional innovation area the focus of the educators.
- System partners must collaborate and educate to improve both regulation and the profession.

The second theme that emerged related to the College being a leader in proactive regulation. This includes the importance of several principles:

- Being proactive as an organization and not waiting for things to happen.
- Using what we see and learn in performing our role to the benefit of Ontarians and the profession.
- Finding ways to mitigate risks that can be identified through College programming and in dialogue with our system partners.
- Using our strengths to look ahead to what is likely to emerge in Ontario based on what we see happening in other Canadian and international jurisdictions.
- Maintaining fiscal responsibility and the reputation of the College.
- Incorporating diversity, equity, inclusion and belonging processes and assessing its impact on our work.

THE MISSION

The first task of the strategic planning process undertaken by the Council was to establish the College's mission statement. A mission statement is intended to be an intersection of three areas:

- 1. Why do we exist?
- 2. What is our purpose?
- 3. What makes us unique?

Since the College has been in existence for some time, the Council considered the current mission statement:

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

Within this statement, Council members could see why the College exists and its purpose; however, it was of the view that there was no indication of what makes the College unique. Looking back to the feedback from stakeholders, the themes that had emerged and the on-going work of the Council, the single element that the Council believed made the College unique was a focus on proactivity. This is in part based on the work of the various committees of the College and efforts towards moving towards a risk-based regulatory framework.

The amended mission statement adopted by the Council was:

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

THE VISION

The Council's next task was to articulate its vision for the organization. It was noted that the vision statement is based on the description of the ideal destination of the organization and, as such, it should be both aspirational and inspirational.

Again, the Council looked back to the vision that had been in place for some time for its own inspiration: Public confidence in the practise of Naturopathic Medicine through excellence in regulation.

The Council's discussion focused in three general areas. The first was public confidence as opposed to trust and which idea represented a more meaningful and understandable ideal. The second was on the use of naturopathic medicine, noting that the College does not regulate naturopathic medicine but rather, it regulates naturopathic doctors. The College's influence over the former is indirect, whereas our role in the regulation of naturopathic doctors is far more direct. Finally, it was noted that excellence is a rather nebulous word and as such, there may be many ideas of what success in this area might look like. Every individual's idea of what constitutes excellence may vary from another's perspective whereas effective regulation is somewhat more quantifiable.

The amended vision statement adopted by the Council was:

Trust in naturopathic doctors through effective regulation.

VALUES

The Council then turned its attention to its values and the values it would establish for the College. Despite the current values having been set some time ago, the Council was generally of the opinion that they remained as true today as when they were first created. It was noted that a couple of the values were closely related and might be combined. It was also felt that principles surrounding equity, diversity, inclusion, and belonging were absent and might be added.

At the request of the Council, the College staff reviewed and brought back to the Council the following amended values statement which was adopted by the Council.

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;
- Be courageous, bold, and innovative.

STRATEGIC OBJECTIVES

Having completed its review of and amendments to the foundational concepts of mission, vision and values, the Council turned its attention to the future and the objectives of the College. As a point of reference, the Council noted that it currently has five strategic objectives and had identified 20 strategic priorities among these objectives. It was noted that the College itself is relatively small in size, as is the profession although the profession's general scope and access to controlled acts was closer to midrange.

It was at this point that the mandate of the College as set out in statute becomes quite relevant to the discussions. The Council's first priority, whether it is stated or unstated, is to fulfil the mandate set out in the legislation. As a small organization, it must recognize that this priority consumes the majority of financial and human resources available to the organization.

As such, the Council affirmed that when it comes to strategic objectives and priorities, they had to be achievable and within the timeframe of the strategic plan and the priorities had to be real priorities.

The Council returned to the themes it had identified as having emerged from the stakeholder discussions, the various analyses that had been undertaken and from those two sought to craft its strategic objectives.

As noted above, the first theme spoke of engagement, collaboration, meeting identified roles, being proactive, mitigating risk and using the knowledge gleaned from our regulatory activities to benefit all, that is, both the public and the profession. From this theme, the Council crafted the first of its strategic objectives:

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.

The second theme that had emerged spoke of being leaders, maintaining the reputation, streamlining processes and a diversity, equity, inclusion and belonging focus. From this theme, the Council crafted the second of its strategic objectives:

Naturopathic doctors are trusted because they are effectively regulated.

STRATEGIC PRIORITIES

Early on in the planning process, the Council discussed its governance model and how that impacts the strategic planning process. It is important to note that the Council operates on a policy governance model where Council is guided by its policies and, through them, delegates all operational activities to the Chief Executive Officer. Stated in another way, the role of the Council is to set the objectives or ends; however, it is not permitted to set the way or means by which the CEO gets the organization to meet those objectives.

The use of this model by the Council means that its strategic planning must set objective priorities without dictating the details of the College's operations. However, in a very practical sense, if the methods by which the CEO might accomplish the objectives are not palatable to the Council, the Council then needs to provide greater clarity, either through changes to its objectives and priorities or through other means (generally, this means establishing limitations on the CEO in policy).

This meant that for the purposes of setting objectives and priorities, it was helpful for the Council to be able to understand how the CEO interprets the statements from the Council. This is where strategic planning becomes a collaborative effort between the Council and its CEO (and staff).

In this section, the strategic priorities articulated by the Council will be set out. In the next section, the initiatives that the CEO and senior staff identified as supporting these priorities will be articulated. This is not to replace what will come next from the CEO, namely an Operational Plan, but rather to provide context to the Council's planning outcomes.

As noted in the preceding section, the Council has set two strategic objectives for the College. Each of these has several related priorities.

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 it role.

Related priorities:

- The College engages its system partners to further their understanding and trust in the College and the profession.
- The College engages its Registrants and the public to further their understanding and trust in the College and the profession.
- The College relies on a risk-based approach to proactively regulate the profession.

Objective 2: Related priorities:

Naturopathic Doctors are trusted because they are effectively regulated.

- Applicants are evaluated based on their competence and evaluations are relevant, fair, objective, impartial and free of bias and discrimination.
- Registrants and the public are aware of and adhere to the standards by which NDs are governed.
- Registrants are held accountable for their decisions and actions.
- Registrants maintain their competence as a means of assuring the public that they will receive safe, competent, ethical care.
- The College examines the regulatory model to maximize the public protection benefit to Ontarians.

These strategic objectives and related priorities will be articulated in policy in the Council's Ends Statements.

FROM PLANNING TO OPERATIONS

For both the Council and interested readers (the public, government, Registrants, associations, educational institutions etc.), the question becomes with these new objectives and priorities, what activities will the College be initiating in the coming months and years and which, if any, will end or be changed.

While both human and financial resources have a tremendous impact on these decisions, the following initiatives formed a part of the Council's understanding as it settled on its new objectives and priorities.

Objective 1

This objective speaks to engaging system partners to foster an understanding of and trust in the ability of the College to perform its role. The following activities are anticipated to be a part of the task of meeting this objective:

 While the College and its Council has put resources into one-on-one stakeholder engagement, this process has had its ebbs and flows. The College will put a renewed effort into supporting these engagement process.

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- Although one-on-one stakeholder engagement is important, there becomes a point at which
 engaging all stakeholders in a single process fosters a broader understanding of roles, issues and
 concerns. In this light, the College will foster the development of a System Partners Forum to
 bring everyone together and in focus.
- The College has been working on engagement of Registrants and the public for some time. One
 initiative, the Mentoring Education Program (MEP) has proven less effective than desired while
 another initiative, the In Conversation With (ICW) serious has proven highly effective in bringing
 Registrants and the public to the conversation and engaging in dialogue about the ends and
 means of regulatory initiatives. ICW will continue while the MEP will be wound down.
- The College has been committed for some time to developing a risk-based approach to regulation. The purpose of this has been and remains to use our existing process to identify risks to the public and to work with stakeholders and the profession to mitigate these risks. The College's efforts in this area will continue and with greater focus:
 - Risk-based data collected by the College through its regulatory processes will be used to augment the Quality Assurance Program.
 - A new regulatory education program will be developed that will focus on providing education to the profession and interested members of the public on critical health care issues, the regulations and the standards of practice.
 - Finally, our regulatory guidance program will be augmented to provide greater outbound information rather than simply responding to telephone calls and emails received.

Objective 2

The second objective and related priorities set out by the Council speak to the public having trust in Naturopathic Doctors, in part because they are effectively regulated. In part, the focus is on effective regulation; however, it is also about communicating the effectiveness of our regulatory model to the public and stakeholders. The following activities are anticipated to be a part of the task of meeting this objective:

- All regulatory processes need to be relevant, fair, objective, impartial and free of bias. While the
 College will be incorporating a diversity, equity, inclusion and belonging review process for its
 regulations, standards, policies and procedures, particular attention will be paid to the
 examination process with the desired outcome of streamlining these examinations to remove
 any unnecessary burden and duplication.
- Ensuring the public and Registrants are aware of the regulatory requirements and are in a
 position to incorporate those into practice in a practical way will be the focus not only of the
 ICW series, which is continuing, but also of the new educational programming noted above.
- The largest effort in this area will be focused on examining our current regulatory model to maximize the public protection for Ontarians. During the process of establishing the College, the emphasis was placed on minimum specifications, that is, getting those elements of the regulatory model that were necessary to allow for proclamation of the *Naturopathy Act, 2007*. A great deal of effort could not be placed on considering alternatives to such things as the classes of registration or the ability to specialize. Given what we have learned, both from other Colleges and from our own experience, now is the time to start contemplating ways to both augment the benefit of regulation while eliminating any unnecessary burden placed on the profession.

NEXT STEPS

With the Council adopting both this strategic plan and the necessary policy (Ends Statement Policy), the next steps for the College is to set out a three year operational plan that sets out how these objectives and priorities will be met as well as three year operating and capital budgets that support these initiatives and the continued operation of the College.



COUNCIL OF THE COLLEGE STRATEGIC PLANNING 2022

Phase 1 – Project Initiation (May 2022)

- Identification of necessary background information
- College to provide information to consultant

Phase 2 – Environmental Scan (May 2022)

- College senior staff create SWOT analysis
- College senor staff create PESTLE analysis
- Identification of key issues surrounding
 - Evolution in self-regulation, including risk-based regulation and changes to the RHPA.
 - Opportunity to strengthen existing relations and form new ones.
 - o Implications of governance reform.
 - o Issues and opportunities related to transparency, accountability, and public trust.
 - o Implications of performance measures expectations.
 - o Regulatory implications of emerging trends/practice in naturopathy.

Phase 3 – Stakeholder Interviews (June 2022)

- Consultant will develop interview guide based on key themes identified in environmental scan
- Consultant will meet with/interview stakeholders (OAND, CCNM, MOH, OFC).
- Information collected will be reviewed with senior staff.
- Consultant and senior staff will develop Strategic Planning Survey.

Phase 4 – Registrant & Public Consultation (July 2022)

- Registrants will be invited to complete the on-line SPS.
- Public Representatives (volunteers) and members of the public will be invited to complete the on-line SPS.
- CAG members can be included in survey (no meeting until the fall of 2022).

Phase 5 – Report to Council (August 2022)

- CEO, with support from the Consultant, will develop a report on all work done to do, including environmental scan, learnings from stakeholder interviews and survey results.
- Will be shared with the Council in preparation for Council Planning Meetings.

Phase 6 – Council Planning Meetings (September/October 2022)

- A series of 3-4 half-day meetings of the Council will be held in September and October where Council will discuss the key issues presented.
- Council will debate and establish its priorities and desired outcomes for coming 5 years.

150 John St., 10th Floor, Toronto, ON M5V 3E3 T 416.583.6010 F 416.583.6011 collegeofnaturopaths.on.ca Council may also discuss various strategies to support the achievement of the outcomes. These will both inform the CEO on possible approaches as well as identify any potential changes to the Executive Limitations Policies.

Phase 7 – Development of Strategic Plan and revised Ends Policies (October/November 2022)

- Based on the outcomes of the meetings, the Consultant with the support of the CEO will develop draft revisions to the ENDS statements and ENDS Priorities policies of the Council.
 - These will be presented to the Governance Policy Review Committee at its meeting in early November 2022 for initial review and feedback.
- Based on the outcomes of the meetings, the CEO with the support of the consultant will develop a draft formal Strategic Plan.

Phase 8 – Council sets Strategic Directions (November 30, 2022)

- At its meeting on November 30, 2022, the Council will be asked to formally approve:
 - The ENDS Statements
 - The ENDS Priorities
 - The 5-Year Strategic Plan.

Phase 9 – Turning Planning into Action (December 2022/January 2023)

- Senior staff of the College will develop a new Operational Plan for the next 5-year cycle that supports the accomplishments of the Council strategic plan and ends policies.
- Senior staff will also develop a Capital and Operating Budget in support of the plan.
- The plan and budgets will be presented to Council on January 25, 2023 for initial review and feedback.
- Final approval will be sought in March 2023

COLLEGE OF NATUROPATHS OF ONTARIO SWOT ANALYSIS 2022

	Internal	External
	STRENGTHS	OPPORTUNITIES
	Council demonstrated commitment.	Support of the MOH.
	Good understanding of public interest.	Strong relationship with stakeholders
	Strong Council.	Synergies with CANRA and its members.
	Strong staff leadership and support.	Leadership within HPRO
	Strong legal support.	Cost sharing with other regulators.
	Excellent relationship with government.	Engagement programs with profession.
Favourable	Progress made in governance changes.	Educational opportunities through CNAR & CLEAR.
nre	Low staff turnover	
avo	Strong policies and processes in place.	
Ľ.	Good on-line systems for processes.	
	WEAKNESSES	THREATS
	Small size of profession.	Perception of profession among public.
	Limited financial and human resources.	Split within the profession.
	High cost of regulation.	Radicalization of profession.
	Media exposure of regulation.	Risk of civil disobedience.
	Public's lack of understanding of regulation.	Potential for change to regulatory model.
	Profession's misunderstanding of College.	Increasing oversight, straining resources.
	Performance of prior regulator.	Ability to obtain and retain volunteers.
		Ability to obtain and retain volunteers.
a	Volume of work.	Perception of profession within government.
able	Inability to address external discipline and	Perception of profession within government. Increasing number of complex investigations.
ourable	Inability to address external discipline and investigation delays.	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters.
favourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings.	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/consultation.
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings. Inability to dedicate time and resources to	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/consultation. Inability of elements of the profession to
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings. Inability to dedicate time and resources to adequately demonstrate in oversight reports	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/consultation. Inability of elements of the profession to place the public interest ahead of profession
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings. Inability to dedicate time and resources to	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/ consultation. Inability of elements of the profession to place the public interest ahead of profession self-interest.
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings. Inability to dedicate time and resources to adequately demonstrate in oversight reports	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/consultation. Inability of elements of the profession to place the public interest ahead of profession self-interest. Staff and volunteer burnout.
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings. Inability to dedicate time and resources to adequately demonstrate in oversight reports	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/ consultation. Inability of elements of the profession to place the public interest ahead of profession self-interest. Staff and volunteer burnout. Societal changes and stresses.
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings. Inability to dedicate time and resources to adequately demonstrate in oversight reports	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/ consultation. Inability of elements of the profession to place the public interest ahead of profession self-interest. Staff and volunteer burnout. Societal changes and stresses. Profession under economic strain.
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings. Inability to dedicate time and resources to adequately demonstrate in oversight reports	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/ consultation. Inability of elements of the profession to place the public interest ahead of profession self-interest. Staff and volunteer burnout. Societal changes and stresses. Profession under economic strain. People leaving the profession.
Unfavourable	Inability to address external discipline and investigation delays. Limited availability of third-party providers for innovation or cost savings. Inability to dedicate time and resources to adequately demonstrate in oversight reports	Perception of profession within government. Increasing number of complex investigations. Increasing number of disciplinary matters. Government's lack of understanding/ consultation. Inability of elements of the profession to place the public interest ahead of profession self-interest. Staff and volunteer burnout. Societal changes and stresses. Profession under economic strain.

