



The College of Naturopaths of Ontario

Council of the College of Naturopaths of Ontario

Meeting #38

Draft Agenda

Date: November 29, 2023 (2023/24-04)

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

Location: Zoom Video Conference Platform¹

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).



The College of Naturopaths of Ontario

COUNCIL MEETING #38
November 29, 2023
9:15 a.m. to 12:00 p.m.
DRAFT AGENDA

Sect/No.	Action		Item		Page	Responsible	
0	Pre-Meeting Networking (8:00 am to 9:00 am)						
		Networking	Information networking for Council members.			--	All
1	Call to Order and Welcome						
	1.01	Procedure	Call to Order			--	S Griffiths-Savolaine
	1.02	Discussion	Meeting Norms			4-6	
	1.03	Discussion	“High Five” – Process for identifying consensus			7	
2	Consent Agenda ¹						
	2.01	Approval	i.	Draft Minutes of September 27, 2023		8-13	S Griffiths-Savolaine
			ii.	Committee Reports		14-29	
			iii.	Information Items		30-58	
3	Main Agenda (9:20 am)						
	3.01	Approval	Review of Main Agenda			3	S Griffiths-Savolaine
	3.02	Discussion	Declarations of Conflict of Interest			59-60	
4	Monitoring Reports						
	4.01	Acceptance	Report of the Council Chair			61	S Griffiths-Savolaine
	4.02	Acceptance	Report on Regulatory Operations			62-73	A Parr
	4.03	Acceptance	Report on Operations – Mid-year Report			74-111	A Parr
	4.04	Acceptance	Unaudited Financial Statements for Q2			112-121	A Kupny
5	Council Governance Policy Confirmation						
	5.01	Discussion	Review/Issues Arising			--	B Lessard-Rhead
			i.	Executive Limitation Policies			
			ii.	Governance Process Policies			
	5.02	Discussion	i.	In-depth Review of Council-CEO Linkage Policies			
			ii.	In-depth Review of Ends Policies			
	5.03	Decision	Approval of the Revised Ends Priority Policy (E02.07)			122-123	S Griffiths-Savolaine
6	Regular Business						
	6.01	Approval	Proposed By-law Changes			124-154	A Parr
	6.02	Decision	Funding for CANRA National Practical Examination			155-166	J Quesnelle
	6.03	Approval	Appointment of CEO Review Panel			--	A Kupny
	6.04	Discussion	In Person Meeting Cost			167	A Kupny
7	Other Business						
	7.01	TBD					
8	Evaluation and Next Meeting						
	8.01	Discussion	Meeting Evaluation			On-line	S Griffiths-Savolaine
	8.02	Discussion	Next Meeting – January 31, 2024			--	
9	Adjournment						
	9.01	Decision	Motion to Adjourn			--	S Griffiths-Savolaine

Joint Council-Staff Education

EDIB Training – Managing Microaggressions	--	CCDI
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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

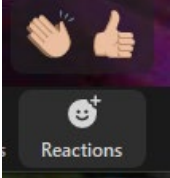
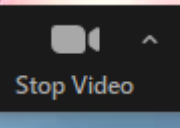
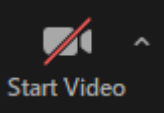
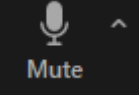
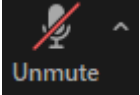
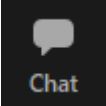
1. We'll listen actively to all ideas
2. Everyone's opinions count
3. No interrupting while someone is talking
4. We will be open, yet honor privacy
5. We'll respect differences
6. We'll be supportive rather than judgmental
7. We'll give helpful feedback directly and openly
8. All team members will offer 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

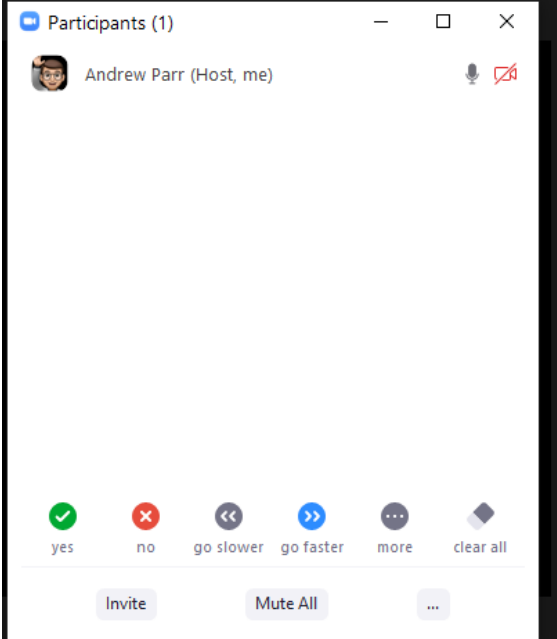
1. No putting the call on hold or using speakerphones
2. Minimize background noise – place yourself on mute until you are called upon to speak and after you have finished speaking
3. All technology, including telephones, mobile phones, tablets and laptops, are on mute or sounds are off
4. If we must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

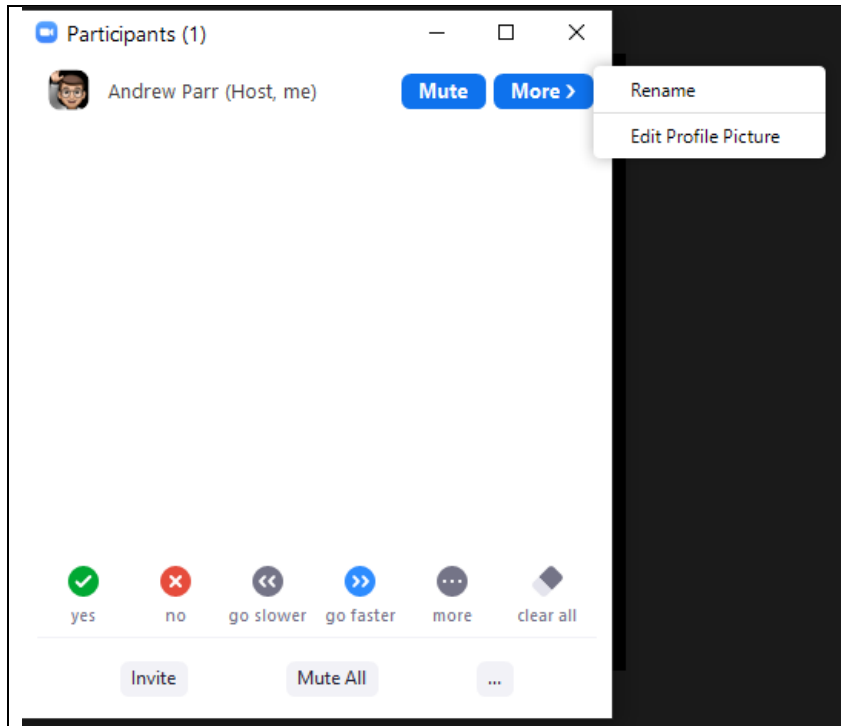
- 5. Stay present – webcams will remain on (unless we are on a call or there is another distraction on your end)
- 6. Stay focused – avoid multi-tasking during the meeting
- 7. Use reactions (thumbs up, applause) to celebrate accomplishments and people
- 8. Use the Chat feature to send a message to the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

Zoom Control Bar – Bottom of screen

Reactions	Stop or Start Video	Mute/Unmute	
	 	 	

Other Helpful Tips

	• Use the Participants button on the bottom control button to see a list of participants. • On the Participants Menu, you can use the bottoms to send instant message to the Host... yes or no etc. (Not all of these options will appear if you are not the Host)
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The screenshot shows a Zoom application window titled "Participants (1)". Inside the window, there is a list of participants with a single entry: "Andrew Parr (Host, me)". To the right of the name are two buttons: "Mute" and "More >". The "More >" button is highlighted, and a dropdown menu is open, showing two options: "Rename" and "Edit Profile Picture". Below the participant list, there is a row of icons with labels: a green checkmark for "yes", a red X for "no", a double left arrow for "go slower", a double right arrow for "go faster", a three-dot menu for "more", and a trash can for "clear all". At the bottom of the window, there are three buttons: "Invite", "Mute All", and a three-dot menu.

- Hover over your name on the Participants list to get more options
- You can rename yourself to your proper name
- You can add or change a profile picture.

Zoom Meeting
Council of the College of Naturopaths of Ontario

Using “High Five” to Seek Consensus



Image provided courtesy of Facilitations First Inc.