COLLEGE OF NATUROPATHS OF ONTARIO PESTLE ANALYSIS

	POLITICAL	ECONOMIC	SOCIAL
1	Government increasing oversight.	Inflation and economic downturn.	Anti-public health measures
2	Government lack of understanding and consult.	Cost of regulation	Public/media perception of the profession
3	French language services.	Low income levels of the profession	Anti-vaccine sentiments.
4	Changes to governance structures	Cost of retaining staff.	Aging population.
5	2022 election outcomes	Job seaker's market increases salaries.	Anti-racism, anti-discrimination initiatives
6	Desire of Auditor General to oversee colleges.	Costs of investigations and discipline increasing.	Engagement of stakeholders.
7	Equity, diversity, inclusion and belonging		Increasing competition among health professions
8			Changing societal expectations of the profession.
9			
10			
	TECHNOLOGICAL	ENVIRONMENTAL	LEGAL
1	Inherent tech risks, i.e. telemedicine	COVID-19 resurgence	Fairness Commissioner.
2	Electronic communications.	Public health measures	College Performance Measure Framework.
3	Increasing demand for on-line services	Scope of the profession in other provinces.	Seeking injunctions.
4	Internet dependance.	Changes in scope of other professions.	Demands of disciplinary hearings.
5		Staff stress and burnout.	Lawyers (except our own).
6		Small volunteer base	Updates to governing legislation.
7		Competing stakeholder priorities.	Human Rights (complaints, accommodations, accessibility, EDI)
8		Change to office structure (working from home, hybrid and new space coming)	
9			
10			

COLLEGE OF NATUROPATHS OF ONTARIO ENVIRONMENTAL SCAN - KEY ISSUES IDENTIFIED

Evolution in self-regulation

- Movement towards risk-based regulation
 - Development work & related costs
 - Cost of implementation and management
 - Desire of system partners to participate
- Changes to the RHPA
 - Split between Council and committees
 - Competency-based appointment process
 - Need for greater public participation (non-OIC)
 - Need for greater profession participation
 - Continued development of volunteer program

Relationships

- De-valuing of HPRO
- Need to link with other Colleges directly
- Vulnerability of CANRA
 - o Changes in BC will impact
 - o Leadership changes in Alberta
 - Ontario left carrying the ball

Transparency, Accountability and Public Trust

- Legislative limits are impacting transparency
- Accountability through OFC, Auditor General, French Language Commissioner strong probability
- Public trust is fleeting and not likely attainable (any one of 26 Colleges, at any time, can negatively impact this)

Performance Measure Implications

- CPMF is setting the course for the future
- Extensive work required to implement changes and report on outcomes
- Cost implications in development, implementation and in reporting

Emerging Trends in Naturopathy

- Split within the profession is likely to worsen
- Anti-establishment, anti-allopathic approach
- Challenges to regulator, i.e., ignoring investigations, discipline orders.
- Costs in regulation will continue to escalate as issues become more complex.



STRATEGIC PLANNING Issues and views from STAKEHOLDER CONSULTATIONS

Stakeholder outreach is both a crucial and valuable step in strategic planning. To support the College's current planning initiative, the following 10 stakeholders were interviewed representing six organizations. These interviews were conducted by Carolyn Everson, an external consultant between June and August 2022.

- Ministry of Health and Ministry of Long-Term Care
- Ontario Association of Naturopathic Doctors
- Canadian College of Naturopathic Medicine
- Ontario Fairness Commissioner
- Canadian Alliance of Naturopathic Regulatory Authorities
- Health Profession Regulators Ontario

The key issues and conclusions raised by these stakeholders have been summarized and categorized as follows:

- A. Why Planning? Why now?
- B. Strengths of the College
- C. Challenges the College faces
- D. The evolution of self-regulation
- E. Opportunities and priorities for consideration
- F. System partnerships and relationships
- G. Emerging trends in Naturopathy

Please note that all comments in "italics" are direct quotes.

A. Why planning? Why now?

Stakeholders encourage CONO to be clear on their reason for planning and its purpose.

- 1. I query Andrew and his counsel and staff team why the need for strategic planning because their mandate is clear? You are governed by legislation that tells you a) who you are, b) what your job is, which is to protect and promote public interest and make sure that your registrants are providing high quality safe care, c) your processes for complaints, the quality assurance program you must have, and how you go about disciplining your members and the kinds of disciplinary measures that are taken against your members should it comes to that are all laid out for you? So my challenge, to Andrew in the team would be strategic planning to what end?
- 2. It should be more about what does your work plan look like over the next three years? What are your priorities going to be? Strategic work planning not so much about

redefining who you are as an organization. Where do we want to be in three years? - recognizing you're pretty contained in terms of what you can do and what your mandate is. So for example, by the end of three years, we're going to reduce the amount of complaints we have by 25%? I'm making that up. Or how we're going to make sure that our standards of practice are crystal clear. We're going to hold education and training sessions for our members or registrants that highlight what is appropriate behavior and what's not appropriate behavior. Or we're going to develop a robust quality assurance program that's going to deter/detract from the various behavior.

- 3. Just stay where you are, do everything wonderfully. Find the best ways you can to document in a way that people will read it. .. and stay below the radar of the current government. ..., you have your core functions, those don't change, right? They're laid out. (Don't allow for) ...bias or pressure being felt and acted upon by other groups. So no association pressures, employer pressures, that kind of thing.
- 4. I would say that all regulators are in a place right now where they're assessing the impacts of the COVID 19 pandemic, which challenged the efficiency of their processes including their registration process.

B. Strengths of the College

Many recognize CONO, and its team, as a leader and model regulator.

- 5. I adore Andrew he has done some great things. The team there is absolutely outstanding, and he does not have an easy job. I recognize that and my colleagues in the ministry recognize that as well.
- 6. They have wonderful publications, I'm on their list I see their calls to have members of the profession contribute to focus groups and to ask questions of the practice advisor. I think more of those kinds of educational tools will be really, really helpful to the profession to help understand what the regulator's job is, what it's there for, and that they too can contribute to what that looks like. I see some good things coming out of college with respect to seeking volunteers, contributions from its members.
- 7. The purpose of self-regulation is to make sure that there's high quality, competent, safe care being provided. And when you do that is you adhere to the standards, the policies, the bylaws, the guidance that is provided by the college and you act within your scope of practice. And when you're not doing that, the college is legally obligated and required to take action. So in this respect, I would say the college has done a tremendous job at being able to ensure that the public is well protected. I also think the College does a commendable job at making sure that where individuals are exceeding the scope of practice, and/or contravening the policies and standards, the bylaws, the regulations of the college, that it is handled in a very professional and very diplomatic way. My branch has been very, very impressed with the expeditious (manner) with which some very sticky issues have been dealt with.
- 8. I know that Andrew went through stuff to start, like, I know, it was hard. Andrew does very well. He is an expert in regulation. Yes. An expert. Which is a good thing for the college. They absolutely benefit from it. People listen to him around regulatory issues. Well respected. Super, super helpful and smart for him to do that.

- 9. So keep what you're doing, you're doing great. You're the model. You are getting it out there and communicating well.
- 10. Andrew is on top of all of it, he really has a phenomenal grasp of what it takes what's needed. He is so clear thinking which is such a treat. He takes a very complicated topic and makes it crystal clear.
- 11. The other piece about him is that we all can look say three steps forward and he can look seven steps forward and then can backtrack and determine what decision are we making right now that might have a negative impact. I'll be really honest with you, I rely on him. If I'm sort of torn between this and that, I will call him and ask can I run a scenario by you? Just to talk it through with him because he has that vision. As part of their planning, CONO needs to make sure that they have him until he's absolutely ready to retire because he is an invaluable resource. And he is an amazing human being. And he's just a really open-minded guy. He's also got the leadership skills to keep his team moving forward. I've always respected his work but having had the opportunity last five years to interact with him on so many different things, I realize just how lucky they are to have him.
- 12. We look to Ontario as our guide. So oftentimes, when, when I'm looking for strategic planning goals for us, I'm looking to see what Andrew and his team have been doing there. There's very little that I see that that I could recommend that they do or that they change. Andrew and his team make time to work with us to help us to answer our questions. The time they give us is phenomenal. And I would hope as any part of their strategic plan going forward, they would always make sure that there's a line item for them to continue to collaborate so positively with their resources and their input. Not just for me, I think I could speak to the other jurisdictions as well.
- 13. Our sense is that this is a well-run regulator. It's a relatively new one, compared to others. It has moved up the learning curve quite quickly. We've had an opportunity to meet with Andrew Parr collectively and I would say that he is one of the more innovative registrar's and CEOs we've encountered, you know, very practical, very thoughtful. For example, I thought their last annual report was interesting. And it had a quite a provocative preamble that Andrew put together, which is why are we doing an annual report in this format, it's useless, because it's backward looking. And the statistics are meaningless, which I must say resonated with me because we do the same sort of work. And we are even hampered in terms of not being allowed to use any graphics in government.
- 14. Andrew and the registration committee have been great They've made incredible leaps and strides in terms of registration in very short period of time. They are one of our better regulators that I think we are looking at, you know, they've got some best practices that would be worth sharing.

C. Challenges the College faces

Increasing awareness and understanding of the role of the regulator continues to challenge CONO. As a result, some recognize a reliance (over-reliance?) on the Registrar.

- 15. Self-regulation is fairly new recognizing it's been five, seven years now. Ish. Under the Regulated Health Professions Act, 2015. I think there's still some adjusting that needs to be done on the part of the profession. I wouldn't say the regulator because the regulator knows what its job is. But, I think, the profession and the membership in that regulator need to fully appreciate and come to understand what it means and what a privilege it is to be regulated and to be self-regulated.
- 16. We have seen, with some of the public complaints and discipline cases, the kinds of challenges with respect to professional practice that the College is dealing with. Also, the approaches taken by the advocacy organization, the professional association, don't necessarily demonstrate a fulsome understanding of what all of this means. I don't know how to say it. Other than that.
- 17. I think there needs to be a bit more maturing of the profession. (What we see in other professions...) they've had a lot of years under their belt. So they've worked out these frictions, they understand what their jobs are, their roles are, and more importantly, their members understand. I think part of the challenge with this profession to be truthful is that it came from the drugless practitioners act, where the rules, the procedures, the policies, the regulations, and all that surrounded that were not as stringent as they are now.
- 18. When you have naturopaths or formerly known as drugless, practitioners from the old regime, being teleported into the new regime, where the old regime really didn't have a whole lot going on in terms of safeguards and standards and complaints and discipline in the way they have it now. Some may perceive that the college is overly burdensome, is overly strict. This is something they have to deal with.
- 19. Reliance on the Registrar: With all the changes in the shift to risk-based regulation, and all the rest of it, is there's a huge reliance on your registrar. Part of what can come out of good strategic planning is strengthening understanding so that you're not so reliant on a strong Registrar. The way you can help to take that burden off is to make sure you have strong team members. (Remember) one thing we also evaluate in the college performance measurement framework is, what is the team in the college doing and how is it supporting its leadership? Who are the people surrounding the registrar? And are those people successful? And do they understand their roles? And are they competent enough to be able to execute those roles? Is there regular review of job specs? Is there regular review of performance? Are they doing the things that they're supposed to be doing? Are they set up for success? Are the President and Vice President knowledgeable? Are they just there as figureheads?

D. Leadership in/ Evolution in self-regulation

As highlighted below, stakeholders expressed differing views on a shift to risk-based regulation. Many recognize the leadership that CONO has provided in supporting this evolution.

Evolution in regulation towards risk-based regulation

- 20. I think we have a very good hint as to what the previous government and now incoming government thinks about oversight generally. We established the Health and Supportive Care Providers Oversight Authority, which is a new authority, which takes a risk-based approach to how we provide oversight in the province. It's less onerous, less cumbersome, it does allow for other professions to add be added to it over time. Of course, we're looking at personal support workers right now. Could currently regulated professions be added to it? Possibly. Could unregulated professions be added to it? Possibly.
- 21. I think if we were to look at the budget that was tabled just before the election, a lot of time and care and effort was spent on health human resources... so perhaps a new Health Human Resources Plan for the province that will quite possibly include naturopaths.
- 22. Some will have an easier time (moving to risk-based) for sure. Some would say right now, I'm not even sure why they're regulated? They want to have so many risks. So, certainly more for naturopaths and others. I think it's great to move into risk-based regulation. And the right touch stuff is kind of still part of that.

Governance modernization

- 23. **Readiness**: I know the college already made a submission to the past government on modernization, I think they need to be ready to set themselves up for success and be ready to say how quickly a consultation or reforms would be made. This is all to say without knowing specifically where we're going there does need to be a state of readiness, whereby once the government decides this is where we're going, the college is receptive and ready to come along with us. If they can be as nimble as possible, as responsive as possible, and come to the table with solutions.
- 24. **Timely decision-making:** Council is going to have to work in different ways and figure out how it can make expeditious decisions, timely decisions, whilst still adhering to the legislation. Are there ways that the college can think about how it makes its decisions without having to wait for a quarterly council meeting? Are there processes or policies that could put in place to help it make decision making expeditious? For example, one of the challenges we have collectively is that there are requirements for a 60-day circulation of regulations, then after that, it will go back to the next regularly scheduled council meeting for approval. Are there ways the council can meet more frequently? I would offer this to all colleges. This is not specific to naturopaths. I would say that there have got to be ways in which there can be more expeditious decision making so that God forbid, if we had to pick up the phone and say, Andrew, you're going to need to amend this regulation, there is no time to wait until the fall it needs to be done in three months. What do you need to be able to make that happen? So it's about timing. It's about how do you get council approval? It's about the role of the executive.
- 25. **Efficiency**. I think that this profession and others need to (recognize) it's a small regulator. Relatively small, when you compare it to the big fish in the ocean, like the physicians and the nurses and the dentists. Furthermore, there are 26 Health regulatory colleges, that the Ministry of Health is responsible for. And there have been initiatives in Western Canada to shrink the size, the number of health regulators and to amalgamate

- them. Regulators need to **first think about consolidation** and **then second about back-office efficiency** where they retain their own identities but they work with other people ("...ologists") to kind of integrate what are generic similar exercises. So I think now that Ministry of Health is moving out of the COVID chatter and there's a new minister- this could move up the chain of priority. I would say maybe a moderate possibility that will get will happen over the next four years.
- 26. We have now had the opportunity to see all the health regulatory colleges reports on how they've assessed themselves according to the College Performance Measurement Framework. There are some very novel ideas embedded in those reports that the ministry and a working group use to showcase best practices. If the College hasn't already done, so it may wish to consider looking at many of the regulatory colleges, reports that are on their websites that that identify where they're going and the kinds of things they've done in this space. Also the ministry's Summary Report of the college performance measurement framework is on our website, which highlights some of the best practices around how colleges conduct their business. Now, those range from everything from how do you register internationally trained individuals? And what kinds of supports do you provide to them, to what the new graduates need to know and how do we make good decisions? How do we demonstrate we're acting in the public's interest? What are the kinds of materials that we put together for our counsel that are transparent that are on our website? How does the public know we're making good decisions, and what goes into those decisions, a lot of those, what we would call exemplary practices or commendable practices are highlighted. And I would say not just looking at the College of Nurses, but across the spectrum of regulators, because no matter how big or how small, how new, or how old, there are some commendable practices that I think all the colleges should be looking at.

E. Opportunities and priorities for consideration

Stakeholders encourage the College to consider the following priorities.

Internationally trained graduates:

28. I know the College has already made some significant gains with respect to the qualifications needed for registration, particularly where you are internationally trained. The pandemic has highlighted for all of us that the processes that all our regulators have, including CONO, are very cumbersome They're very time consuming. They're unwieldy. And quite frankly, they're not helpful. This is going to be a significant focal point. We've made amendments to the Regulated Health Professions Act pertaining to registration to streamline some of those processes. We're very interested in how can we make seamless the transition for internationally educated individuals to come to Ontario into practice, presuming they're educated and qualified. We know that our supply is desperate for certain professions, we know that there are bottlenecks at the regulatory colleges, this one included, with respect to how we register people, how timely (is the

- process), and how cumbersome processes are. This is something that the College should be focusing on. I know the College has been thinking about that, because I just received a package from Andrew today.
- 29. The office of the Fairness Commissioner is constantly looking at registration practices of colleges, to see whether they're impartial, transparent, open and fair. And whilst the College of Naturopaths of Ontario has not necessarily been named as needing to improve, there's always (value in looking at) how are we registering both domestically trained and internationally trained individuals? This should be a focus.
- 30. We are looking to CONO to position itself as a leader by providing us with good feedback, some suggestion on how regulations might be drafted how they could be positioned.
- 31. The government is increasingly paying more attention to the work of professional regulators particularly with respect to internationally trained applicants from immigration, through settlement, to enhancing skills, registration, licensure and then employment. So regulators need to make sure that their processes are efficient as possible. And in that respect, as I read the annual report, of the Naturopaths, there are four tests in addition to assessing credentials and making decisions on equivalency. That's a lot of stuff that takes place from point A to point B. So while I cannot predict the result of this exercise. I know the current government is very interested in making this process more efficient.
- 32. All regulators are going to need to look at their processes and their relationships with third party service providers to do assessments to make sure that these processes are as efficient as possible. And I would say, to jettison steps in that process that don't particularly add value that are artifacts, and that just serve as barriers. So I think it will be a healthy exercise. We have developed the risk and foreign compliance framework, and the naturopaths are a low-risk ranking, which means we will not, comparatively speaking, be paying too much attention to them —they will have some annual reporting that they are required to provide to us, but we do not see them as a problematic regulator.

Scope of Practice/ Examinations/Speciality practice

- 33. I know that there is some interest, not necessarily part on the part of the college, but on the professional association for **expansions in scope of practice**, whether that is something that will come to fruition, I couldn't say.
- 34. The Ontario naturopathic profession that has something like 26 standards of practice, under CONO. This is the highest level in Canada and Canada has an extremely high level compared to other countries. We've already got a great scope of practice and we would like to continue to look at that because broadening of scope allows for collaboration- limitation of scope, prevents collaboration with other healthcare professionals. And when there's collaboration with other health care professionals, the public is the most protected.
- 35. So if I was a patient, and I visited a naturopathic doctor in Ontario, and then I moved to Nova Scotia, and then I moved to BC, and then I moved to Yukon, it would be completely different in terms of the ability to access the scope of care. So it's not the

- same. It's different, although some of it may be similar. Some have certain ability to do certain controlled acts and others you don't. And it's no different in the US as well, where scope for naturopaths are evolving.
- 36. What can we do that makes us more uniform nationally? There are places where all jurisdictions could try to prompt regulatory change or legislative change. To align. To align more closely with each other.
- 37. It's been a long lively discussion about whether it's a regulator job or the association's job to look to broaden the scope of practice for naturopathic doctors. It sounds like an association type of question, rather than a regulator type function. But historically, it's the regulators that interact with the government to effect scope change. Because it's the regulators who are going to regulate that scope. I think the work we do through CANRA will help inform each individual regulator about what they could change but we need to come to an agreement as CANRA. (For example) there could be restrictive activity practice, requiring additional certification. And then we go back to our respective jurisdictions and attempt to effect change, which doesn't happen fast. I love Andrew, and Erica, who have been working with us on our current project. I'd love to see CONO have this focus (identified) as part of their strategic planning and therefore budget for more resources to be available.
- 38. I think we also need better collaboration and communication between different jurisdictions for the opportunity to see if we can get consistency, I think it helps measurably with patient care, because you could have consistent action in the Yukon that would be the same as in Nova Scotia or in Ontario, So as they look at scope, and discrepancies, for instance, between BC and Ontario, I think it's useful to, to see if there's a way to, to get more consistency. Its infusions and lab tests and also prescribing. Prescribing in BC looks quite different. They have an exclusionary list. (Ontario's?) an inclusionary one. There's been requests from the Association to update that I think that process itself is worthy of some exploration.
- 39. There was an issue brought forward by maybe one of their committees, but maybe it was staff driven, and there's no way to know, which is about redefining the core competencies of naturopathic medicine. And everybody calls it naturopathic medicine. And CONO proposed to remove the word medicine. Which drove the profession crazy. And they didn't see it as their job to explain why, what the benefits are, etc. Or what their thinking was, so there was naturally a combative element. And this gets back to open communication. That is not just defensive communication between our two organizations.
- 40. Every few years, the naturopaths will get very alarmed. Are they trying to limit our practice? We don't want our regulatory body, the public doesn't want a regulatory body to limit our ability to practice our skill set, because that goes against public protection. They are talking about the term naturopathic doctor. Are they trying to limit us to make our regulation of us easier because naturopathic doctors are so diverse?
- 41. We try to make sure that patients get what they need. Because every patient has diverse needs. If you look at research and history you'll see that there are certain segments of the population that are more at risk of being mistreated in the public health care system, for example, the LGBTQ the BIPOC community. For example there is research that shows that you need to understand that certain lab tests are going to be a little abnormal

- in that segment of the population, because they are diverse. This is where the naturopath shines, because of our broad scope.
- 42. So if we look at the scope of naturopathic medicine in Ontario, with regards to lab testing, prescribing and some of the other activities, you know, are there opportunities to allow for more care, more assessment to be offered to patients. I think this has been something that the Association has been trying to deal with.
- 43. CONO could be developing a framework to allow naturopathic doctors to specialize. We've got people in our naturopathic profession who are paying out of pocket to know quite a bit more about cancer about adrenal about sports and injuries, chronic pain. Also Environmental Medicine, which is very leading edge to understand the chemicals that are being put into our environment and the impact on the public in their hypersensitivities. We're looking at electromagnetic hypersensitivity, which the World Naturopathic Federation is also looking at.
- 44. I would love to see CONO focus more on (developing) specialization examinations and leave the entrance exam alone. We already have a really good one in place. It's been working for years.
- 45. NPLEX is the exam, that all Ontario naturopaths used to write until CONO created its entrance exam. NPLEX has been doing this for a very, very long time. They do environmental scans. They've got their transparency in their examination process nailed down. Their audit, they got it. They're the experts. I don't have the confidence in this new exam, to make sure that CONO is bringing new registrants in that are adequate. I haven't seen the data. I haven't seen the transparency. What was their motivation? And that's not just my criticism. I'm not just speaking today on my behalf. I spoke to a bunch of naturopaths before I met with you. I'm sure they put a ton of work into that exam. Instead build on what they have developed to create specialization exams.
- 46. So there is history on this one is... I think there were some challenges with regards to jurisdictional needs and Ontario needed to move forward with its own exam. Its based on competencies that the College has established, and they share with partners like ourselves. (Always...) engagement with various partners, tends to make the process more robust... And again, I don't know, to what extent, CONO is doing that. But there probably is an opportunity to talk about what the competencies could look like, and how examinations can be structured.
- 47. So I would say it's a fairly new exam. They brought out I think they did clinical first. So they did the clinical exams first, and then they brought up a biomed, which is, in the normal order of things, you have biomed, and then clinical. And so, initially, there was some significant hiccups, which I would say, is probably not unexpected the new exam, we had a significant failure rate. And we talked about it and I know the passing rate has now improved.
- 48. Just a word on OSCEs there are two major regimens that regulators use to attempt to assess the competence of applicants provided they have the requisite education training, one would be knowledge-based examination, and the second particularly in the health sector, are these clinical examinations which allow evaluators to, to observe how candidates actually interact with clients. For some health regulatory colleges offering their objective structured clinical examination virtually, as opposed to in person provided

- mixed results. So, I mean that that needs to be top of mind for any regulator, because some observers will say that these pandemics and emergencies constitute the new normal.
- 49. So the OSCEs, I would say are under review by a number of, of health regulatory colleges, partially because they in a way constitute a perfect storm ... from a public health perspective (e.g. difficulty when a need for physical distancing) in a pandemic. The second reason they are under review is they are expensive and there are issues about the validity of those tests. The physiotherapists recently abandoned them.
- 50. A growing area within the profession is the area of **specialties**. In the US there are a growing number of them. And I think sooner or later that question is going to come to CONO, what is the regulators stand on speciality practice? Or maybe it's already come to the regulator. It's something that the not just CONO but regulators across North America, US and Canada will have to address.

Other

- 51. (Another priority for CONO might include...) how you're spending your funds. I think you're gonna be scrutinized. Not only because of the economy, members are going to want to know where their dollars are being spent more than ever. Some colleges reduced their fees during COVID. So, I think they should be really cautious on how dollars are being spent and how you're recording that.
- 52. **Keep your reputation intact**. As long as they're doing their work well. You can handle people throwing things at you. When you are doing well. You can defend yourself. As a regulator, this is not the place to be creative. ...don't do anything where in my mind, you're taking unnecessary chances within your college, you don't need to recruit members, you don't need to find extra revenue sources. Don't be getting advertisers for your magazine. Don't have a website with the ads on it. Don't do any of that. You don't want to be known for having the best tic toc videos. You do want people to understand what the regulator does and what people find the regulator when they need one. So, it does makes sense to have a public facing website that lets the public know what a regulator does. That's important to share.
- 53. Also, find ways to streamline your complaints process, and to find ways to ensure that you are looking at indigenous health and that you're looking at anti BIPOC racism. The sexual abuse of patients, make sure you've got that covered with policies etc. in place. Make sure all those things are taken care of in your college.
- 54. Diversity, inclusion, anti-racism, are very big themes that are percolating throughout all organizations. It's complex for a regulator, because you have your applicants to the profession that you're interested in, you've got members of the profession, and you've got staff in your organization. And one flashpoint, I think, is the collection of race-based data: There seems to be a reluctance on the part of some regulators to dip their toes into it, but it is viewed as important.

55. I've been hearing from recent graduates about **the cost** to register, to inactive license. Cost is always top of mind for practitioners, because in addition to registering they also pay for insurance and they have to pay for the practice.

System partnerships and relationships

- 56. As educators, we do see ourselves as system partners. How do we position ourselves? How do we fit within the larger healthcare ecosystem? We're all partners, the Regulator has their mandate, the Educator has their mandate, the Accreditor has their mandate. How do we all support growth of the profession, as well as ensuring that we are key players in the larger healthcare ecosystem?
- 57. The healthcare ecosystem has changed significantly. And now, post COVID, the way care is delivered and the way we approach healthcare, is rapidly evolving. So how do we, you know, combine our strengths and ensure that safe, competent ethical care is being delivered. How do we come together to ensure that the graduates that are being licensed are able to play a very prominent role as healthcare members?
- 58. As the ecosystem evolves we're looking at a world that hopefully is more collaborative and more integrated. I think that certainly was the promise of coming into the RHPA. And I would argue that we've made some fairly good steps forward in terms of, establishing the profession and setting some fairly rigorous standards around that. I think there's opportunity to further, in the interest of the patient, connect in a more profound manner with, with the health care system and with other health care providers. Look for opportunities.
- 59. I think if I'm being honest, Carolyn, the rub is with the professional Association. The professional association has a completely different mandate, it's advocating on behalf of its members, and the interests of its members. I think collaboration is helpful where and when it's required. Recognizing the Association has a very different vantage point, has very different mandate, and gets paid to do different things for its members than the regulator does. There's the rub. I'm not at all suggesting that they need to be working better together. But I'd be remiss if I didn't acknowledge is there something that the College could do? I think the College has been very tolerant, and patient has been very helpful to the Association when it needs to be. I guess what I'm saying is, it's not lost on me. And the people that I work with that there is sometimes a very big rub there. I wouldn't suggest that there be have to become a better at working together or that Andrew and the team there would need to do anything different. I think, as I said, they're very tolerant, they're very patient.
- 60. Where there is an ability to collaborate, that would be lovely, and maybe there is no ability to do but just want some exploration. Yeah. very least. And at the end of the day, if the answer is, we've looked at this and know, we're quite contented and happy.
- 61. When we consider the role of the Association vs the role of the College, I think that there are good reasons for dividing, you know, professional self-interest from public health and safety. I think over time, the public health and safety mandate will be seen as too narrow. ... I think sometimes associations are way out there. And not credible. I think a

- college can be credible. I see the College having a role as a catalyst to begin conversations on issues.
- 62. We're definitely each other stakeholders. And by definition, the College and the Association are not necessarily going to be working in the same direction.
- 63. We, the Association, see ourselves sometimes as the interpreter for our members of College rules. One thing that is sometimes a challenge is that the registrants don't always understand what CONO means when they communicate to registrants. They often need additional information. I believe, from CONO's perspective that they don't see it as our role to interpret what they say. But someone has to do it, and we're responsible to our members.
- 64. I think the College sees themselves as having to be I don't know if strict is the right word but more strict or more buttoned down or more by the book than maybe some other long-established colleges.
- 65. The only structure we have in place for communication is that we're supposed to have a quarterly meeting between chair of the Council and the CEO. And, and our chair and CEO obviously COVID is a legit excuse for everyone being up in the air and not doing everything on schedule. And that is our only method of formal communication, although Andrew and I will send each other notes and talk on the phone every now and again about usually about a particular issue. We have willingness to engage more formally and that could be done in several different ways.
- 66. They are not going to, nor should they ask us to sign off on the communications to their registrants. But they would benefit from having those who didn't compose the message, read it to see how it comes across. And (to check) if the message is clear enough. We could play a role there. I don't want to skew this to you know, sounding like everything I want to say today is negative ... But in relation to communications When we ask questions, it is seen as combative as opposed to, you know, a natural extension of what we should do.
- 67. I appreciate the communication we have with CONO I've seen a major improvement in the last few years. I've had very pleasant and positive interactions since I've been on the board.
- 68. Sometimes we have to clarify what CONO says to our members, we get questions. .. So, the Association's job very much is to actually help CONO to represent CONO to our membership. The regulatory body makes sure that our arrogant, irresponsible, unintelligent naturopaths that slipped through the cracks shouldn't be practicing and that they get disciplined for it. Because we don't want that either. But there's a trust issue. ... it's very difficult for our staff members to not be triggered when they're having conversations with CONO because in the early years, a trust issue happened, because the OAND was stuck in a sandwich position between the regulatory body and the protection of their members. That trust needs to be redeveloped. Both the Association and the regulatory body need to continue to work together to gain a more respectful relationship with each other.
- 69. They have put a lot of effort into advertising mistakes or inappropriate words. Though if you looked at the actual risk of a miscue in wording or an inappropriate presentation of a treatment, the risk to a patient's health is virtually nil. And so the profession can be