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

When asked you would show:

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

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



The College of Naturopaths of Ontario

**Council Meeting
September 27, 2023**

**Video Conference
DRAFT MINUTES**

Council		
Present		Regrets
Dr. Jonathan Beatty, ND (1:3)		Ms. Sarah Griffiths-Savolaine (2:3)
Dr. Shelley Burns, ND (3:3)		
Mr. Dean Catherwood (3:3)		
Mr. Brook Dyson (2:3)		
Ms. Lisa Fenton (3:3)		
Dr. Anna Graczyk, ND (3:3)		
Ms. Tiffany Lloyd (2:3)		
Dr. Denis Marier, ND (3:3)		
Mr. Paul Phillion (2:3)		
Dr. Jacob Scheer, ND (3:3)		
Dr. Jordan Sokoloski, ND (3:3)		
Staff Support		
Mr. Andrew Parr, CAE, CEO		
Ms. Agnes Kupny, Director of Operations		
Mr. Jeremy Quesnelle, Deputy CEO		
Ms. Dilyara Madeira, Executive Liaison		
Guests		
Ms. Rebecca Durcan, Legal Counsel		
Mr. Barry Sullivan, Governance Policy Review Committee		
Ms. Tiffany Mak, Ministry of Health		

1. Call to Order and Welcome

The Chair, Dr. Jordan Sokoloski, ND, called the meeting to order at 9:07 a.m. He welcomed everyone to the meeting.

The Chair noted that the meeting was not being live streamed via YouTube to the College's website, however, there were observers in attendance.

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:	Paul Phillion
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.

MOTION:	To approve the Main Agenda as presented.
MOVED:	Jacob Scheer
SECOND:	Tiffany Lloyd
CARRIED.	

3.02 Declarations of Conflicts of Interest

The Chair reminded the Council members of the updated Declarations of Conflict-of-Interest process. A summary of the Annual Conflict of Interest Questionnaires completed by Council members have been included in the Council package 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 with Council. He welcomed and responded to questions from the Council.

MOTION:	To accept the Report of the Council Chair as presented.
MOVED:	Jonathan Beatty

SECOND:	Amy Dobbie
CARRIED.	

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

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

MOTION:	To accept the Report on Regulatory Operations from the CEO as presented
MOVED:	Shelley Burns
SECOND:	Brook Dyson
CARRIED.	

5. Council Governance Policy Confirmation

5.01 Review/Issues Arising

5.01(i) 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(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.

5.01(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 - Executive Limitations Policies (Part 2)

Council members were asked if there were any members who wished to discuss the Executive Limitations Policies (Part 2). The Chair provided a detailed overview of the amendments being presented as outlined in the Memorandum included within the Council's package and responded to any questions that arose during the discussion. Ms. Rebecca Durcan, Legal Counsel, noted an error in EL13.01. Council reviewed the error and approved the proposed amendment to the policy.

MOTION:	To accept the recommendations of the Governance Policy Review Committee as amended.
MOVED:	Lisa Fenton
SECOND:	Paul Phillion
CARRIED.	

6. Business

6.01 Appointment of Auditors of next fiscal year

Mr. Brook Dyson, presented on behalf of the Audit Committee. He advised Council that the College's current Auditor's term had ended at the conclusion of the fiscal year 2022-2023 and that the Auditor would need to be appointed for a new term. He sought the approval of Council to have the existing auditor of Kriens-LaRose LLP be appointed as the Auditors for the next fiscal year 2023-2024.

MOTION:	To accept the Appointment of Auditors of next fiscal year 2023-2024.
MOVED:	Paul Phillion
SECOND:	Dean Catherwood
CARRIED.	

6.02 Unaudited Financial Statement at Q1

A copy of the Unaudited Financial Statement at Q1, was circulated in advance of the meeting. Ms. Agnes Kupny, Director of Operations, reviewed the report with the Council members and responded to any questions that arose during the discussion.

MOTION:	To accept the unaudited financial statement at Q1 as presented
MOVED:	Paul Phillion
SECOND:	Tiffany Lloyd
CARRIED.	

6.03 Committee Appointment

Ms. Tiffany Lloyd presented the memorandum as presented by the Governance Committee that was circulated in advance of the meeting regarding a new appointee to the Inspection Committee. She welcomed any questions from Council. Ms. Tiffany Lloyd sought the approval of Council to have the new appointee appointed to the Inspection Committee.

MOTION:	To approve the Committee appointment as presented.
MOVED:	Jacob Scheer
SECOND:	Jonathan Beatty
CARRIED.	

7. Council Education

7.01 Council Governance Model

The Chair and Mr. Barry Sullivan, member of the Governance Policy Review Committee (GPRC) presented on Council's Policy Governance Model. They discussed the new model the committee will be following, and how they will be presenting policies in different formats starting at the November 2023 meeting. They also discussed the new process of how the GPRC will be engaging Council in policy reviews.

7.02 Council Process

Mr. Parr went over Council's processes and procedures.

9. Other Business

9.01 Meeting Evaluation

The Chair advised the Council members that a link will be provided via email for each member to copy and paste into a web browser to complete an evaluation form immediately following the end of the meeting. The Council advised that they enjoyed the in-person training and meeting and inquired on the pricing of the event. They discussed that if the costs were reasonable maybe more in-person events could be done in the future. The cost of the in-person event will be provided at the next Council meeting.

10.9.02 Next Meeting

The Chair noted for the Council that the next regularly scheduled meeting is set for November 29, 2023. This meeting will be held virtually via video conference.

11. Adjournment

11.01 Motion to Adjourn

The Chair asked for a motion to adjourn the meeting. The meeting adjourned at 11:26 a.m.

MOTION:	To adjourn the meeting.
MOVED:	Denis Marier
SECOND:	Jonathan Beatty

Recorded by: Dilyara Madeira
Executive Liaison
September 27, 2023

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

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

MEMORANDUM

DATE: November 27, 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 (iii) of the Consent Agenda. The following reports are included:

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

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



The College of Naturopaths of Ontario

AUDIT COMMITTEE REPORT

September 1, 2023 – October 31, 2023

During the reporting period the Audit Committee was not required to undertake any activities and did not meet.

Brook Dyson
Chair
Audit Committee
November 1, 2023



The College of Naturopaths of Ontario

EXAM APPEALS COMMITTEE CHAIR REPORT

September 1 - October 31, 2023

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

The Exam Appeals Committee did not have any scheduled meetings in the September 1 through October 31 reporting period.

Thank you,

Rick Olazabal, ND (Inactive)

Chair

Exam Appeals Committee

October 26, 2023



The College of Naturopaths of Ontario

EXECUTIVE COMMITTEE REPORT

November 2023

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

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

Respectfully submitted,

Dr. Jordan Sokoloski, ND

Council Chair

16 November 2023



The College of Naturopaths of Ontario

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT

November 2023

Between September 1 and October 30, 2023, the Inquiries, Complaints and Reports Committee held two regular online meetings – September 7 and October 5, and one emergency meeting on October 23.

September 7, 2023: 5 matters were reviewed, ICRC members drafted 3 reports for ongoing investigation, and approved 2 Decision and Reasons. An Oral Caution was also delivered to a registrant prior to the meeting.

October 5, 2023: 7 matters were reviewed. ICRC members drafted 2 reports for ongoing investigations and approved 1 Decision and Reasons. An Oral Caution was also delivered to a registrant prior to the meeting. In addition, ICRC members reviewed and approved changes to the committee's terms of reference.

October 23, 2023: the panel reviewed one matter and considered whether interim actions were necessary.

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

Dr. Erin Psota, ND
Chair
November 14th, 2023



The College of Naturopaths of Ontario

GOVERNANCE COMMITTEE CHAIR REPORT

November 2023

The Governance Committee met once (on September 14th) during the September 1, 2023 – October 31, 2023 reporting period.

At that meeting, the Committee reviewed and accepted one volunteer application. The Committee also took the opportunity to review its Terms of Reference and agreed to make a minor grammatical amendment.

As of the writing of this report, the Committee is scheduled to meet again on November 16, 2023.

I would like to take the opportunity to thank Committee members and staff for their time, effort and participation.

Respectfully submitted,

Hanno Weinberger, Chair
November 2023



The College of Naturopaths of Ontario

PATIENT RELATIONS COMMITTEE CHAIR REPORT

September 1, 2023 – October 31, 2023

During the reporting period of September 1 to October 31, 2023, the Patient Relations Committee received an electronic update on the amount of funding for therapy/counselling accessed to date.

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

Thank you,

Dr. Gudrun Welder, ND
Chair
November 2023



The College of Naturopaths of Ontario

QUALITY ASSURANCE COMMITTEE REPORT November 2023

Meetings and Attendance

Since the date of our last report to Council in September, the Quality Assurance Committee has met on two occasions, via teleconference on September 19th and October 24th, respectively. There were no concerns regarding quorum.