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- frustrated if this emphasis on how they speak or speak on the web. So I understand that, but I also understand that it's a fine line. We do continually talk to our members about appropriate presentation of things, and what Ad was not allowed, why etc.
- 70. When it comes to responses to consultation processes, naturopathic doctors have always been very forthcoming. And we just want to communicate to CONO that it should never ever be taken as an insult or anything It is really a plea to communicate openly and on a level playing field. And it's not about ND protection, it's about public protection. At the end of the day, it boils down to scope, it boils down to the fact that we have our skill sets and we have our scope and that scope has been examined robustly since we got under the RHPA. That's entirely understandable. There isn't worry in our profession that our scope may be overly examined and overly analyzed.
- 71. We also have the Federation of Regulated Health Professionals, the Federation for short. It's a collection of the 30 Health Regulated Professions, all the registrar's and we are a very powerful source. In fact I've never seen Federation so successful. And yes, that organization could certainly be effective in promoting change. The problem is that each individual college lobbies the government for their own needs. So they may not have any objection to a change in scope as it relates to naturopathy, but they may not want to use their government favor asking for it because they may need something else instead. We have a lot of politics in that organization. And it's not good, bad or otherwise, it's just a fact.
- 72. I think the precedent that's been set in BC and Alberta by the government, proposing to amalgamate various colleges into a super College has had a negative impact on naturopathy taking us back to that view, well, they can't be very important they don't even have their own college. They are actually a done deal in terms of legislation but we've been waiting for 18 months or 24 months for the government to indicate when they're actually going to make that move so it's not practically speaking done yet. I think that the CANRA project toward uniform regulation, uniform understanding of how naturopathic medicine is regulated and that an entry to practice standard is going to eventually hopefully be national will help. That's what we're working on right now. That those things provide a respect to naturopathic medicine that will be similar to what was gained by the chiropractors when they implemented the national exam and national service practice. So, I see us moving in the right direction. I think we need to not lose momentum but with the workload of every registrar now there's a very real risk of losing momentum.

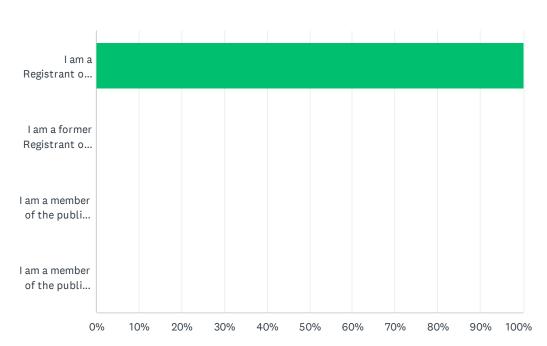
Emerging trends in Naturopathy

- 73. Naturopathic doctors have reputational challenges. As time goes by, the practice is more and more accepted.
- 74. I think there will continue to be a greater acceptance of naturopathic medicine, maybe not all modalities, but naturopathic medicine in general. For a significant part of the population COVID has influenced people's perspective on their health and wellness. I think that over time and this is not in any way, arguing against public medicine, but I think that because of pressures on budgets, and a greater understanding of other things that people could do to keep themselves healthy, that there will be more opportunity for

- types of insurance based on private medicine, or health care. Not for acute care issues, of course, but for keeping people away from the need for acute care, for keeping people well, in some cases, managing chronic diseases. I see the opportunities ahead as getting bigger, and I see the future is bright.
- 75. I would say there is a respect for and a recognition of the profession as another **opportunity or option for clients to pay** for their health care and to assist them along their healthcare journey.
- 76. It may take longer but I think the government will move away from lists. And we very much hope that the restrictions of the inclusive list, for instance, changes e.g. drug lab tests This may create a bit more work for the regulator, if there are more tests that they have to be aware of ... I think an expansion is inevitable.
- 77. We've got these people who have decided to leave the profession who have our skill set, who decided that it's too difficult and onerous to work under our RHPA regulation, and they're going to do it on their own. Are they leaving because they don't pass the exam? Or they, feel too afraid to practice under regulation, they don't feel that they have a robust enough understanding of. They don't have the trust that they are not going to get a \$30,000 fine or \$10,000 fine for something that they accidentally did. The naturopath enjoyed a lot of freedom in their old regulation. I don't necessarily agree that that was a good thing. I think it's a good thing to have a good strong regulation. I do. And we need to take responsibility for that as naturopaths.
- 78. I think the profession is very much on the verge of an incredible growth, when you think about how the attitudes of the of the consumer have changed recently. It's a change towards natural options of healthcare and that's what a naturopathic doctor offers.
- 79. The profession is growing. It's a small profession, but it's growing rapidly. How do we now create that larger ecosystem where we become significant and valuable players?
- 80. We're at this is a tremendous time for the naturopathic profession. With attitudes changing it's an incredible time to be graduating as a naturopathic doctor.

Q1 Please select which of the following applies to you:

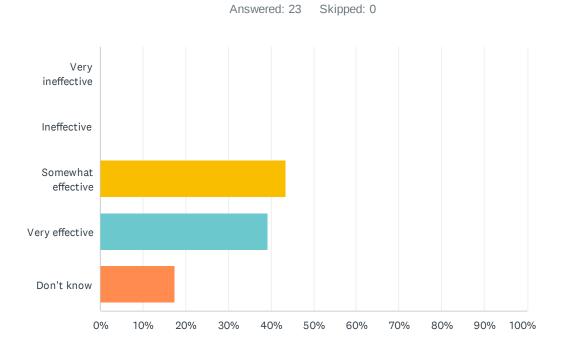




ANSWER CHOICES	RESPONSES	
I am a Registrant of the College in either the General Class or Inactive Class.	100.00%	23
I am a former Registrant of the College.	0.00%	0
I am a member of the public with no involvement with the College.	0.00%	0
I am a member of the public and a volunteer with the College.	0.00%	0
TOTAL		23

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Q2 How effective to you believe the College of Naturopaths of Ontario has been at protecting the public?



ANSWER CHOICES	RESPONSES	
Very ineffective	0.00%	0
Ineffective	0.00%	0
Somewhat effective	43.48%	10
Very effective	39.13%	9
Don't know	17.39%	4
Total Respondents: 23		

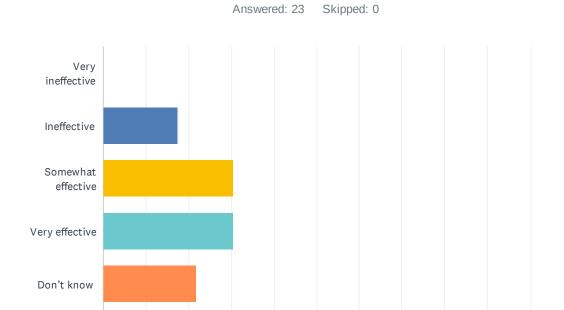
0%

10%

20%

30%

Q3 How effectively has the College earned public trust and confidence?



40%

50%

60%

70%

80%

90%

100%

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ANSWER CHOICES	RESPONSES	
Very ineffective	0.00%	0
Ineffective	17.39%	4
Somewhat effective	30.43%	7
Very effective	30.43%	7
Don't know	21.74%	5
TOTAL		23

Q4 What do you believe to be the greatest strengths of the College?

Answered: 21 Skipped: 2

#	RESPONSES	DATE
1	clear and equitable processes, communication and information sessions, complaints/discipline process	10/18/2022 6:51 PM
2	Timely communications with registrants.	10/15/2022 8:20 PM
3	Effective ongoing communication with its members. Appears to protect the public, however quite vague at times.	10/14/2022 12:19 PM
4	There are measures to correct problems of all sorts in the industry compared to the past drugless board.	10/13/2022 3:45 PM
5	providing standards and guidelines for the profession, providing timely communication through blogs of topics relevant to the practice of naturopathic medicine	10/13/2022 11:45 AM
6	Clear regulations, good communication	10/12/2022 8:08 PM
7	 - Unpopular decision to scrap NPLEX, but option to write licensing exam in either English or French is a positive change - Addressing unauthorized practitioners - Website has had some improvements this year in being able to navigate and find needed information 	10/12/2022 6:04 PM
8	Very good at carrying out its mandate	10/12/2022 5:20 PM
9	Communication with registrants	10/12/2022 5:00 PM
10	The college investigates all complaints thoroughly. They make sure that the public is involved in various committees and their board. They make it very clear to NDs that their role is to protect the public.	10/12/2022 3:59 PM
11	Clear communication	10/12/2022 2:51 PM
12	The number of volunteers that you have on Committees, and the continuous efforts of College staff of organizing the Committee meetings to keep moving the College forward on it's mandates and goals. The College has also taken a very proactive approach for protecting the public (posting higher level dispositions from ICRC on the public register), ensuring there are enough public members on counsel to represent the public, etc.	9/16/2022 10:10 AM
13	It's staff, especially Senior Management	9/15/2022 10:01 AM
14	Ensuring that registrants are practicing safely. Ensuring laws are upheld	9/14/2022 9:11 PM
15	Attempts to communicate with NDs " coversations with", those .pdfs that show what is ok and not ok for advertising etc	9/14/2022 11:30 AM
16	Making sure that NDs practice responsibly, and have the correct information to do so.	9/14/2022 10:09 AM
17	It seems to be pretty good at keeping members up to date on regulatory changes.	9/14/2022 9:49 AM
18	Thank you for the effort for effective communication with Registrants.	9/14/2022 9:36 AM
19	I believe that the majority of staff are dedicated and kind people who do their best to help members navigate college processes.	9/14/2022 9:29 AM
20	CONO's greatest strength is its ability to rule-by-fear	9/14/2022 9:25 AM
21	Honestly don't know.	9/14/2022 9:01 AM

Q5 What do you believe to be the greatest weaknesses of the College?

Answered: 23 Skipped: 0

#	RESPONSES	DATE
1	The College's communication that NDs should not discuss COVID/COVID vaccines with patients may have inadvertently resulted in many NDs not communicating MOH public health messaging and directing patients to MOH/public health unit information due to fear of practicing outside of scope. This unintentional silencing of NDs who would have otherwise been strong advocates for public health during the pandemic may have reduced public trust and confidence as well as public safety.	10/18/2022 6:51 PM
2	The College's policies around COVID 19, in particular, stating that treating COVID 19 is outside of NDs scope of practice, has likely harmed the public by denying them early treatment and care for mild to moderate illness, both of which are the most common features of the infection for the majority of people and well within evidence based and traditional naturopathic principles and training to help people with. In addition, it has been known since early 2020 that chronic disease comorbidities fully within NDs scope of care significantly worsen outcomes with COVID 19 and NDs have been barred from communicating about these conditions in reference to the virus and prevention. In barring NDs from communicating with their patients when asked about individual considerations for COVID 19 genetic vaccines, their individual risks and benefits, stressors involved in forced/mandated vaccination, vaccination concerns in pregnancy and in children, and sequelae of vaccines including vaccine injuries, the development of shingles, etc. etc. the College has enabled harm to members of the public.	10/15/2022 8:20 PM
3	Overhead for rent is exorbitant. Vague and inconsistent at times with what the rules actually are. This can be quite confusing for members.	10/14/2022 12:19 PM
4	They do not give clear interpretation of the legislation to members putting the public at risk of poor interpretation	10/13/2022 3:45 PM
5	The image of the college in the eyes of *some* members as punitive / overly restrictive force rather than a collaborative agent for the public good.	10/13/2022 11:45 AM
6	High fees/cost management	10/12/2022 8:08 PM
7	- Punitive fees for making administrative mistakes in dealing and registering with the College. The policies change every few years and it is difficult to keep track and make sure you are doing everything correctly. I believe most Registrations sincerely want to do the right thing but are also scared of interacting with CONO - I do not feel that writing the prescribing authority exam to gain access to a few extra tools/substances that are not covered in this exam protects the public - The amount paid in rent during the pandemic is a mis-use of our registration fees. I understand the rationale of having a building that is accessible to the public; however, CONO regulates all of Ontario. Whether or not something is on the TTC line does not constitute accessibility to Ontarians to contact or interact with CONO.	10/12/2022 6:04 PM
8	Poor communication with the profession	10/12/2022 5:20 PM
9	Excessive overhead costs	10/12/2022 5:00 PM
10	lack of trust from the profession the College governs appeasing the MOH and public health instead of the public interest lack of trust in naturopathic medicine and naturopathic doctors lack of understanding of how naturopathic medicine works trying to fit naturopathic medicine into an allopathic mold that is inappropriate and disrespectful to the profession of naturopathic medicine unhelpful information needed for registrants may be available, but is almost always extremely difficult to find etc	10/12/2022 4:16 PM
11	I think the college can at times be too hard on NDs. I think the public is very bright and knowledgeable these days and it would be great to look at some of the regulations with respect to advertising, testimonials, selling packages, before and after pictures. Fee structure etc that other healthcare providers are allowed to use and NDs are not. In wanting to protect the public, sometimes the college comes across as punitive towards NDs.	10/12/2022 3:59 PM

	Strategic Planning Survey 2022	SurveyMonkey Item 6.02
12	Too restrictive of practitioners expressing themselves, some rules don't make sense re: safety (eg: requiring pharmacy course to rx but including little to no training on how to rx desiccated thyroid, bioidentical hormones)	10/12/2022 2:51 PM
13	Clarifying common misperceptions with Registrants and connecting with the provincial association to address misunderstandings (this may be in part due to the associations not taking a collegial enough perspective).	9/16/2022 10:10 AM
14	Disconnect from the registrants	9/15/2022 10:01 AM
15	The College comes across as intimidating to NDs, striking fear into some. Can feel like the College has only the public interest at heart - which is the point of the College - but seems to be to the detriment of NDs Operating costs too high - College registration fees are cumbersome	9/14/2022 9:11 PM
16	Money management, not being available, being too traditional	9/14/2022 11:30 AM
17	The College does not seem to support and value naturopathic medicine. If your college doesn't seem to support the profession properly, what message is that sending to the public about naturopathic medicine.	9/14/2022 10:09 AM
18	I think abandoning the North American-wide qualification exam and making a new exam specific only to Ontario has done nothing but cut us off from the wider ND community.	9/14/2022 9:49 AM
19	Lack of recognition that protecting the public also means ensuring that the public has access to the healthcare that they desire. Continual restriction of practice and lack of ability for NDs to stay current with trends in healthcare. Punitive tone to members in many communications.	9/14/2022 9:38 AM
20	Too narrow an interpretation of the mandate (i.e. all that protecting the public entails).	9/14/2022 9:36 AM
21	Communication and relationship with members is still poor, although the college has tried to make inroads here in the past year and that is recognized.	9/14/2022 9:29 AM
22	Incompetent senior leadership. The general members of the profession have no confidence in the leadership of CONO. But we would like to.	9/14/2022 9:25 AM
23	Not supporting registrants when we have questions about how to approach something we have questions about. We are ALWAYS directed to reading the regulations (which is what we have questions about) and often this pertains to how to interpret these in order to do our jobs safely and to protect the public. I've often felt like I've rolled the dice and thought "I THINK this is okay" only because I've received zero guidance aside from "read this section". Helping guide registrants directly helps to protect the public.	9/14/2022 9:01 AM

Q6 In thinking about the regulatory environment and profession, what do you think are the opportunities that the College has available to it?

Answered: 21 Skipped: 2

#	RESPONSES	DATE
1	Encouraging more effective interprofessional collaboration with other HCPs regulated under the RHPA	10/18/2022 6:51 PM
2	Rethink the COVID 10 policy that blanket statements this important public health issue as outside NDs scope. Allow for there to be significant and validated differences between Naturopathic Medicine and other systems of health care regulated in Ontario, so that the public has access to the full scope, training, and judgement NDs can offer. Remember that many patients have deferred accessing conventional medical care specifically through the pandemic and have been denied care that NDs could have provided, were the regulatory environment more conducive to NDs skills and knowledge being fully expressed.	10/15/2022 8:20 PM
3	I'm not sure how to answer this.	10/14/2022 12:19 PM
4	Set up clear guidelines	10/13/2022 3:45 PM
5	Continue providing relevant and timely resources to support the profession in making good decisions in their practice and business.	10/13/2022 11:45 AM
6	NA	10/12/2022 8:08 PM
7	- NDs have an opportunity to apply our knowledge and skills to help the current healthcare crisis and we are restricted by our Ontario license. Just one example: Our colleagues in BC are able to administer vaccines, for example. Not every ND does which allows for individualized practice. More and more of my patients are without a GP and I am unable to refer for simple/basic tests like ultrasounds or provide vaccines to families that want them, even though I have the knowledge and experience giving IM shots Initiate nation-wide registration to allow NDs to practice across different jurisdictions. Engage with other provinces who have not yet regulated NDs so that they can learn from the outcomes and experience of CONO.	10/12/2022 6:04 PM
8	Strengthen the relationship with the profession and make sure they understand the role of the College through more frequent and articulate communication; Continue to analyze the scope of practice to see how changes might benefit the public interest.	10/12/2022 5:20 PM
9	Lower overhead costs by working from home, or amalgamating offices with another government regulatory body	10/12/2022 5:00 PM
10	educating the other regulators and colleges on naturopathic medicine, naturopathic doctors' important role in chronic, long term health and especially regarding the lack of harms to patients compared to iatrogenic injuries from allopathic medicine. There is a tremendous amount of false information and slander put out by numerous sources into the public eye that is left unchallenged.	10/12/2022 4:16 PM
11	The college can become less punitive and more professional in communicating with NDs. The college needs to recognize that the population is changing and needs to change its regulations recognizing that the public is very aware and knowledgeable. Many NDs in Ontario are either moving. leaving the profession or retiring. Many new grads are deciding to either not practice in Ontario or stay in Ontario but not register as an ND because of the fact that they feel CONO us too hard in NDs. Over time there may not be a profession to regulate in Ontario. So best to look at regulations and make changes in a positive way so both NDs and CONO can thrive.	10/12/2022 3:59 PM
12	Provide better training for rx, improving image/relationship with MDs, reducing MDs disparaging NDs	10/12/2022 2:51 PM
13	To invite registrants in to see the workings of the College, and engaging them more, thus becoming collaborators with registrants in protecting the public interest.	9/15/2022 10:01 AM

	Strategic Planning Survey 2022	SurveyMonkey Item 6.02
14	The opportunity to work within the RHPA and government to ensure NDs are using the full scope of their knowledge and skills	9/14/2022 9:11 PM
15	unsure. this is not something you highlight to ND's well.	9/14/2022 11:30 AM
16	I'm not sure what the question is referring to. Opportunities for myself? For NDs in general? For the college?	9/14/2022 10:09 AM
17	I imagine that expanding our scope of practice, particularly in terms of prescribing rights, would be a pretty important one.	9/14/2022 9:49 AM
18	The college has an opportunity to engage more cooperatively in strengthening the naturopathic profession which would result in increased patient care and hence increased public safety. Protecting the public is not achieved by weakening the profession.	9/14/2022 9:38 AM
19	More support for Registrants in their efforts to fill a much needed safety gap in healthcare. (For example, more support in how we communicate informed consent with patients, review safety concerns with patients about care they're receiving from various health professionals, etc.) As our healthcare system transitions through this pandemic, safety is a big elephant in the room, and NDs have far more capacity to support the public here than we are.	9/14/2022 9:36 AM
20	Opportunities? If your mandate is to protect the public, then I don't understand this. The College has made it very clear it is not here to help the profession, but to protect the public. There are a number of opportunities for our profession to assist in public health and other areas that would be in the public interest.	9/14/2022 9:29 AM
21	Unsure how to answer this question	9/14/2022 9:01 AM

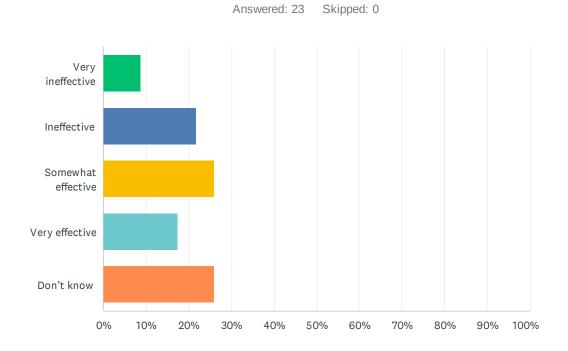
Q7 In thinking about the regulatory environment and profession, what do you think are the challenges or threats that the College is facing?

Answered: 22 Skipped: 1

#	RESPONSES	DATE
1	Diversity of naturopathic practice, lack of well developed and published standards of care within naturopathic medicine	10/18/2022 6:51 PM
2	It may be that the College is being influenced by factors such as private/pharmaceutical funding to the Ministry of Health, such that NDs contribution and voices are actually not valued at the level of the Ministry. It is critical that the College understands Naturopathic Medicine and upholds its place in Ontario healthcare, for (not in spite of) its uniquenesses as a profession.	10/15/2022 8:20 PM
3	Opposition from influential organizations such as the OMA.	10/14/2022 12:19 PM
4	Not sure	10/13/2022 3:45 PM
5	Members leaving the profession to work as health coaches (or similar) because they can have more success with less overhead costs. I don't think this is in the best interest of the public or profession and I do think looking at why this is happening is important.	10/13/2022 11:45 AM
6	NA	10/12/2022 8:08 PM
7	- Small # of registrations, relatively large scope of practice	10/12/2022 6:04 PM
8	Changing landscape of the profession	10/12/2022 5:20 PM
9	Loss of registrants due to excessive costs, and regulatory burden	10/12/2022 5:00 PM
10	All the other regulated health professions want to be naturopathic, but they are not. They don't understand the mindset or the health models naturopathic medicine is based on, but they want to pick and choose piecemeal treatments based on algorithms without understanding the process. The modern medical system wants to disintegrate naturopathic medicine and at the same time, assimilate and patent naturopathic medicine's tools. Ethics is not a consideration.	10/12/2022 4:16 PM
11	I think I answered this in the previous question.	10/12/2022 3:59 PM
12	Influence of medical doctors who prefer to limit ND practice	10/12/2022 2:51 PM
13	Registrants who were not a part of the creation of and introduction of the new regulation (2007-2015), and understanding how the College fits within the provincial government framework, see the College as "them" in an 'us vs them' view. Thus, registrants are less likely to collaborate with the College.	9/15/2022 10:01 AM
14	I think the College is perhaps facing threat from the CPSO, or other Colleges, always feeling inferior and like the new kid on the block. What our province would look like if CONO and the other Colleges truly worked together for the BEST possible care for ALL patients	9/14/2022 9:11 PM
15	Educating the public and other governing bodies that naturopaths are regulated and there are safety measures in place because of this.	9/14/2022 11:30 AM
16	Imposing limited and misguided rules - i.e. that NDs can prescribe estrogen but not oral progesterone, which makes us more unsafe and BHRT prescribers.	9/14/2022 10:09 AM
17	I don't know.	9/14/2022 9:49 AM
18	Lack of respect that members have for CONO. Lack of ability to stay current with technology advances and laboratory advances in healthcare. Lack of regulatory support for interprofessional collaboration. The CONO exam has weakened the naturopathic profession in Ontario and has weakened the confidence that existing NDs have with new graduates. The high fees associated with CONO membership - especially when compared to other professions under the RHPA.	9/14/2022 9:38 AM

	Strategic Planning Survey 2022	SurveyMonkey Item 6.02
19	Misperception by the Ministry of our profession's values and capacity to support or improve safety of our public healthcare system. This could include misperceptions around public vs private healthcare, "unproven" interventions that Public Servants might misperceive as unsafe A College that *only* publicizes the infractions and discipline hearings of Registrants, might perpetuate these myths more balance is possible, isn't it?	9/14/2022 9:36 AM
20	The profession by and large does not trust the regulator or the CEO. The profession feels that the college can be petty and punitive in cases where it is just simply not necessary. We are a small profession and a small college. If someone has a family emergency and misses their monthly fee because of this and have never had an issue with fees before, there should be humanity in the decisions. Being hard lined and punative in cases where the public is not in danger puts the profession on edge with the regulator. People are leaving the profession at higher and higher rates and part of the issue is the college and how it manages members. Without members, there is no college and no profession.	9/14/2022 9:29 AM
21	Although I know the College puts regulations and guidelines in place to address this issue, at some point, the media will get a hold of the story that NDs make a significant portion of their income by selling marked-up supplements and lab tests to our patients. This conflict of interest whereby we profit-by-prescribing won't look good when it comes out, because we'll have no defence against it, because it's true.	9/14/2022 9:25 AM
22	Internal frustration	9/14/2022 9:01 AM

Q8 How effectively has the College been as a leader and innovator in risk-based health regulation and modern governance approaches?



ANSWER CHOICES	RESPONSES	
Very ineffective	8.70%	2
Ineffective	21.74%	5
Somewhat effective	26.09%	6
Very effective	17.39%	4
Don't know	26.09%	6
TOTAL		23

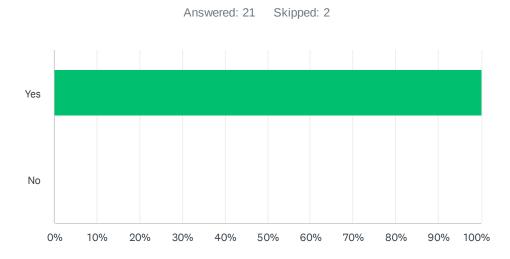
Q9 The purpose of strategic planning is to set the future goals of the organization within the overall mandate for the organization. The College's mandate is to:a) Ensure that those entering practice have the knowledge, skill and judgment to practice safely, competently and ethically.b) Set and maintain the standards of practice of the profession.c) Ensure the on-going competency of the profession.d) Hold the profession accountable for its conduct and decisions. Given this mandate, what should be the overall objectives of the College?

Answered: 19 Skipped: 4

#	RESPONSES	DATE
1	no change	10/18/2022 6:51 PM
2	Be accountable to the registrants as to Its conduct and decisions. Provide for its mandates in the most cost-effective manner possible.	10/15/2022 8:20 PM
3	As above.	10/14/2022 12:19 PM
4	Currently there is a real need for better communication on clinical standards of ND and not just the words or communication we use in marketing	10/13/2022 3:45 PM
5	NA	10/12/2022 8:08 PM
6	- Please consider our scope and what is necessary to provide Ontarians access to good care. Our MD colleagues are inundated We need more 1-on-1 guidance on how to apply regulation in complicated situations. We need to be able to email or call someone who is going to give a straightforward answer about if something is allowed and not refer us to the guidelines that we have already read or a nebulous answer. We are trying to balance patient care and needs with what is permissible by our licensing board.	10/12/2022 6:04 PM
7	Continue current standards while looking at cost efficiency	10/12/2022 5:00 PM
8	ensure that naturopathic doctors are fairly and properly supported by the college in order to practice effectively, without fear of retaliation or targeting by the College. Stop allowing our scope of practice to be reduced. This decreases the number of tools we can use to help people and therefore decreases the chances of success. Or maybe that is the goal? Stop demeaning naturopathic doctors and naturopathic medicine by condoning the negative slander by the government, by the news, by journalists, by random people with issues. If your job is to govern the profession, the College should at least be able to acknowledge the vast and tremendous amount of knowledge and value that naturopathic medicine and its practitioners, hold. You can regulate the profession without working against it. Ensure that Naturopathic Doctors continue to be self-regulating and continue to be based in ethics and jurisprudence. Never again threaten our automony or medical choices or allow any other body/regulator or anyone to do so. This is a violation of the highest sort. Our own ethics and jurisprudence places the most importance on informed consent. Stop trying to define naturopathic medicine with terms that are inapplicable and inappropriate. Stop trying to fit the profession into a model that doesn't suit the profession. Learn more about how naturopathic medicine actually works. Stop supporting the educational institutions in their transitions to allopathic models. It is a great disservice to the profession and the public. All of this is a disservice to the public. If ND's can't do their job properly, how are they supposed to do their job? Stop participating in the destruction of naturopathic medicine as a profession.	10/12/2022 4:16 PM
9	Do all those things but in a way that is less threatening and punitive to NDs.	10/12/2022 3:59 PM
10	Continue to apply the College's mandate, and also be innovative and a leader in its role as a health regulatory body.	9/15/2022 10:01 AM

	Strategic Planning Survey 2022	SurveyMonkey Item 6.02
11	Ensuring access to a variety of CE courses that help NDs to maintain their knowledge, skill and judgment. While holding the profession accountable, maintaining a feeling of approachability, so NDs feel that they can come forward with questions or concerns	9/14/2022 9:11 PM
12	Translating to government and the public your role in doing the above, so that the public attitudes towards the profession is more positive. I think keeping in mind longevity of the profession is key as well, we need practice to be sustainable for clinicians so that we can maintain regulation (because of the cost associated with this).	9/14/2022 11:30 AM
13	Do the above openly and fairly	9/14/2022 10:09 AM
14	It's unclear to me what the difference between a mandate and an objective should be.	9/14/2022 9:49 AM
15	Ensuring the ongoing competency of the profession involves ensuring that NDs have the ability to stay current - this used to be a strength of the profession, but since 2015 it has become the greatest struggle as a practicing ND. Yes, NDs should be held accountable for their decisions - but when we are limited in our ability to perform the right tests or recommend treatments that we know would be helpful, it doesn't help. The CONO exam does not ensure competency as proven by the lack of correlation to NPLEX (which has been around for over 4 decades) and the ongoing poor pass rate. Either we have major major problem with CCNM or with the CONO exam. Either way, the optics of poor pass rate is terrible and the lack of focus on identifying and addressing the problem is not okay.	9/14/2022 9:38 AM
16	From my rather narrow lens, I feel confident in the College's actions so far regarding a, b, and c. Objectives regarding holding the profession accountable, could be more rounded out: Being held accountable also means acknowledgement for the good outcomes where public safety is concerned. (There must be a way to do this without crossing the line into a Public Relations objective!)	9/14/2022 9:36 AM
17	I think the complaints committee does a good job, but as mentioned above, the interaction with members needs to be improved.	9/14/2022 9:29 AM
18	I agree with the mandate as-is. The objective for the College should be to continue this, but become more efficient and friendly to your members. Change the CEO and move to a virtual-only office.	9/14/2022 9:25 AM
19	Ensuring the registrants have the support they need (and providing support when asked!) to do their jobs safely and effectively.	9/14/2022 9:01 AM

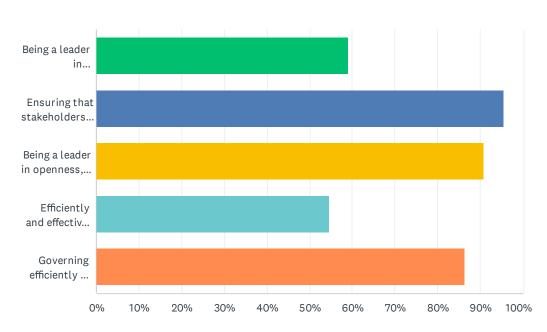
Q10 Since 2016, the overall goals of the College have been:a) Being a leader in accountability for naturopathy in Ontario.b) Ensuring that stakeholders under the role of the College and have confidence and trust in the College to perform its role and cooperate to ensure effective regulation of the profession.c) Being a leader in openness, transparency and cooperation.d) Efficiently and effectively regulating the profession by relying on a risk-based approach to regulation.e) Governing efficiently and effectively.Do any of these goals remain relevant today and looking ahead over the next five years?