Activities Undertaken

Over these past two meetings, the Committee continued with its regular ongoing review and approval, where appropriate, of new and previously submitted CE category A credit applications.

In addition, at its **September** meeting, the Committee reviewed and discussed staffs' presentation of information from the Committee's 2022/23 Annual Report that was submitted to Council in July.

The Committee also made a determination with respect to one Registrant's submission on how they had addressed the discrepancies identified in their Peer and Practice Assessment and dealt with three CE Reporting deadline extension requests.

Further, the Committee reviewed and provided feedback with respect to two new Self-Assessments proposed by staff, on the Inspections Program and Quality Assurance Program, respectively. The Committee then considered background information provided by staff on the operation of the Self-Assessment component of the QAP over the last couple of years and determined that for 2024/25, 'Registrants would again be required to complete 3 Self-Assessments, including: **Delegation** and **Fees and Billing** as **mandatory** Self-Assessment topics, with one additional topic to be chosen from the Self- Assessment topics list'.

The Committee also considered and approved proposed amendments to its Terms of Reference for submission to the Governance Policy Review Committee for their consideration.

Finally at the September meeting, the Committee reviewed and approved its meeting schedule for 2024.

In addition, at its **October** meeting, the Committee first reviewed and made determinations with respect to 4 Registrant submissions on how they had addressed discrepancies identified in their Peer and Practice Assessments.

The Committee also reviewed and made decisions with respect to one Peer and Practice Assessment date extension request, as well as one Group III CE Reporting deadline extension/ amendment request.

And finally, the Committee completed a final review and approved the proposed Inspection Program, Fees and Billing, Quality Assurance Program and Delegation Self-Assessments as amended, for inclusion on the available Self-Assessment topic list for 2024.

Next Meeting Date

November 28, 2023.

Respectfully submitted by,
Barry Sullivan, Chair.
November 13, 2023.



The College of Naturopaths of Ontario

REGISTRATION COMMITTEE REPORT (November 2023)

At the time of this report, the Registration Committee met on September 20th.

Applications For Registration

The Committee reviewed one application for registration to determine eligibility for registration in Ontario under section 15(2)(a) of the Health Profession's Procedural Code (the Code) in relation to currency provisions in the Registration Regulation.

Exam Remediation- Unsuccessful Exam Attempts

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

Policy Amendments

Minor draft amendments to the Prescribing & Therapeutic Program and Exam Policy were reviewed.

Committee Terms of Reference

The Committee reviewed and discussed the Committee Terms of Reference and provided feedback for minor changes.

Danielle O'Connor, ND
Chair
Registration Committee
November 15, 2023

150 John St., 10th Floor, Toronto, ON M5V 3E3
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The College of Naturopaths of Ontario

DISCIPLINE COMMITTEE REPORT

November 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 September to 31 October 2023 and provides a summary of the hearings held during that time as well as any new matters referred to the DC by the Inquiries, Complaints and Reports Committee (ICRC) of the College. Committee meetings and training are also reported.

Overview

As of October 31, 2023, there were two ongoing matters before the Committee (DC22-04 and 22-05). Hearing dates for both of these matters have been scheduled.

Discipline Hearings and Decision and Reasons

No discipline hearings were held during the reporting period.

On September 12, 2023, the Panel issued its Decision and Reasons for the CONO vs. Colbran Marjerrison matter (DC22-06).

New Referrals

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

Committee Meetings and Training

On October 13, 2023, the Committee held its annual meeting and training, which was led by Independent Legal Council Lonny Rosen and Elyse Sunshine of Rosen Sunshine LLP. The training focused on credibility assessment, deliberations, and legal tests. In addition, the Committee reviewed and approved the amended Rules of Procedure and the Terms of Reference of the Discipline and Fitness to Practise Committees. The training was well attended and the recording has been made available for members unable to be in attendance that day.

Respectfully submitted,
Dr. Jordan Sokoloski, ND, Chair

16 November 2023

November 29, 2023

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The College of Naturopaths of Ontario

INSPECTION COMMITTEE REPORT **Sept-Oct 2023**

Committee Update

Since the last Council meeting the Inspection Committee has met once by teleconference on September 21st, 2023.

Inspection Outcomes

The Committee reviewed Reports for 3 premises.

The outcomes were as follows:

- Part I
 - One pass with two recommendations
- Part II
 - 0
- Existing 5 Year Inspections
 - One pass
 - One pass with one condition
- Fail
 - 0

Inspection outcomes in response to submissions received:

- Submissions were received from one premises that had a Part I inspection and two premises that had Part II Inspections, and four premises that had the 5-year inspection completed, the final outcome for all seven premises was a pass.

Type 1 Occurrence Reports

- The Committee reviewed one Type 1 occurrence report and requested more information to be submitted for review at a subsequent meeting.

Inspection Deferral

- One inspection deferral was granted.

Closing Remarks

The committee reviewed and discussed the terms of reference and various

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amendments were approved. We are looking forward to welcoming a new committee member at our next meeting.

Best regards,

Dr. Sean Armstrong, ND
Chair, Inspection Committee
May 23, 2023



The College of Naturopaths of Ontario

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

Meetings and Attendance

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

Activities Undertaken

At its September meeting, as part of the mandated detailed annual review of all Policies, the Committee reviewed and discussed the Executive Limitations policies Part 2, namely EL10 to EL17. No substantive Council member feedback was received, however members of the GPRC submitted their feedback, which was considered and discussed.

Additionally, the Committee reviewed and discussed 2 options of a proposed policy review schedule. After some discussion, the Committee agreed that starting January 2024 they will adopt option 2 of the proposed review schedule. It was also agreed that Council will continue to follow the existing review schedule.

The Committee also discussed various ways of engaging Council members in policy review. The Committee agreed that at each Council meeting, they will host various types of presentations (PowerPoints, role play, case studies, etc.) on different policies that will allow Council to better understand the policies. With the incorporation of the Committee education segments during Council meetings, Council will now be asked to review the policies and to be prepared for a discussion at the next Council meeting. Feedback will no longer be asked to be provided when reviewing the policies. Any feedback, questions or comments received at the Council meeting will be brought to the attention of the Committee at their next meeting.

Following discussions and amendments of the Ends Priorities Policy over the past several committee meetings, the committee approved the proposed policy. As this policy is scheduled for review at the November meeting, the Committee agreed to bring this amended policy to Council at their November meeting, for approval.

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



The College of Naturopaths of Ontario

Next Meeting Date

January 9, 2024

Respectfully submitted by,

Dr Brenda Lessard-Rhead, ND (Inactive)

Chair

November 1, 2023



The College of Naturopaths of Ontario

STANDARDS REVIEW COMMITTEE REPORT

September 1, 2023 – October 31, 2023

During the reporting period the Standards Committee had one meeting scheduled for October 25, 2023. The scheduled meeting was cancelled as College staff continue their edits, re-organizations and drafting new Standards based on the Committees feedback.

The Committee is next scheduled to meet on February 7, 2024 where it will review the completed updates and amendments to the Standards in order to finalize them for consultation.

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



The College of Naturopaths of Ontario

EQUITY, DIVERSITY AND INCLUSION COMMITTEE REPORT

September 1, 2023 – October 31, 2023

For the reporting period of September 1 to October 31, 2023, the Equity, Diversity, and Inclusion Committee (EDIC) had one meeting scheduled for October 23, 2024. The scheduled meeting was cancelled as staff continue to present the EDI Lens Tool to the various College Committees to be used in the review of their policies and processes.

The Committee is scheduled to meet on February 13, 2023, to review the EDI Lens Tool feedback.

Dr. Jamuna Kai, ND
Co-Chair
November 2023

Dr. Shelley Burns, ND
Co-Chair
November 2023

MEMORANDUM

DATE: November 27, 2023

TO: Council members

FROM: Andrew Parr, CAE
Chief Executive Officer

RE: Items Provided for Information of the Council

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

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

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

No.	Name	Description
1.	Grey Areas (No. 283 & 284)	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 (September and October 2023)	This is an update provide by Richard Steinecke to the members of the Health Profession Regulators of Ontario (HPRO), formerly the Federation of Health Regulatory Colleges of Ontario (FHRCO). The updates identify legislation or regulations pertaining to regulations that have been introduced by the Ontario Government. The updates for the past quarter are provided to Council in each Consent Agenda Package.
3.	Council Meeting Evaluation	Graphs summarizing the responses of Council member's feedback from the September 2023 Council meeting.