ANSWER CHOICES	RESPONSES	
Yes	100.00%	21
No	0.00%	0
Total Respondents: 21		

Q11 Which of the goals remain relevant looking forward





ANSWER CHOICES	RESPON	SES
Being a leader in accountability for naturopathy in Ontario.	59.09%	13
Ensuring that stakeholders under the role of the College and have confidence and trust in the College to perform its role and cooperate to ensure effective regulation of the profession.	95.45%	21
Being a leader in openness, transparency and cooperation	90.91%	20
Efficiently and effectively regulating the profession by relying on a risk-based approach to regulation	54.55%	12
Governing efficiently and effectively	86.36%	19
Total Respondents: 22		

Q12 Are there any specific initiatives in your opinion that the College should undertake to achieve the overall goals of the organization?

Answered: 18 Skipped: 5

#	RESPONSES	DATE
1	N/A	10/18/2022 6:51 PM
2	 Eliminate the unnecessarily expensive lease space on John St. 2. Consult the profession on their capacities to treat and help people prevent COVID 19. 3. Consult the profession on a policy that outlines NDs roles in any future emerging public health issue/emergency/pandemic. Ensure professional freedom of speech and freedom of conscience for NDs when acting on behalf of their patients. Develop a policy that invokes NDs unique contribution, rather than declaring them non-essential, in any future public health emergency or pandemic. Consult the profession on how to earn their trust as the regulator, as the membership is the College's chief stakeholder. 	10/15/2022 8:20 PM
3	I'm not sure.	10/14/2022 12:19 PM
4	We need other regulators to know what CONO is doing to gain trust in the health care industry	10/13/2022 3:45 PM
5	No	10/12/2022 8:08 PM
6	No	10/12/2022 5:00 PM
7	Make your assessments on actual data from actual naturopathic patients, not extrapolations, not inferences, not based on other professions. How many patients have actually been literally harmed by naturopathic medicine provided by naturopathic doctors?	10/12/2022 4:16 PM
8	I think CONO should treat the profession with respect. Know that NDs as a whole are a positive contributor to health care. Educate the other colleges in our level of training and education so we can work more collaboratively. In communication with NDs, sound more professional and less threatening.	10/12/2022 3:59 PM
9	Improve pharmacy training to cover those things NDs can/do rx, reduce disparagement of NDs by MDs, improve ND access to lab testing	10/12/2022 2:51 PM
10	I feel strongly that the College could govern more effectively, and potentially reduce complaints, by collaborating more with its registrants. I understand that the College's role is to protect the public interest, but if the College was able to engage registrants more, they could work together to protect the public.	9/15/2022 10:01 AM
11	not sure	9/14/2022 9:11 PM
12	Looking at a different model of rent/location, especially now we are in such a hybrid model world wide. Making language more friendly - you use such legal jargon to talk to NDs, keep that for legal documents. Work closer with the OAND. Continue to repeat what you "actually do" and WHY its better for us NDs for you to exist	9/14/2022 11:30 AM
13	No	9/14/2022 10:09 AM
14	I think getting rid of the Ontario exam and cooperating with the rest of North America would be a good place to start.	9/14/2022 9:49 AM
15	I would not consider CONO a leader in openness, transparency and cooperation - at all. CONO seems to apply a punitive approach to regulation; not a risk-based approach. If NDs are considered a stake-holder, I would question whether or not trust is high. As NDs we have had to defend our scope numerous times in the last couple of years. Regulation by weakening the profession is not respectful, patient-focused or necessary.	9/14/2022 9:38 AM
16	I think the college can do better to achieve the goals it already has, particularly cooperation with other stakeholders and the members.	9/14/2022 9:29 AM
17	Those initiatives are excellent. Their delivery and implementation have been lacking, in my	9/14/2022 9:25 AM

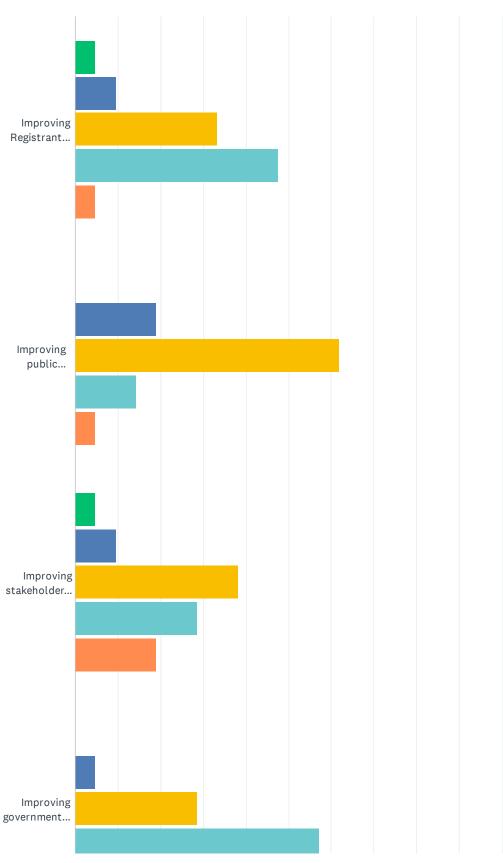
Stra	tegic Planning Survey 2022	SurveyMonkey Item 6.02
	opinion. Especially "Governing efficiently and effectively". I would score CONO a 1 out of 5 on this goal. It's time for new leadership.	
	Support registrants with transparency, openness, and cooperation so that we can do our jobs safely. Answer our questions when asked. Move to a more affordable location so that our fees	9/14/2022 9:01 AM

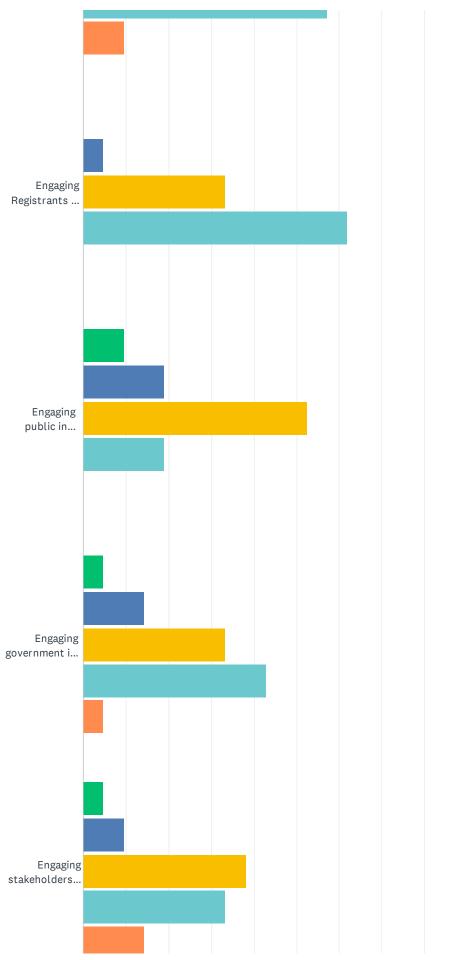
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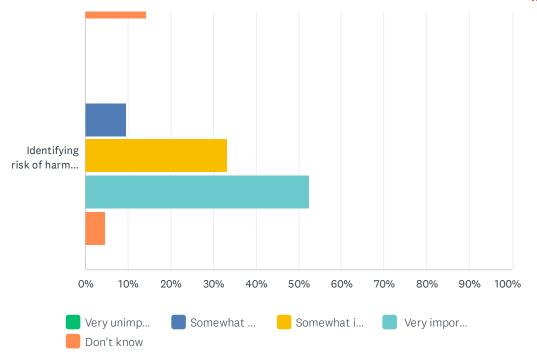
aren't paying for John street.

Q13 Please indicate how important each statement is in your opinion:



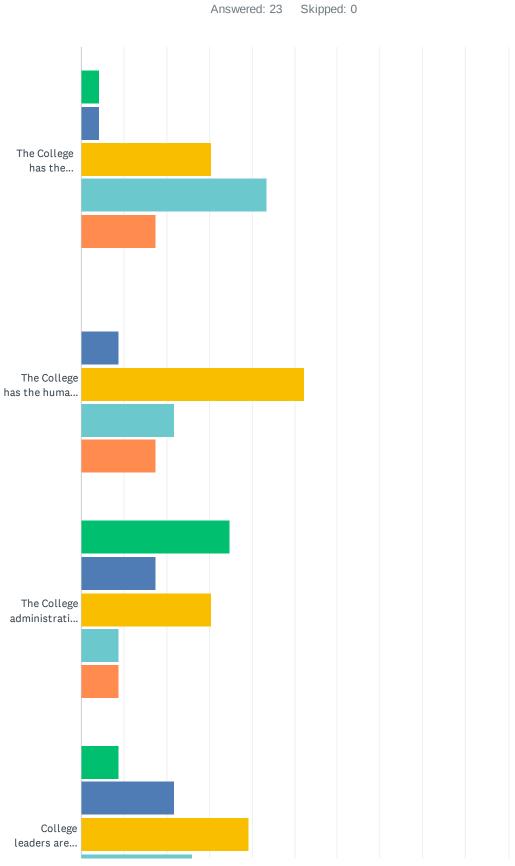


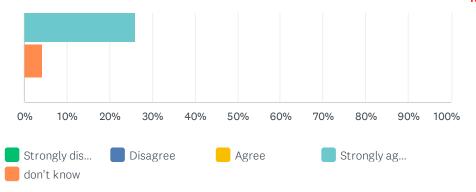




	VERY UNIMPORTANT	SOMEWHAT UNIMPORTANT	SOMEWHAT IMPORTANT	VERY IMPORTANT	DON'T KNOW	TOTAL
Improving Registrant engagement.	4.76% 1	9.52% 2	33.33% 7	47.62% 10	4.76% 1	21
Improving public engagement.	0.00%	19.05% 4	61.90% 13	14.29% 3	4.76% 1	21
Improving stakeholder engagement.	4.76% 1	9.52% 2	38.10% 8	28.57% 6	19.05% 4	21
Improving government engagement.	0.00%	4.76% 1	28.57% 6	57.14% 12	9.52%	21
Engaging Registrants in processes.	0.00%	4.76% 1	33.33% 7	61.90% 13	0.00%	21
Engaging public in processes.	9.52%	19.05% 4	52.38% 11	19.05% 4	0.00%	21
Engaging government in processes.	4.76% 1	14.29% 3	33.33% 7	42.86% 9	4.76% 1	21
Engaging stakeholders in processes.	4.76% 1	9.52% 2	38.10% 8	33.33% 7	14.29% 3	21
Identifying risk of harm to the public	0.00%	9.52% 2	33.33% 7	52.38% 11	4.76% 1	21

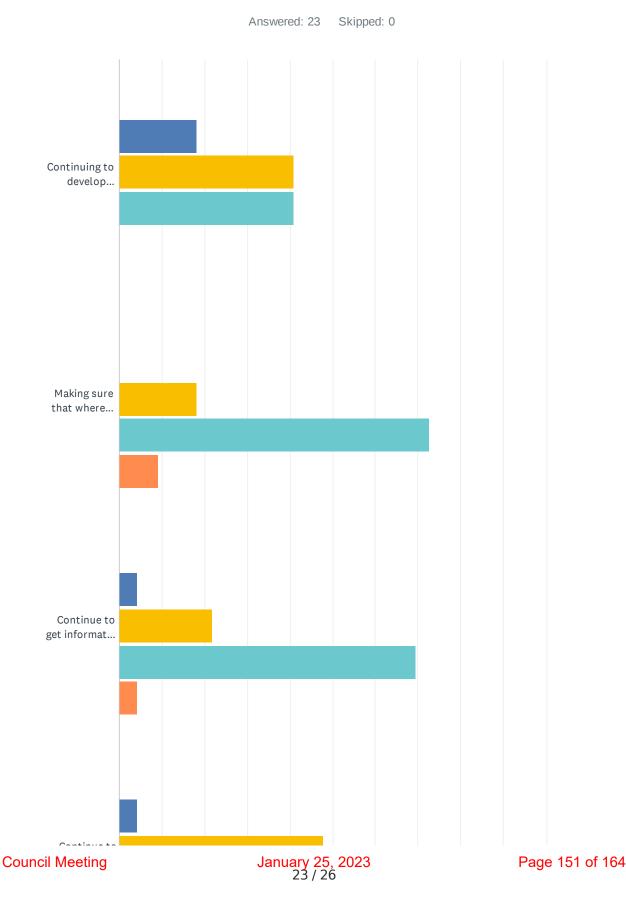
Q14 Please rate your level of agreement with the following statements about the state and use of College resources.

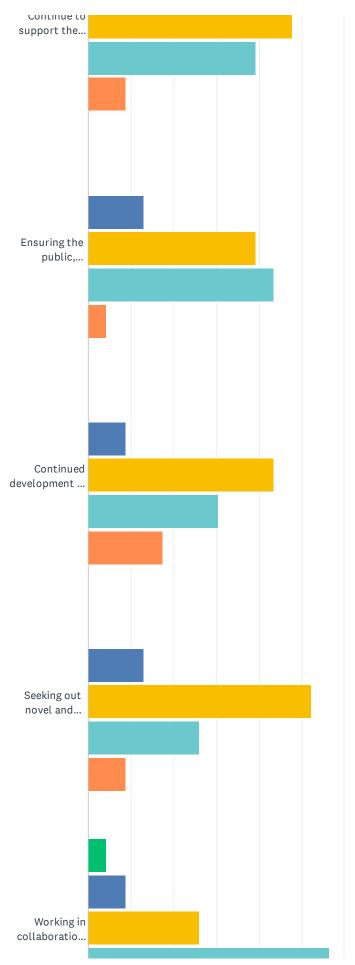


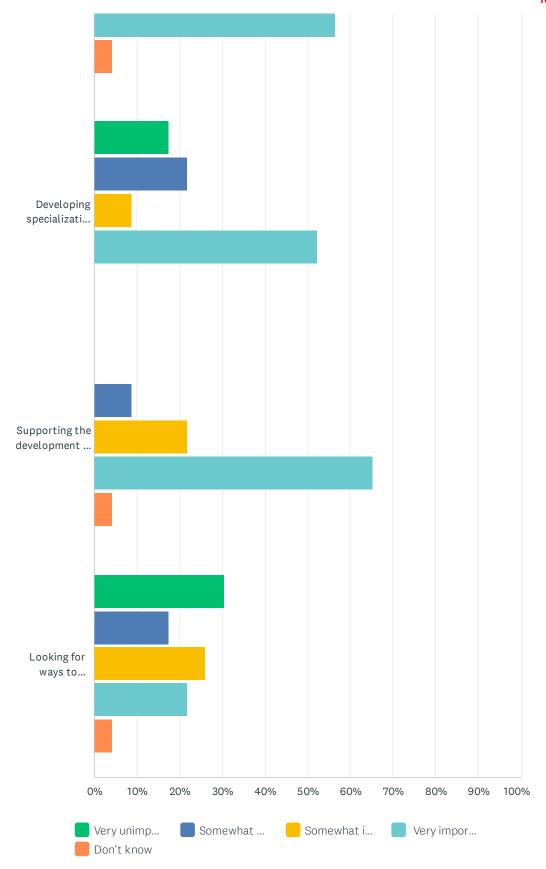


	STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE	DON'T KNOW	TOTAL
The College has the financial resources to support its mandate and operations.	4.35% 1	4.35% 1	30.43% 7	43.48% 10	17.39% 4	23
The College has the human resources necessary to support its mandate and operations.	0.00%	8.70% 2	52.17% 12	21.74% 5	17.39% 4	23
The College administration uses its resources responsibly to support the College's mission.	34.78% 8	17.39% 4	30.43% 7	8.70% 2	8.70% 2	23
College leaders are knowledgeable about and responsible to the regulatory and operational needs of the College.	8.70% 2	21.74% 5	39.13% 9	26.09% 6	4.35% 1	23

Q15 The following issues have been identified by stakeholders as ones that the College needs to consider and address. Please indicate how important each issue is in your opinion:







	VERY UNIMPORTANT	SOMEWHAT UNIMPORTANT	SOMEWHAT IMPORTANT	VERY IMPORTANT	DON'T KNOW	TOTAL
Continuing to develop educational tools.	0.00%	18.18% 4	40.91% 9	40.91% 9	0.00%	22
Making sure that where individuals are exceeding the scope of practice, and/or contravening the policies and standards, the bylaws, the regulations of the college, that it is handled but in a very professional and very diplomatic way.	0.00%	0.00%	18.18%	72.73% 16	9.09%	22
Continue to get information out there and communicating well.	0.00%	4.35% 1	21.74% 5	69.57% 16	4.35% 1	23
Continue to support the Canadian regulatory community, both in naturopathy and abroad.	0.00%	4.35% 1	47.83% 11	39.13% 9	8.70% 2	23
Ensuring the public, stakeholders and Registrants know and understand the role of the regulator.	0.00%	13.04% 3	39.13% 9	43.48% 10	4.35% 1	23
Continued development of risk-based regulation.	0.00%	8.70% 2	43.48% 10	30.43% 7	17.39% 4	23
Seeking out novel and innovative approaches to fulfill the mandate.	0.00%	13.04%	52.17% 12	26.09% 6	8.70% 2	23
Working in collaboration to ensure the scope of practice of the profession is uniform across Canada.	4.35% 1	8.70% 2	26.09% 6	56.52% 13	4.35% 1	23
Developing specializations within the profession.	17.39% 4	21.74% 5	8.70% 2	52.17% 12	0.00%	23
Supporting the development of the profession.	0.00%	8.70% 2	21.74% 5	65.22% 15	4.35% 1	23
Looking for ways to amalgamate with other regulatory authorities	30.43%	17.39% 4	26.09% 6	21.74% 5	4.35% 1	23

4 🚜	Policy Type ENDS	COUNCIL POLICIES Item 6.03
	Title	Policy No. E01.06
The College of Naturopaths of Ontario	STATEMENTS	Page No.

The College of Naturopaths of Ontario is a health regulatory authority that protects the public by proactively regulating Naturopathic Doctors to ensure safe, ethical, and competent care for the people of Ontario.

- 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.
 - 1.1 The College engages its system partners to further their understanding and trust in the College and the profession.
 - 1.2 The College engages its Registrants and the public to further their understanding and trust in the College and the profession.
 - 1.3 The College relies on a risk-based approach to proactively regulate the profession.
- 2. Naturopathic Doctors are trusted because they are effectively regulated.
 - 2.1 Applicants are evaluated based on their competence and evaluations are relevant, fair, objective, impartial and free of bias and discrimination.
 - 2.2 Registrants and the public are aware of and adhere to the standards by which NDs are governed.
 - 2.3 Naturopathic stakeholders respect and cooperate with the College.
 - 2.4 Registrants are held accountable for their decisions and actions.
 - 2.5 Registrants maintain their competence as a means of assuring the public that they will receive safe, competent, ethical care.
 - 2.6 The College examines the regulatory model to maximize the public protection benefit to Ontarians.

DATE APPROVED	DATE LAST REVISED
January 25, 2017	January 25, 2023

4 ***	Policy Type ENDS	COUNCIL POLICIES Item 6.04
	Title	Policy No. E02.06
The College of Naturopaths of Ontario	PRIORITIES	Page No.

The College of Naturopaths of Ontario is a self-governing body that protects the public interest by registering and regulating Naturopathic Doctors to ensure safe, ethical, and competent naturopathic care for the people of Ontario.

1. Our major focus is on ensuring that stakeholders understand and value the College and that regulated NDs influence the health and well-being of Ontarians.

Accordingly, 60% of our resources over the planning period will be directed towards activities that will ensure that stakeholders understand and value the role of the College.

- The College supports safe, competent and professional ND practice.
- Registrant's practice is consistent with and supported by defined professional standards and competencies.
- Standards of practice exist for key areas of practice.
- Registrants have access to College-developed tools to increase professionalism and standards for their practice.
- The College enforces the statutes, regulations, standards, policies and by-laws of the College
- The College's evaluation methods are valid, reliable and credible, and applied fairly and consistently.
- Appropriate research is used in the development of tools to guide practitioners to make evidence informed and risk-based decisions.

2. Our secondary focus is on the College being recognized and respected as a partner in Ontario's health-care system.

Accordingly, 10% of our resources over the planning period will be focused on this area.

- Regulatory health policy related to the profession is appropriate for naturopathic practice.
- Relationships with Registrants, government and other key stakeholders are strong, collaborative and productive.
- Health care in the Province of Ontario is influenced by the work of the College.

Our priorities also include principles of strong governance and fiscal responsibility.

Accordingly, 30% of our resources over the planning period will be focused on this area.

- The College is financially responsible, stable and has sufficient funds to meet its mandate.
- The College is governed and operates effectively and appropriately in accordance with its legislated mandate and in keeping with the transparency principles adopted by the Council.

DATE APPROVED	DATE LAST REVISED
April 27, 2011	November 24, 2021

Council Meeting January 25, 2023 Page 156 of 164



BRIEFING NOTE Relocation of the College's Head Office

PURPOSE: To fo		o formally adopt the new office location as the head office.				
OUTCOME	To satisfy the Council that College due diligence has been undertaken in the negotiation of a fair lease which has been signed by two signing officers of the College.					
NATURE OF DECISION		Strategi	ic 🗖	Regulatory Processes & Actions	$\overline{\checkmark}$	Other
PROCESS:						
Activity: The CEO and Council will speak to the content of this briefing				of this briefing note.		
Results:		•	expected that the Council will have confidence in the process used to take a lease agreement.			
Overall Timing:		20 minute	es			
Steps/Timing:		1. R	eview of	Issue	1 mi	nute
		2. Q	&A from	Council	3 mi	nutes
		3. M	otion		1 mi	nute

BACKGROUND:

In November 2022, the Council was briefed about the signing of a new lease for the College's office. Since that time, all of the processes have been put in place to move from the current address to the new location.

Section 2.01 of the College by-laws state:

The head office of the College shall be in the Province of Ontario, at such place as Council may determine, from time to time.

Previously, the Council would have designed the current address as the head office of the College. The Chief Executive Officer is now seeking that the designation be changed.

DISCUSSION POINTS:

The Council is being asked to pass the following motion:

Be it resolved that pursuant to section 2.01 of the by-laws, as of 9:00 am on February 15, 2023, the head office of the College is hereby located at 10 King Street East, Suite 1001, Toronto, Ontario.

ANALYSIS

<u>Risk Assessment</u> – The risk assessment is based on the document *Understanding the Risk Analysis Terminology*, a copy of which is included in the Information Items of the Consent

Agenda. As this is merely an official declaration of the head office, there are no risks associated with this matter.

<u>Privacy Considerations</u> – There are no privacy considerations.

<u>Transparency</u> – The transparency assessment is based on the document *Understanding the College's Commitment to Transparency*, a copy of which is included in the Information Items of the Consent Agenda. There are no identifiable transparency issues.

Financial Impact – There are no financial implications of the Council passing this motion.

<u>Public Interest</u> –The public interest assessment is based on the document Understanding the Public Interest, a copy of which is included in the Information Items of the Consent Agenda. Only those relevant factors have been identified and addressed.

• The public interest in this matter is vested in principle-driven governance and effective operations.

<u>EDIB</u> – The Council and the College have made a commitment to equity, diversity, inclusion and belonging (EDIB) generally and to ensuring that its policies and programs do not include any elements of racism and promote EDIB principles. There are no EDIB issues in the context of the motion to designate a new head office location.

RECOMMENDATIONS

It is recommended that the Council pass the motion identified above.

Andrew Parr, CAE Chief Executive Officer January 17, 2023



BRIEFING NOTE Educational Briefing – Registration Program

BACKGROUND

The College of Naturopaths of Ontario is established under the *Naturopathy Act, 2007* and the *Regulated Health Professions Act, 1991*. Its duty, as set out in the legislation, is to serve and protect the public interest. Its mandate is to support patients' rights to receive safe, competent, and ethical naturopathic care.

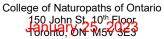
The College achieves its mandate by performing four key functions.

- Registering Safe, Competent, and Ethical Individuals The College establishes requirements to
 enter the practise of the profession, sets and maintains examinations to test individuals against
 these requirements, and register competent, ethical, and qualified individuals to practise
 naturopathy in Ontario.
- 2. **Setting Standards** The College sets and maintains standards of practice that guide our Registrants to ensure they provide safe, ethical, and competent patient care and guide patients to understand the standard of care that they can expect from a naturopath.
- 3. **Ensuring Continuing Competence** The College creates and manages a variety of continuing education and professional development programs to help assure the provision of safe, competent, and ethical naturopathic care.
- 4. **Providing Accountability through Complaints and Discipline** The College holds Ontario naturopaths accountable for their conduct and practice by investigating complaints and concerns and determining appropriate solutions, including disciplining naturopaths who have not upheld the standards.

Some elements of the College's role, such as setting standards and ensuring continuing competence, are proactive insomuch as they attempt to prevent issues from arising by setting minimum standards and ensuring a competent profession. Other elements of the College's role, such as registering individuals and holding naturopaths accountable, are reactive, that is, they are initiated only after an event occurs. The event may be a request to sit an exam or to become registered or a complaint that has been filed against a registrant.

When we do our job well, we have set rules that ensure safe care that benefits patients; we have registered the right people who are qualified and committed to providing safe, ethical and competent care; we have ensured that our registrants maintain their knowledge, skills and judgement; and we have held those who may have faltered to be accountable for their decisions and actions.

Other elements that will arise within the regulatory framework include "right touch regulation", using the approach that is best suited to the situation to arrive at the desired outcome of public protection, and risk-based regulation, focusing regulatory resources on areas that present the greatest risk of harm to the public. Both of these will be further elaborated upon in later briefings.



The focus of this briefing is on the Registration Program and processes of the College.

Registration Program

There are two sides of the Registration Program: Entry-to-Practise and Registration. Entry-to-Practise is the primary vehicle through which the College registers competent, ethical, and qualified individuals to practise naturopathy in Ontario. Through the Entry-to-Practise side, the College also administers its Prior Learning Assessment and Recognition (PLAR) program which assesses individuals who did not graduate from a program in naturopathy accredited by the Council on Naturopathic Medical Education (CNME), but who have a combination of education and experience which may be 'substantially equivalent' to that of a CNME-accredited program graduate.

On the Registration side, the College ensures registrants maintain their certificate of registration in accordance with applicable sections of the College's by-laws, the Registration Regulation and registration policies. This includes administering the annual collection of information and fee (registration renewal), auditing reported practise hours as part of ensuring ongoing currency of knowledge and skills and conducting audits of professional liability insurance and CPR certification information to ensure continued coverage for the protection of the public.

Registration is also the program which handles the processing of class changes, name changes and initial and renewal applications for professional corporations.

PLAR

Section 5 of the College's Registration Regulation sets out that individuals who have undergone an assessment method approved by Council which evidences that the applicant has the knowledge, skills, and judgment equivalent to those of a person who has successfully completed a CNME accredited program, are deemed to have met a portion of the eligibility criteria for issuance of a certificate of registration. This assessment method is the PLAR program.

To be eligible for assessment through the PLAR program, individuals must possess sufficient language proficiency in either English or French, have completed the equivalent of a Canadian Bachelor's degree in a healthcare discipline reasonably related to naturopathy, and must be able to provide proof of identity in accordance with College requirements.

PLAR assessments are conducted by trained PLAR assessors who are registered Ontario naturopaths and who have met the assessor criteria noted in the PLAR Program Policy. Decisions on a PLAR applicant's eligibility to move forward in the PLAR program and/or the final determination on whether the PLAR applicant may go on to complete entry-to-practise examinations and seek registration, rests with the PLAR Committee, comprised of professional members and public representatives.

The PLAR program uses a staged approach to appropriately assess whether a PLAR applicant possesses the requisite competencies for practising the profession in Ontario. These stages are:

- Stage 1: Paper-based assessment:
 Requires the PLAR applicant to match their education and experience against four mandatory
 naturopathic content categories and their supporting 25 content areas, and 20 general medical
 subject matter areas.
- Stage 2: PLAR Examination 1 (Biomedical Exam):
 Requires the PLAR applicant to demonstrate essential medical knowledge of body systems and their interactions, body functions, dysfunctions, and disease states.

- Stage 3: PLAR Examination 2 (Clinical Sciences Exam):
 Requires the PLAR applicant to demonstrate essential naturopathic competencies for the treatment of patients.
- Stage 4: Demonstration-based assessment –Structured Interview:
 Requires the PLAR applicant to demonstrate their understanding of fundamental research
 concepts and methodologies, with the review of a case study, and their ability to interpret and
 apply that information to a panel of PLAR assessors.
- Stage 5: Demonstration-based assessment -Interaction with a Standardized Patient: Requires the PLAR applicant to demonstrate their ability to apply naturopathic clinical competencies to real-life patient scenarios. These include communications skills, physical exam techniques, clinical practical skills, and professionalism.

Registration Eligibility Requirements

To be eligible for registration with the College, applicants must have either graduated from a CNME accredited program in naturopathy or have been deemed "substantially equivalent" through the College's PLAR Program and have successfully completed requisite entry-to-practise examinations, both knowledge and practical based. Applicants have two years to complete examinations and apply for registration; those who exceed this two year window are required to be assessed by a panel of the Registration Committee for any atrophy of skills or knowledge that may have occurred in the time since graduation or successful completion of the PLAR program, which must be remediated before a certificate of registration can be issued.