GREY AREAS NEWSLETTER

A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

sml-law.com/resources/grey-areas/

Reflecting on Reporting and Responding Requirements

by Julie Maciura
October 2023 - No. 283

Vastly different words are used to describe the concept, each with their own moral implications: “snitch”, “informant”, “whistleblower”, “professional”. Whatever term is used, an obligation to report problematic conduct by other registrants is an important regulatory tool. Such information enables the regulator to investigate issues of misconduct, incompetence, or incapacity that may place the public at risk and that might otherwise never be known.

An example of a [mandatory reporting provision](#) that, anecdotally at least, has contributed to the protection of the public is the obligation on Ontario health practitioners to report information received in the course of their practice that another registrant has sexually abused a patient. That provision originated with the 1991 Final Report of the Task Force on Sexual Abuse of Patients commissioned by the College of Physicians and Surgeons of Ontario.

The Canadian armed forces has had a similar obligation on its member to report breaches of rules by other members, but it has [recently announced](#) that it would be

repealing that duty. This action was recommended by former Justice of the Supreme Court of Canada, Louise Arbour, in her final Report of the [Independent External Comprehensive Review](#).

Intuitively it seems surprising to entirely eliminate this tool for obtaining information about alleged misconduct. However, the recommendation makes more sense after reading Arbour’s concerns about the reporting requirement in the military setting:

- For many members of the armed forces, the fear of reprisals and ostracization outweighs the fear of not making a report (especially since in almost no case was anyone sanctioned for failing to make such a report).
- There is widespread mistrust in the investigation process that would result from any report. This was particularly true for the military’s ability to address sexual misconduct. This mistrust reflected a “structural barrier” in the “toxic masculinity” culture within the armed forces.

- The making of a report could harm the victim or, would at the least, remove their control over the process.
- The duty was too broad. It applied to any breach of the rules and to almost all military personnel, including the recipient of the misconduct, including for sexual abuse.
- Despite the breadth of the duty, there remained confusion on how, and to whom, a report should be made.

It is worth noting that there is a distinction between the military's duty to report and that of many regulated professions. The military duty to report is typically in relation to conduct that harms staff and colleagues rather than conduct that jeopardizes the welfare of clients or patients.

The concerns identified in Arbour's Report may have application to professional mandatory reporting requirements. For example, the mandatory reporting obligation for sexual abuse flowing from the 1991 Sexual Abuse Task Force Report anticipated many of these same concerns and included measures intended to address them. For example:

- The duty (at that time at least) was only in respect of sexual abuse of patients, a pressing and important issue.
- The identity of the patient cannot be included in the mandatory report without the prior written consent of the patient.
- There are heightened confidentiality obligations for the report. For example, the report cannot be disclosed to other regulators.
- The reporting obligation is accompanied by multiple protections for the patient, including a right to insist on a ban on the publication of their identity in any subsequent discipline hearings, a right to make an impact statement where sexual

abuse is proven, and access to a compensation fund for therapy.

- The introduction of the reporting obligation was also accompanied by an extensive educational initiative for registrants, patients, and members of the public, including the obligation on every health regulator to develop a sexual abuse prevention plan. Part of the education resulted from the mandatory revocation (for at least five years) of registrants who engaged in frank sexual acts with patients, which brought home to practitioners how seriously government was in its attempts to prevent and address the sexual abuse of patients.

Even with these refinements, the mandatory requirement to report sexual abuse continues to create challenges. For example, the duty includes having to report "behaviour or remarks of a sexual nature" which includes an isolated sexualized comment or joke. One suspects that there may be understandable reasons why some registrants pretend not to notice such remarks and therefore do not intervene, (such as reproving the registrant who made the remark or supporting the recipient patient), or make a formal report to a regulator. These reasons may include the power imbalance that exists between practitioners (such as that between doctors and nurses, or dentists and dental hygienists), or the likelihood that the observer may themselves have been subject to similar conduct from the registrant. Anecdotally, it seems most reports are made by registrants who are informed about such conduct by the patient after the fact, rather than by actual observers of the conduct.

There are other options that exist, besides a rigid mandatory reporting obligation, that some regulators have been employing. These include:

1. A voluntary reporting mechanism in which the registrant can weigh the surrounding circumstances (including the nature of the conduct and the



GREY AREAS NEWSLETTER

A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

sml-law.com/resources/grey-areas/

How They Do Things Across the Pond

by Bernie LeBlanc
November 2023 - No. 284

Since the establishment of the Professional Standards Authority (PSA), Canadian regulators have been monitoring professional regulation developments in the United Kingdom. Some, but certainly not all, of the approaches taken in the UK have been adapted by some Canadian jurisdictions and regulators. Most notable was the enactment of the [*Health Professions and Occupations Act*](#) in British Columbia.

However, the evolution of administrative law for professional regulators has diverged somewhat between the UK and Canada. Some of these differences and similarities are apparent from the recent UK court decision in [*Professional Standards Authority for Health and Social Care v Social Work England & Anor*](#) [2023] EWHC 2125 (Admin) (18 August 2023).

There, a social worker was disciplined for abusing and neglecting her children (e.g., by making demeaning and disturbing comments to them and by overdosing in their presence), which resulted in the intervention of the child welfare authorities, and for dishonestly denying during a job interview that she was

or had been under investigation by her regulator.

The discipline panel found that her fitness to practise was impaired in that she failed to promote and maintain public confidence in the social work profession and that she failed to promote and maintain proper professional standards. However, the panel “concluded that a finding of impairment was not necessary to protect, promote and maintain the health, safety and wellbeing of the public.” As a result, it only imposed a warning.

The oversight body, the PSA, appealed the decision. It argued that the factual determinations of the discipline panel supported a finding of impairment in the third category (i.e., the health, safety and wellbeing of the public). It also argued that a suspension was necessary in the circumstances.

Some Differences

The first major difference between the UK process and most Canadian ones is that an oversight body can initiate appeals to the courts regarding discipline findings that it believes are unacceptable. While such appeals are relatively rare, the [PSA has had a remarkable record of success](#) with respect to appeals it has brought. [Interestingly, the regulator was also a party to the appeal. Initially it opposed the PSA's position but then changed its position to support the appeal.]

Another major difference is that what most Canadian regulators call "discipline" hearings are called "fitness to practise" hearings in the UK. In Canada, the term "fitness to practise" usually refers to incapacity issues rather than conduct concerns. This is not just a matter of semantics. The UK approach focusses more on the potential for future misbehaviour than on sanctioning past misconduct. The UK approach is analogous to those relatively few Canadian professional regulators whose ambit is largely confined to addressing whether the person will act with honesty, integrity and in accordance with the law.

This non-punitive approach is particularly important when it comes to the issue of sanction. Following the leading decision in [Bolton v Law Society](#) [1994] 1 WLR 512, the Court noted that "it follows that considerations which would ordinarily weigh in mitigation of punishment have less effect on the exercise of a regulatory jurisdiction than on the ordinary run of sentences imposed in criminal cases." In Canada, courts often apply some criminal sentencing concepts, especially mitigating factors, to discipline sanctions (e.g., [College of Physicians and Surgeons of Ontario v McIntyre](#), 2017 ONSC 116 (CanLII)).

Rather, consequences for the individual registrant are generally motivated by ensuring that their future behaviour is

acceptable and, to a lesser degree, to ensure public confidence in the regulator. However, the Court did say: "The reputation of the profession is more important than the fortunes of any individual member."

Many Similarities

Many other aspects of the decision would be familiar to Canadian regulators. For example, in this case, the social worker was self-represented, not an unusual occurrence in Canada.

The Court also expressed the need to afford deference to the disciplinary panel. For instance, on the issue of sanction, the Court said:

Given that the Panel usually has greater expertise in the social work field than the court, an appeal court should only interfere with such an evaluative decision if (1) there was an error of principle in carrying out the evaluation; or (2) for any other reason, the evaluation was wrong, that is to say that it was an evaluative decision which fell outside the bounds of what the Panel could properly and reasonably decide....

Similarly, the Court allowed that regulators should be cautious when scrutinizing the private life of registrants:

I accept that, to some degree, a social worker may be able to rely on a division between her private and professional lives. A social worker who has a transient personal crisis may not have impaired judgment in relation to his or her professional caseload. If all that the Panel had found was that MDR had used inappropriate language or displayed undue melancholy to her children during an isolated and stressful part of her life, this appeal would be unfounded.

However, the Court agreed with the discipline panel that this sort of conduct, by a social worker, was relevant to her fitness to practise the profession. A pattern of abuse, to the point of requiring intervention by child welfare authorities, reflected on both her ability to provide those sorts of services in the future and on public confidence in the regulator and the profession as a whole. With respect to her dishonesty during her job interview, the Court said:

The recruitment of social workers has at its centre the objective of keeping safe vulnerable adults and children. By being dishonest in her interview, MDR placed her own interests above the protection of the health, safety and well-being of the public contrary to the overarching objective.

When it came to sanction, the Court found that the discipline panel had made an irrational decision given its evidentiary findings. The social worker had not demonstrated insight into the seriousness of her conduct or its impact on her practise of the profession. Having found that the social worker's conduct was "attitudinal and behavioural" ... "it ought to have been plain to the Panel that her attitudes could not reasonably be regarded as having changed."

Also similar to Canadian courts, the UK Court affirmed that the social worker's contesting of the allegations, even after the finding was made by the discipline panel, should not be treated as an aggravating factor. However, the Court treated the inconsistent assertions of the social worker (e.g., about whether she

knowingly made false statements during the job interview) and her calling her daughter to give testimony contrary to the daughter's previous written statement, as rebutting the social worker's assertion of insight.

On this point, the Court said that the social worker":

was entitled to mount a vigorous defence to the charges against her; but her decision to call her daughter to give untruthful evidence to the Panel went significantly beyond offering an alternative account of past events and went beyond "a failed attempt to tell the story in a better light than eventually proved warranted".... It demonstrated a lack of honesty. MDR's decision to place dishonest evidence before the Panel fatally undermines the Panel's conclusion that there was no risk of repetition of the dishonesty shown to DCC.

Outcome

The Court said: "the Panel erred in concluding that a finding of impairment was not necessary on grounds of risk to the protection of the health, safety and well-being of the public...." While the Court was tempted to impose a one-year suspension, it, like many Canadian courts, deferred to the expertise of the regulator. The Court remitted the matter to the regulator to make a fresh finding on sanction.

FOR MORE INFORMATION

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WANT TO REPRINT AN ARTICLE?

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- wishes of the patient or client) in exercising judgment on whether to make a report.
2. A whistleblower scheme which is similar to a voluntary reporting mechanism, but can include heightened confidentiality protections for the reporter (analogous to the “Crime Stoppers” program) and which can also provide financial rewards for reporters, such as is used by [some securities regulators](#).
 3. A duty to intervene without specifying the nature of the intervention. This approach facilitates the exercise of judgment in the pursuing of the most effective option (e.g., speaking privately with the offending registrant, supporting the client or patient, or raising the concern with the employer or other local authority). The UK regulator for physicians has recently [published guidance](#) that uses this approach to address discriminatory conduct.
 - a. Be reserved for serious concerns that jeopardize the welfare of vulnerable people (or else face the risk of widespread non-compliance by the profession and the damage (e.g., moral injury, guilt, etc.) that failing to report causes to registrants and public confidence in the regulatory regime);
 - b. Be accompanied by an education program for registrants, clients or patients, and members of the public to emphasize the seriousness of the conduct that must be reported;
 - c. Include measures to respect the wishes of and support the concerns of the target of the misconduct so that they are not revictimized;
 - d. Result in compassionate and effective regulatory action so that reporters have confidence that their report will make a real difference; and
 - e. Result in credible enforcement consequences for those failing to make a mandatory report when they should have.

These options have their disadvantages, including leaving it open to regulated professionals to not intervene or report at all or incentivizing what should be a professional expectation.

The primary implication of these developments is that regulators should carefully and thoughtfully approach the development of a reporting or responding obligation or expectation. For example, mandatory reporting obligations might balance the following factors:

Perhaps the lesson that professional regulators can learn from the experience of Canada’s military is that a mandatory (or expected) reporting obligation is an important, regulatory tool that should be employed in a thoughtful, nuanced manner, taking into consideration all relevant factors, and learning from existing schemes, so as to reduce unintended consequences.

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From Julie Maciura

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Ontario Bills

(www.ola.org)

Bill 79, Working for Workers Act, 2023 - (Government Bill, passed third reading) Bill 79 will, among other things, expand the mandate of non-health regulators to consult with the government to ensure that “the people of Ontario have access to adequate numbers of qualified, skilled and competent regulated professionals”.

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

Proposed Regulations Registry

(www.ontariocanada.com/registry/)

Pharmacy Act – There was a very brief consultation (opened September 11, 2023, and closed September 26, 2023) on the following (taken directly from the government website):

- Permit pharmacists, registered pharmacy students, interns, and pharmacy technicians to administer the RSV vaccine;
- Permit pharmacists to prescribe Oseltamivir (Tamiflu);
- Transition the authority for pharmacists to prescribe Paxlovid from a regulation made under the Regulated Health Professions Act, 1991, to a regulation made under the Pharmacy Act, 1991;

- Transition the authority for pharmacy professionals to administer COVID-19 vaccines from a regulation made under the Regulated Health Professions Act, 1991, to a regulation made under the Pharmacy Act, 1991;
- Permit pharmacy technicians to administer vaccines set out in Schedule 3 of the College's regulation; and,
- Remove the age restrictions for vaccine administration by pharmacists, registered pharmacy students and interns and pharmacy technicians.

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

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

Bonus Features

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

Vexatious Litigant Order Upheld

The Manitoba Court of Appeal issued a 46-page decision upholding an order limiting further litigation against the nursing regulator in that province: *College of Registered Nurses of Manitoba v Hancock*, 2023 MBCA 70 (CanLII), <<https://canlii.ca/t/k0023>>. The case discusses the development and current status of vexatious litigant proceedings.

Integrity Testing

A constable “was assigned to maintain the perimeter security at a crime scene. He entered the crime scene, leaving its perimeter insecure, and took \$300 cash. The next day, he divulged to his supervisors that he had taken the \$300. The Alberta Serious Incident Response Team (ASIRT) opened an investigation...”. As part of the investigation of his conduct, the oversight body:

conducted two “integrity tests” as part of its investigation. The first integrity test occurred on May 10, 2017. The respondent was approached by an undercover police officer who handed him a bag and claimed to have found it. The respondent went through the bag and took \$25 in cash and two \$50 prepaid gift cards. He did not document any part of the event.

The second integrity test took place on August 2, 2017. The respondent was asked to assist in the search of a reported stolen vehicle. He took \$88 and two packages of cigarettes from the vehicle. He was arrested after his shift concluded.

He was found guilty criminally of breach of trust. The resulting discipline hearing resulted in an order of dismissal. However, the Review Board lowered the sanction to a two-year reduction in rank. The regulator sought leave to appeal. In a remarkable decision, the Court went at length about the unreasonableness of the Review Board's decision but denied leave to appeal because it did not raise a legal question of general importance: [Edmonton \(Police Service\) v Ahlstrom](#), 2023 ABCA 248 (CanLII).

A broader issue, however, is the use of "integrity testing" of undercover investigators by regulators, which is sometimes argued to be entrapment. The [law is clear](#) that this is a legitimate investigative technique where it is part of a bona fide investigation, meaning there is a reasonable suspicion to support the investigation and there is a genuine purpose in investigating the conduct. Regulators frequently use the technique to investigate concerns about the illegal practice of a profession.

However, there are considerable constraints on the use of "integrity testing". The process can only offer an opportunity to engage in the suspected conduct; it cannot involve any pressure or inappropriate inducements.

In addition, care must be taken as to who is monitored. [Virtue testing one's adjudicator](#) in an upcoming hearing is inappropriate.

"Integrity testing", while a valid investigative tool, should be employed carefully.

One Appeal or Two?

Many discipline panels conduct their hearings in two parts. The first deals with the merits of the allegations (also known as the "finding" stage). If a finding of misconduct or incompetence is made, the issue of sanction (or "penalty") is then addressed, often on a different day.

An important question that then arises is whether an appeal can be brought with respect to the merits decision or whether there can only be an appeal after a decision on sanction has also been made. Since most appeals must be commenced within a short period of time, knowing the answer can be crucial to exercising one's rights. Also, some statutes provide for an automatic interim suspension after serious findings have been, such as sexual abuse, until the sanction has been determined. If there is no right of appeal from the merits stage and the sanction hearing is delayed, the registrant could be suspended for a lengthy period of time until they are able to appeal.

An Alberta court addresses this issue in [MA v Alberta College of Pharmacy](#), 2023 ABKB 522 (CanLII). There the regulator declined to process either an internal appeal or a reconsideration of the interim suspension until the decision on sanctions was rendered because, in its view, the hearing was not yet over and so no right of appeal had been created. The registrant brought an urgent application to the Court for a stay of the interim suspension.