Section 3 of the Registration Regulation (Ontario Reg. 84/14) sets out the primary requirements which applicants for registration are benchmarked against. These include provisions around language proficiency, good character (including criminal offences), prior conduct (including any refusals of licensure/registration), and capacity to practise (related to mental or physical health concerns).

Labour Mobility

Labour mobility, as defined by the Canadian Free Trade Agreement (CFTA) refers to the ability of certified workers to practice their regulated occupation, throughout Canada, wherever opportunities to work in that occupation exist

Under the CFTA, practicing naturopaths working in a regulated Canadian jurisdiction may apply for a certificate of registration in another regulated Canadian jurisdiction based on their existing registration.

Labour mobility provisions recognize an applicant's registration and practise time in another regulated jurisdiction as having satisfied basic, entry-to-practise requirements (e.g., entry-to-practise examinations with the exception of the Jurisprudence exam) however it is not a transfer of registration, nor does it allow the applicant to bypass the entry-to-practise process.

Entry-to-Practise Process

The College's entry-to-practise process is broken into 3 separate steps to allow for the collection and review of information, documentation, and fees at appropriate points in an individual's progression from applicant to registrant.

Step 1 – Pre-Registration
 Step 1 is an applicant's initial point of contact with the College. Data is collected on the
 Application for the Pre-Registration form around identity, language proficiency, and information specific to the individual's intended stream of registration, whether as a CNME-accredited

program graduate, PLAR applicant, or Labour Mobility applicant. It is at this stage that individuals complete the PLAR program or requisite examinations.

- Step 2 Application for Registration At Step 2, applicants have completed their entry-to-practise requirements and make their formal application for registration to the College, signaling their intent to register with the College to practise the profession in Ontario. At this stage applicants answer questions, make declarations, and submit documentation related to their education, additional languages spoken, prior conduct, criminal offences and record check, academic offences, good character, other professional registrations, CPR certification, and pay an application fee. It is at this stage where the applicant is either approved for Step 3 or referred to the Registration Committee for review.
- Step 3 Issuance of a Certificate of Registration
 Having been deemed eligible for registration, the applicant is invited to complete the entry-to practise process with the submission of proof of professional liability insurance, a photo for the
 public register (with guarantor form) and payment of the registration fee for that registration
 year. Upon receipt of the Step 3 documents and fee the applicant is issued their registration
 number and can download their certificate of registration for display at their practice location.

During steps 2 and 3 of this process, a minimum of three individuals (Coordinator, Manager and Director) review the data and documentation provided by the applicant against the Regulation and policy requirements for registration. In cases where an application is required to be referred to the Registration Committee for further review, a minimum of four individuals, with the addition of the Chief Executive Officer (CEO), review the documentation and information before it reaches the Registration Committee.

Referrals to the Registration Committee

In accordance with section 15 of the Health Profession's Procedural Code (the Code), Schedule 2 of the *Regulated Health Professions Act, 1991*, the CEO has two options when reviewing an application for registration. They may register the individual or refer the individual to the Registration Committee.

Referrals are made when the CEO:

- has doubts, on reasonable grounds, about whether the applicant fulfils the registration requirements;
- is of the opinion that terms, conditions, or limitations should be imposed on a certificate of registration; or
- proposes to refuse the application.

Applicants whose applications are being referred to the Registration Committee are provided with a formal notice of referral and given 30 days to make any submissions they wish to have considered as part of the Committee's review.

Decisions by the Registration Committee

Section 18(2) of the Code sets out the orders (or actions) available to a panel of the Registration Committee. These are:

- Directing the CEO to issue a certificate of registration.
- Directing the CEO to issue a certificate of registration if the applicant successfully completes examinations set or approved by the panel.

- Directing the CEO to issue a certificate of registration if the applicant successfully completes additional training specified by the panel.
- Directing the CEO to impose specified terms, conditions and limitations on a certificate of registration.
- Directing the CEO to refuse to issue a certificate of registration.

For any decision other than directing the CEO to issue a certificate of registration, Decisions and Reasons are provided to the applicant to allow them to understand the Committee's guiding rationale. It's important to note that the decision to refuse issuance of a certificate of registration is not taken lightly by the Registration Committee. As of the date of this briefing, only two instances have occurred, and in both cases the conduct of the applicant was egregious and could not be remediated through additional training, education, or exams or sufficiently addressed through the imposing of terms, conditions, or limitations on a certificate of registration.

Reviews by HPARB

If the applicant disagrees with the decision of the Committee, they may request that this be reviewed by the Health Professions Appeal and Review Board (HPARB). The Board is an independent body established by the provincial government and is made up on non health care professionals. Following a review, HPARB may:

- Confirm the Committee's decision.
- Refer the matter back to the Committee for further review.
- Require the Committee to take a specific action.
- Make recommendations to the Committee.

Terms and Conditions of Every Certificate

Section 4 of the Registration Regulation sets out the terms and conditions of every certificate of registration. These terms include but are not limited to the need for registrants to report, within 30 days of the occurrence, findings of professional misconduct, incompetence, or incapacity (or similar) related to any other professional registrations, findings of profession negligence or malpractice in any jurisdiction, and any findings of guilt. Section 4 provisions also set out the permitted titles and abbreviations for each class of registration which registrants must abide by, and the need for all registrants to maintain professional liability insurance in accordance with the College by-laws.

Class Changes - Over Two Years Inactive

Registrants registered in the Inactive class for more than two years who are seeking to return to the General class to resume practising the profession, are required to first undergo a review by the Registration Committee for any atrophy of skills or knowledge which must be remediated before the class change can be approved. This review process is similar in format and intent to those conducted for applicants who have exceeded their two-year window for making their application for registration.

Professional Liability Insurance

Section 19 of the College by-laws sets out the requirements for professional liability insurance for both classes of registration. Professional liability information is actively monitored and audited by registration staff on a monthly basis. Registrants are provided with three reminders to update policy information prior to the expiry of their professional liability insurance certificate. Failure to update professional liability insurance results in the immediate suspension of a registrant's certificate of registration.

CPR Certification

While not a legislative requirement, CPR certification is required of all registrants in the General Class, as set out in the Registration Policy, to ensure appropriate lifesaving techniques can be performed in instances of patient emergencies. As with professional liability insurance, CPR certification expiry dates

are audited monthly, and registrants are sent reminders to update this information. While not an immediate suspension, failure to update CPR information results in a Notice of Intent to suspend with 30 days being provided to the registrant to update their CPR information and pay the associated administrative fee before a suspension occurs.

Suspensions and Revocations

In accordance with section 16 of the Registration Regulation, on the second anniversary following a registrant's suspension, their certificate of registration is revoked. Registrants are provided with a Notice of Intent to Revoke a minimum of 30 days prior to the revocation date, to allow a final opportunity for the registrant to correct the default that resulted in the suspension and reinstate their registration. Registrants who are revoked who later wish to resume practising the profession in Ontario are required to re-apply as a new applicant, which includes the completion of entry-to-practise examinations.

Importance of this Program

The College's Registration Program is a critical component of safeguarding the public interest by ensuring those issued a certificate of registration to practise the profession have the requisite knowledge, skills, and judgement to practise safely, competently, and ethically.

Respectfully submitted,

Erica Laugalys
Director, Registration & Examinations

January 2023



Council Meeting January 25, 2023

Video Conference APPROVED MINUTES

Council	
Present	Regrets
Dr. Jonathan Beatty, ND (3:5)	Ms. Asifa Baig (1:5)
Dr. Shelley Burns, ND (5:5)	
Mr. Dean Catherwood (5:5)	
Mr. Brook Dyson (5:5)	
Ms. Lisa Fenton (5:5)	
Dr. Anna Graczyk, ND (4:5)	
Ms. Sarah Griffiths-Savolaine (5:5)	
Ms. Tiffany Lloyd (4:5)	
Dr. Denis Marier, ND (5:5)	
Mr. Paul Philion (5:5)	
Dr. Jacob Scheer, ND (5:5)	
Dr. Jordan Sokoloski, ND (5:5)	
Dr. George Tardik, ND (4:5)	
Staff Support	
Mr. Andrew Parr, CAE, CEO	
Ms. Erica Laugalys, Director, Registration & Examinatio	ns
Ms. Monika Zingaro, Administration Coordinator	
Guests	
Ms. Rebecca Durcan, Legal Counsel	
Ms. Carolyn Everson, Consultant	

1. Call to Order and Welcome

The Chair, Dr. Jordan Sokoloski, ND, called the meeting to order at 9:18 a.m. He welcomed everyone to the meeting.

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

2. Consent Agenda

2.01 Review of Consent Agenda

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

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

3. Main Agenda

3.01 Review of the Main Agenda

A draft of the Main Agenda, along with the documentation in support of the meeting had been circulated in advance of the meeting. The Chair asked if there were any changes to the agenda. Mr. Andrew Parr, CEO, asked to have item 6.01 be moved to item 6.04 and have items 6.02-6.04 be moved up accordingly.

MOTION:	To approve the Main Agenda as amended.
MOVED:	Paul Philion
SECOND:	Denis Marier
CARRIED.	

3.02 Declarations of Conflicts of Interest

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

4. Monitoring Reports

4.01 Report of the Council Chair

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

MOTION:	To accept the Report of the Council Chair as presented.
MOVED:	Tiffany Lloyd

SECOND:	George Tardik
CARRIED.	

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

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

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

5. Council Governance Policy Confirmation

5.01 Review/Issues Arising

5.01(i) Executive Limitations Policies

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

5.01(ii) Council-CEO Linkage Policies

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

5.01(iii) Ends Policies

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

5.02 Detailed Review (as per GP08) - Governance Process (Part 1) Policies

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

MOTION:	To accept the recommendations of the Governance Policy Review Committee.
MOVED:	Paul Philion
SECOND:	Denis Marier
CARRIED.	

6. Business

6.01 Strategic Plan 2023-2027

The Strategic Plan for the years 2023-2027 and the corresponding documentation were circulated in advance of the meeting. The Chair welcome Ms. Carolyn Everson to the meeting and provided a detailed overview of the Plan and the process the Council members partook in and responded to any questions that arose during the discussion.

MOTION:	To approve the Strategic Plan for the years 2023-2027 as presented.
MOVED:	Jacob Scheer
SECOND:	Dean Catherwood
CARRIED.	

6.02 Ends Statement

The Ends Statement were circulated in advance of the meeting. The Chair advised the Council that the key amendments to the Ends Statement were made to reflect the changes that developed throughout the Strategic Plan process and responded to any questions that arose during the discussion.

MOTION:	To approve the Ends Statement as presented.
MOVED:	Shelley Burns
SECOND:	Dean Catherwood
CARRIED.	

6.03 Ends Priorities

The Ends Priorities were circulated in advance of the meeting. Mr. Parr highlighted the current Ends Priorities and advised Council that he recommends referring the redevelopment of the Ends Priorities to the Governance Policy Review Committee (GPRC) to have them present any recommendations to Council at their next meeting. He responded to any questions that arose during the discussion.

MOTION:	To refer the redevelopment of the Ends Priorities Policy to the Governance Policy Review Committee.
MOVED:	Paul Philion
SECOND:	Jonathan Beatty
CARRIED.	

6.04 Emergency Class - Registration Regulation Amendments

A Briefing Note and corresponding documentation highlighting the amendments to the Emergency Class – Registration Regulation was circulated in advance of the meeting. Mr. Parr provided a detailed overview of the amendments and responded to any questions that arose during the discussion.

MOTION:	To approve, in principle, the Emergency Class – Registration Regulation amendments as presented.			
MOVED:	Denis Marier			
SECOND:	Tiffany Lloyd			
IN FAVOUR	Public Members	6 (out of 6)	Professional Members	7 (out of 7)
OPPOSED	Public Members	0 (out of 6)	Professional Members	0 (out of 7)
CARRIED.		•		

6.05 Designation of Head Office Location

Mr. Parr provided the Council with a detailed update on the College's head office location at 10 King Street East – Unit 1001. He responded to questions and concerns that arose during the discussion.

MOTION:	Be it resolved that pursuant to section 2.01 of the by-laws, as of 9:00 am on February 15, 2023, the head office of the College is hereby located at 10 King Street East, Suite 1001, Toronto, Ontario.
MOVED:	Paul Philion
SECOND:	Sarah Griffiths-Savolaine
CARRIED.	

7. Council Education

7.01 Program Briefing – Registration Program

A Briefing Note highlighting the Registration Program was circulated in advance of the meeting. Ms. Erica Laugalys, Director, Examinations & Registration, provided a detailed overview of the program and the processes within the program that the College follows and responded to any questions that arose during the discussion.

The Chair thanked Ms. Laugalys for presenting the Program to Council.

8. Other Business

The Chair asked if there was any other business to be brought before the meeting ended. There was none.

9. Meeting Evaluation and Next Meeting

9.01 Evaluation

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

9.02 Next Meeting

The Chair noted for the Council that the next regularly scheduled meeting is set for March 29, 2023, and that due to the number of agenda items it will be a full-day meeting.

10. Adjournment

10.01 Motion to Adjourn

The Chair asked for a motion to adjourn the meeting. The meeting adjourned at 10:55 a.m.

MOTION:	To adjourn the meeting.
MOVED:	George Tardik
SECOND:	Sarah Griffiths-Savolaine

Recorded by: Monika Zingaro

Administration Coordinator

January 25, 2023

Approved: March 29, 2023

Council Highlights January 25, 2023 (Meeting #33¹)

The Council of the College of Naturopaths of Ontario met on Wednesday, January 25, 2023, from 9:18 a.m. to 10:55 a.m.; seven of the seven elected professional members and six of the seven public members appointed by the Lieutenant Governor in Council were present. Also in attendance was General Legal Council, Rebecca Durcan, of the law firm Steinecke Maciura LeBlanc. The agenda and supporting materials for the meeting were released via the College's website on January 18, 2023, and continue to be available there.

In addition to its regular routine business and receipt of reports from each the Chair and the Chief Executive Officer, the Council considered several important matters which have been highlighted below.

Emergency Class – Registration Regulation – The Council considered and in principle accepted recommendations for amendments to the Registration Regulation, pertaining to an emergency class of registration, to facilitate a 60-day public consultation on these amendments. Consultation documents can be found here on <u>our website</u>.

Strategic Plan (2023-2027) – The Council reviewed and accepted the Strategic Plan for the years 2023-2027.

Ends Statement – The Council considered and accepted recommendations for amendments to the Ends Statement. This can be found here on our website.

Designation of Head Office Location – The Council accepted 10 King Street East – Unit 1001 as the new head office location for the College. Information about the upcoming office move can be found here on our website.

Council Education – As a part of the College and its Council's commitment to good governance, the Council conducted an educational exercise that was a program briefing made by Ms. Erica Laugalys, Director, Registration & Examinations, about the Registration Program. Program briefings are provided for informational purposes to ensure the Council is aware of the complex programs operated by the regulatory body.

Readers who have questions are invited to contact the College by e-mail at general@collegeofnaturopaths.on.ca.

Andrew Parr, CAE Chief Executive Officer January 28, 2023

¹ This is the 33rd meeting of the Council dating back to its first meeting held following proclamation of the *Naturopathy Act, 2007* on July 1, 2015.