The Court noted that appeals are creations of statute, and the registrant could only succeed if the legislation intended to allow for an appeal of the merits decision itself (prior to the sanctions phase). In reviewing the language and the purpose of the scheme, and by making analogies to other proceedings, the Court concluded that there was indeed a right of appeal once there were written reasons produced as a result of the decision on the merits. A further right of appeal existed once a written sanctions decision was issued, otherwise, registrants would have no opportunity to challenge interim suspensions if there was a long delay between the merits stage and the sanctions stage. However, the Court hastened to add that there was no right of appeal for interim decisions made in the course of the hearing (e.g., evidentiary rulings) to allow that that would result in an unintended multiplicity of proceedings.

In the circumstances, the Court concluded that the interests of justice required it to address the issue of whether to stay (i.e., lift) the interim suspension. The Court noted that the legislation required that the hearing panel impose an interim suspension when there was a finding of sexual abuse and that the principle of zero tolerance of sexual abuse by health professionals weighed heavily in favour of protecting the public (by way of interim suspension) pending the decision on penalty. The “consent” to the conduct by the patient (who was in a long-term relationship with the registrant) was not a mitigating factor. However, in the circumstances, including the fact that there were reasonable arguments to be made by the registrant in their appeal and the adverse consequences for the registrant’s pharmacies because of the suspension, the Court concluded that the public could be protected through other measures. The Court ordered that the suspension was to be lifted subject to various conditions, including that the registrant not be alone with any patients and that the registrant not provide services to anyone with whom they are or were in a sexual relationship.

Participants in discipline hearings must carefully consider whether there are in fact one or two rights of appeal in light of the particular provisions found in the enabling legislation at issue.

Complaints Against Adjudicators

When a participant in a discipline matter is concerned about the conduct of an adjudicator, they typically bring a motion to the discipline panel. However, where an adjudicator is a registrant, it is also possible to make a misconduct complaint against them to the regulator. How should a regulator respond? In most cases it would be inappropriate for a complaints screening committee to interfere with the processing of a discipline matter. There might be extremely rare exceptions where the impugned conduct was outside of the panel member’s discipline role (e.g., if the adjudicator allegedly sexually harasses a participant in a hearing or solicits a bribe).

Many complaints screening committees have the authority to take no action about a complaint that is frivolous, vexatious, or an abuse of process. That option might be appropriate in many cases where a complaint is made about a registrant-adjudicator’s conduct in a hearing. In those cases, the screening committee might direct the hearing participant to take the issue up with the tribunal itself.

This situation arose in [Deokaran v. Law Society Tribunal and Law Society of Ontario](#), 2023 ONSC 5432 (CanLII). The registrant complained about the adjudicative conduct of the Chair of the discipline tribunal. The details are unclear, but it appears to relate to the refusal of the Chair to recuse themselves from the registrant's hearing despite objections that the Chair was biased, and allegations that the Chair acted in a discriminatory manner and failed to provide procedural fairness. In an unusual step, the regulator "transferred" the complaint to the tribunal itself. Also unusual, the tribunal advised that it would look into the complaint once the registrant's discipline hearing was concluded.

The registrant sought judicial review of both the rulings by the Chair and of the failure of the regulator to deal with the complaint. The Divisional Court found that the application was premature and there were no exceptional circumstances warranting intervention before the discipline process was concluded. The Court said: "Characterizing an issue as a question of jurisdiction or denial of procedural fairness does not automatically create "exceptional circumstances" warranting early judicial intervention" The Court also noted that the registrant had already caused delays in the case that was more than two years old, with the hearing on the merits yet to begin. The Court said the registrant could make these arguments before the tribunal.

While this case does not provide a definitive ruling on the issue, it supports the idea that complaints screening committees can generally decline to determine, on their merits, complaints about the regulator's adjudicators in relation to conduct that allegedly takes place in the course of a discipline matter.

To Discipline or Not to Discipline

In a recent case HPARB discussed the considerations an Inquiries, Complaints and Reports Committee (ICRC) should take into account when disposing of a complaint. It said:

The Board notes that in assessing the appropriate disposition in a complaint, a committee will consider many factors, including the seriousness of the deficiency, whether there is a single concern or a number of concerns about the conduct at issue, the content of a physician's response, his or her insight as to areas for improvement, and the physician's complaints or discipline history with the College.

The case involved an estate dispute where, apparently, the widow of a deceased patient with severe Alzheimer's disease left nothing to support the widow. The estate trustee was the patient's son. The widow's daughter asked a physician for information about the deceased's medical history. The physician provided extensive information in an inappropriately worded letter without the consent of the estate trustee. This was contrary to the privacy rules. The physician acknowledged her error, apologized, and consented to a remedial agreement. Applying the above criteria, HPARB upheld that decision. See: [Dbd v Glassco](#), 2023 CanLII 85393 (ON HPARB).

From Julie Maciura

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Ontario Bills

(www.ola.org)

Bill 144, Healthcare Staffing Agencies Act, 2023 – (*Private Members’ Bill, passed first reading*) Bill 144 would impose significant restrictions on the ability of healthcare staffing agencies to charge facilities much higher amounts than employees are paid at the facility where they work.

Bill 142, Better for Consumers, Better for Businesses Act, 2023 – (*Government Bill, passed first reading*) Bill 142 repeals and replaces the current *Consumer Protection Act*. Various provisions, including disclosure obligations, rules about providing credit or accepting prepayment for services, and consumer remedies such as rescission rights, might affect complaints about registrants, especially those receiving private payment for their services.

Bill 135, Convenient Care at Home Act, 2023 – (*Government Bill, passed second reading and referred to the Standing Committee on Social Policy*) Bill 135 creates a corporate entity, the Service Organization, to be called Ontario Health atHome, to coordinate and provide home and community care services to patients. Bill 135 amends the *Connecting Care Act, 2019*. The amendments would “consolidate the 14 Local Health Integration Networks (LHINs) into a new service organization named Ontario Health atHome. LHINs would no longer exist, and the Local Health System Integration Act, 2006 (LHSIA), would be repealed. Ontario Health atHome would assume all staff, service contracts with Service Provider Organizations (SPOs), and assets, liabilities, rights, and obligations of the LHINs.”

Bill 121, Improving Dementia Care in Ontario Act, 2023 – (*Private Member’s Bill, passed second reading, referred to Standing Committee on Social Policy*) Bill 121 provides that “the Minister of Health must develop a provincial framework designed to support improved access to dementia care. The Minister must table a report setting out the provincial framework in the Legislative Assembly and, afterwards, must prepare and table a report on the state of dementia care in Ontario. Each report must be published on a Government of Ontario website. The Ministry of Colleges and Universities must review its “Personal Support Worker Standard” to determine if certain changes should be made, including whether to require in-depth learning about person-centred dementia care.”

Bill 79, Working for Workers Act, 2023 – (*Government Bill, received Royal Assent*) Bill 79 will, among other things, expand the mandate of non-health regulators to consult with the government to ensure that “the people of Ontario have access to adequate numbers of qualified, skilled and competent regulated professionals”.

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)

There were no relevant regulations this month.

Proposed Regulations Registry

(www.ontariocanada.com/registry/)

Connecting Care Act – The consultation is in respect of Bill 135, described above. Comments are due by November 11, 2023.

Midwifery Act – The consultation is in respect of the following (as summarized on the website) proposed amendments to Ontario Regulation 884/93 (Designated Drugs):

- Update the existing drug list to reflect the drugs currently available in Canada, and which align with best practices for midwifery.
- Allow midwives to prescribe hormonal contraceptives, including intra-uterine devices, to women in the immediate post-partum period.
- Allow midwives to administer specific controlled drugs and substances to clients in labour and in the hospital setting only.
- Allow midwives to use or administer a drug or substance on the order of a registered nurse in the extended class (nurse practitioner) or a physician.

Comments are due by November 13, 2023.

Bonus Features

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

Harassment of Regulatory Lawyers Seems to Be Becoming More Frequent

The regulatory lawyer who presented the case at discipline against this registrant has now been the subject of two formal complaints to her regulator and a civil lawsuit. All have been dismissed. The most recent dismissal was on the basis that it was frivolous and vexatious: [*Yan v. Law Society of Ontario*](#), 2023 ONSC 5634 (CanLII).

Redacting Third Party Personal Health Information in Complaints Matters

In [S.S. v Yagi](#), 2023 CanLII 96912 (ON HPARB), the complaint was that a psychotherapist had a conflict of interest when providing couples therapy after having provided individual therapy to the spouse of the complainant. The complainant was aware of the prior individual therapy. HPARB upheld that determination by the ICRC that this was not a conflict of interest. HPARB also upheld as procedurally fair that the ICRC provided only a redacted version of the registrant's response to the complainant, removing information about the services provided to the complainant's spouse. The privacy interests of the complainant's spouse took priority over the complainant's ability to comment on the entire response of the registrant.

Does the Apology Act Apply to Complaints?

HPARB believes that the *Apology Act* prevents complaints screening committees from using a registrant's apology as a basis for concluding that a registrant made insensitive comments. In [Delaberrera v Vincent](#), 2023 CanLII 88163 (ON HPARB), a nurse was alleged to have "failed to provide the generic brand name of the medication and shouted, 'I don't know any other name, you have been on these medications for years, you should know your psych meds, aren't you a nurse?'" The respondent nurse denied the allegation. The screening committee directed that there be a caution in person to discuss communications with clients, relying in part on the generic tone of the written apology. HPARB held that the conclusion that the allegation that there were insensitive communications with the patient was not supported by the evidence, including the wording of the apology. However, as an aside, HPARB also said:

The Board notes that Counsel for the Applicant submitted that the *Apology Act* precluded the Committee from relying on the Applicant's letter of apology as part of the Committee's rationale for issuing the caution in person. The Board acknowledges that there is some force to this submission. Section 2(1)(a) of the *Apology Act* provides that "an apology made by ... a person in connection with any matter, does not, in law, constitute an express or implied admission of fault or liability by the person in connection with that matter." In addition, section 2(3) provides that "evidence of an apology ... is not admissible in any administrative proceeding." The Board finds that, in addition to there being no information in the Record to support the Committee's rationale for issuing the caution in person, the Committee's reference to and reliance upon the Applicant's letter of apology was an error in law and ought not to have formed any part of the Committee's analysis.

HPARB returned that part of the matter to the screening committee for a fresh decision.

Altering the Allegations

Once a matter has been referred to discipline, how much leeway does the regulator have to reword the allegations? That issue arose in [Moodley v. College of Physicians and Surgeons of Nova Scotia \(Hearing Committee\)](#), 2023 NSCA 70 (CanLII).

Three complaints were made against the physician. They were screened separately, and each was referred to discipline. After the referral, the allegations were reworded. The physician argued that this was not permitted.

The Court examined the language and scheme of the legislation. It noted that, in the legislation, the concerns were initially referred to as “complaints” when they were received by the Registrar, then as “matters” when they were before the screening committee, and then as “charges” before the discipline panel. The Court found that this varied language and the increasing formality of the process indicated that the language of the charges before discipline did not need to be identical to the matters that were referred by the screening committee. In fact, there could be enhanced fairness in making the concerns more precise at the discipline level.

The Court said that the substance of the allegations should not change. No significant change occurred here. For example, the Court found that the referral of the matter of performing an “unwanted” episiotomy was not substantively different in the formal charge of performing “an episiotomy contrary to the expressed wishes of the patient”.

This issue could have been avoided if the screening committee made only a referral in principle and had prosecuting counsel draft the formal “charges” before making the final referral to discipline.

On the facts, there was no need for the Court to address the issue of whether the regulator could, by motion before the discipline panel, amend the notice of hearing to include new or different concerns.

The physician also challenged the decision of the regulator to combine the three referrals into one notice of hearing. The Court found that there was nothing in the legislation preventing the consolidation of the referrals. The Court did indicate, however, that where the registrant asks for a severance of the allegations, the hearing panel must exercise reasonable discretion. For example, there is always a concern that there could be a propensity to use the evidence or finding on one of the charges to support a finding on the other charges.

The Court found that there had been no procedural unfairness in the process.

Conduct Unbecoming

What do the following scenarios have in common? A physician has a meltdown at a school concert and acts in a hostile and aggressive manner towards other attendees, including in front of children. A teacher has a dispute with their own children and fires a gun over their heads. A psychologist posts demeaning and degrading comments about individuals and groups on social media. A nurse posts criticisms on social media about the insensitive treatment of an elderly relative at a facility. See: *Rathe v. College of Physicians and Surgeons of Ontario*, 2013 ONSC 821 (CanLII), <https://canlii.ca/t/fwwzj>; *Fountain v. British Columbia College of Teachers*, 2013 BCSC 773 (CanLII), <https://canlii.ca/t/fxbkl>; *Peterson v. College of Psychologists of Ontario*, 2023 ONSC 4685 (CanLII), <https://canlii.ca/t/jzvdv>; *Strom v Saskatchewan Registered Nurses' Association*, 2020 SKCA 112 (CanLII), <https://canlii.ca/t/j9z2w>

In two of those cases the regulators' actions (discipline proceedings in *Rathe*, remedial training in *Peterson*) was upheld by the courts. In the other two matters the courts set aside the regulators' decision. The Saskatchewan Court of Appeal has offered further guidance as to when private conduct can attract regulatory scrutiny in *The College of Physicians and Surgeons of Saskatchewan v Leontowicz*, 2023 SKCA 110 (CanLII), <https://canlii.ca/t/k0f6v>. The facts, accepted by the Court, were that a fourth-year medical student engaged in sexual intercourse with a woman without a condom, against her expressed wishes, and hit her several times, again without her consent, leaving bruises. He had met the woman through a dating app and she was not his patient. The primary issue was whether this behaviour constituted conduct unbecoming so as to support the discipline finding made against him.

The lower Court set aside the finding for three reasons. The detailed description of sexual abuse in the regulator's by-laws referred to sexual behaviour with patients, not others. The Court was also concerned about the criminal language used by the discipline tribunal. In addition, the Court found no evidence that the conduct "would generate reputational concerns for either him or the medical profession at large".

The Court of Appeal characterized this analysis as a legal error. The statutory ability for the regulator to discipline its members for conduct unbecoming was not limited to the descriptions of professional misconduct in the by-laws. The use of language such as "sexual assault" is not restricted to the criminal sphere and the discipline tribunal did not make a finding of criminal liability. In addition, the Court of Appeal stated that in these circumstances it was open to the discipline tribunal to make inferences of reputational harm.

The Court of Appeal focussed on whether there was a nexus between the physician's conduct in his private life and the practice of the profession. Quoting *Strom*, the Court said:

As clarified in *Strom*, off-duty conduct may be professional misconduct "if there is a sufficient nexus or relationship of the appropriate kind between the personal conduct and the profession to engage the regulator's obligation to promote and protect the public interest" (at para 89). The test is whether the impugned conduct was such that it would have a "sufficiently negative impact on the ability of the professional to carry out their professional duties or on the profession to constitute misconduct" (at para 89)....

Strom went on to identify three competing interests at stake in connection with fair and effective self-governance: those of the public, those of the profession at large and those of the member. Balancing these interests requires a professional disciplinary body to examine the circumstances and have regard for the "full panoply of contextual factors particular to an individual case before making that determination"

The Court of Appeal stated that the contextual analysis should include the following:

- The nature of the profession,
- The nature of the private misconduct,
- The relationship between the private misconduct to the work of the profession and the characteristics necessary to practise the profession (e.g., whether the misconduct impaired the person's ability to practise the profession),

- Whether the person is identified as a member of the profession in engaging in the misconduct, and
- The degree of controversy created by the conduct.

The Court of Appeal concluded that it was reasonable for the discipline tribunal to decide that the private misconduct affected the physician's ability to practise the profession. The Court agreed that a core concept of the medical profession was to first do no harm, which required patients, including women who might have to disrobe, to trust the physician to place their health before the physician's personal wishes. The Court was also concerned that the physician might not have a strong sense of the need to obtain informed consent in the medical context in light of his misconduct. Interestingly, the Court did not mention the impact of the conduct on the physician's ability to treat women who had experienced sexual violence.

However, the Court returned the matter to the regulator to re-address sanction. It noted that the indefinite suspension ordered by the discipline tribunal did not take into account the lengthy disruption of the physician's career resulting from these events. The Court also noted that the discipline tribunal had improperly treated the physician's decision to defend the allegations and failure to acknowledge the allegations as an aggravating factor on sanction. In addition, the Court said there was a failure to recognize the remedial efforts that had already been made by the physician.

The role of regulators in scrutinizing the private lives of registrants will undoubtedly continue to be difficult to define. However, examining all the circumstances surrounding the conduct and assessing how it influences the practice of the profession (or the reputation of the profession) will make such determinations more consistent and defensible.

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

Hot on the Heels

Legislative reform for the regulation of professions in Canada seems to be gathering pace. Some of the themes contained in British Columbia's [Health Professions and Occupations Act](#) are contained in Nova Scotia's Bill 323, the [Regulated Health Professions Act](#). The Nova Scotia [government indicated](#) that the legislation incorporates some of the legislative reforms occurring in other provinces.

Some of the features of Bill 323 include the following:

- Structure and Objects
 - The Bill creates a single umbrella statute for the regulation of all health professions.
 - The Bill enables the government to create or amalgamate health regulators through regulation, rather than by enacting statutes.
 - The Bill explicitly defines the public interest served by health regulators, with the first object being protection the public from harm.

- Governance

- The Bill sets out a governance structure with small boards of directors (7 to 11 people), about half of whom are public members. The professional members do not necessarily have to be elected by the profession. Also, eligibility requirements can be set for the professional members of the Board. Board members will generally not serve on statutory committees. While the default process for picking public members is government appointment, there is the possibility of a separate, likely competency-based, selection process where enabling regulations are made.
- The Bill contemplates the possible establishment of joint committee panels with other regulators (e.g., those dealing with complaints or discipline where multiple registrants from different professions are involved).

- Oversight

- The Board can establish most of the regulatory processes through by-laws. However, the government can require modifications to most of these regulatory activities through regulation or, in many cases, by a simple direction issued by the government.
- The government can establish a quality assurance program for the performance of the regulators and make the results of such a program, including any assessment, public. The government also has the authority to audit a regulator and appoint an administrator for them.
- The government can request information from regulators for human resource planning and management. Regulators are also expected to engage in and report on equity initiatives.

- Regulatory Activities

- The Bill requires regulators to operate a continuing competence program. For some regulators this will involve practice reviews.
- Each regulator is required to include specified information on the public register, the content of which can be expanded by the government. The Bill also contemplates the creation of a public portal from which all registers can be accessed.
- Registrants have a broad mandatory reporting requirement for any professional misconduct, incompetence, conduct unbecoming (in their private lives), incapacity, or any other conduct by other registrants that constitutes a danger to the public.
- Registrants practising outside of the province who face regulatory action there (including a complaint) must disclose that action to the regulator and cannot practice in Nova Scotia without first receiving authorization from the regulator.
- The complaints process is detailed and comprehensive. The regulator can give advice to the registrant, the complainant, or third parties. The regulator can also offer a caution or, with the consent of the registrant, administer a reprimand or impose restrictions without first going to discipline.

Other Provisions of Interest

- The Bill sets out the minimum information that must be posted on the regulator's website including the results of any performance reviews of the regulator.
- Nothing in the proposed legislation prohibits employees from engaging in a lawful strike. This provision might create challenges where a regulator wishes to scrutinize strike activities that jeopardize the health and safety of a patient.

Coming hot on the heels of British Columbia's *Health Professions and Occupations Act*, Bill 323 reflects a trend that other jurisdictions may very well emulate.

A Reasonable Sanction

A Justice of the Peace (the JP) intervened several times when her son was charged with failing to yield before a traffic collision. The interventions included directly obtaining information from the prosecution, speaking with colleagues, speaking with the prosecuting paralegal about the disposition of the matter, inviting the judicial official who would be hearing at least part of the matter to dinner on the same day as the hearing, and disparaging the outcome of the proceedings to others. Some of the conduct occurred after she was warned by the Regional Senior Justice of the Peace to not involve herself in the matter. The full Review Council Panel found that she had failed to meet the standards expected of a justice of the peace. The majority of the Review Panel recommended that she be removed from office. The minority would have ordered a series of sanctions, including a healing circle (the JP was Indigenous), that would have restored her, eventually, to her position. The JP sought judicial review seeking the substitution of the minority disposition for that of the majority.

The primary issue was whether the majority of the Review Panel had appropriately considered the circumstances of the JP, as an Indigenous mother advocating for her son, given the history of the treatment of Canada's Indigenous peoples, including in the legal system. The Divisional Court held that the majority of the Review Panel had appropriately applied the principles from the Supreme Court of Canada decision in [Gladue](#). The Court said:

The majority reasonably found that the Applicant's indigeneity may have been "connected" to her immediate response to the adjournment of her son's trial, but that there was no "demonstrated connection" to the long and consistent pattern of misconduct over the course of about a year.

In finding the disposition of the majority to be reasonable, the Court noted the following nuances in the application of sanctioning principles to disciplinary matters:

- When considering whether something less than removal is appropriate, the Review Panel appropriately considered the JP's lack of insight. While the JP was entitled to make a vigorous defence, in this case most of the foundational facts were not disputed. Her position was that there was nothing wrong with her conduct. As such, it was reasonable to find that no disposition short of removal would be appropriate given the seriousness of the misconduct. The Court said that it was reasonable for the majority to conclude that a healing circle was unlikely to create the necessary insight.

- The Court also found that the majority had considered the public interest that would be served in not removing a judicial officer given the need for greater representation of members of the Indigenous communities in the legal system. The Court agreed that this was a relevant and important consideration, but said:
 - A lapse in judgment, inappropriate conduct in the heat of the moment, a visceral reaction to deeply held historic distrust of justice institutions – all of these could be forgiven – in the right circumstances – if, in the cold light of day, the moment having passed, the Applicant came to grips with her duties as a jurist. But that did not happen.
- The Court discussed at some length the use by the majority of the JP's lack of remorse when dealing with disposition. "The majority correctly stated and applied the law that 'absence of remorse' is the absence of a mitigating factor and not an aggravating factor ..." While there is a relationship between lack of insight and a lack of remorse (one cannot be remorseful for something one does not have the insight to appreciate was wrong), the Review Panel could look at the lack of insight, separate from a lack of remorse, as a major consideration as to why it recommended removal.
- It is often said that where a discipline panel finds that a practitioner's testimony was not credible, that finding cannot be used as an aggravating factor on sanction. The Court refined that proposition. The Court noted that many credibility findings do not relate to the honesty of a witness. For example, the witness' memory could be faulty. However, in this case the credibility findings had to be seen as demonstrating a lack of honesty or integrity by the JP. For judicial officers, absolute honesty and integrity are an essential component of their position. Given the nature of the misconduct, and the concern about lack of insight, the "nature and extent of the adverse credibility findings made against the Applicant were proper considerations on disposition..."

Interestingly, the Court also indicated that the reasons of the minority of the Review Panel were also reasonable suggesting that, if that had been the final disposition, the Court would have upheld it as well. That suggestion reinforces the deference that should be given by the Court to decisions on sanction. The Divisional Court's decision can be found at: [Gibbon v. Justice of the Peace Review Council](#), 2023 ONSC 5797 (CanLII).

Abrametz: Ten Years Later

More than ten years ago, Peter Abrametz, a Saskatchewan lawyer, was investigated with respect to misleading trust fund transactions and loans made to his clients. The evidence was that no funds were misappropriated, but that the transactions may have provided collateral benefits to him. The case went to the Supreme Court of Canada, which found that the Law Society's delay in investigating and prosecuting the case was not an abuse of process and returned the matter to the Saskatchewan Court of Appeal. That latter Court recently returned the matter to the disciplinary tribunal because it found that the tribunal had made palpable and overriding errors on the issue of penalty: [Abrametz v Law Society of Saskatchewan](#), 2023 SKCA 114 (CanLII).

As a preliminary matter, the Court also dealt with a refusal to grant Mr. Abrametz an adjournment until separate allegations related to tax evasion had been addressed. The Court held that even though that

investigation was related (as a possible motivation for some of the transactions), the allegations in the present case could stand alone. There was no procedural unfairness in Mr. Abrametz's ability to defend himself. Additionally, "the public and the profession have an interest in the timely resolution of complaints and of charges of misconduct."

The Court then discussed at length the degree of scrutiny that applies to penalty decisions, including not accepting some language from Ontario courts about affording a high degree of deference. However, in this context, the Court stated that the "palpable and overriding error" test included the failure to consider accepted principles of disciplinary sanctions. In particular, the disciplinary tribunal had failed to recognize and apply several mitigating factors that applied to Mr. Abrametz. While the Court said it would give deference to how the discipline tribunal weighed mitigating factors, those factors could not be ignored.

In discussing the approach to disciplinary sanctions, the Court said that both the enabling legislation and the common law indicated that public protection and the public interest took priority over the interest in the reputation of the profession. According to the Court, the reputation of the profession "should be taken into account only to the extent that doing so could be said to advance those purposes." An example where the reputation of the profession might be taken into account is the interest in public confidence in the profession and in the regulator. This distinction meant that criminal sentencing principles did not fully apply to discipline sanctions. For example, mitigating circumstances have less significance in discipline proceedings than in criminal proceedings. However, mitigating circumstances must still be considered, including on the issue of deterrence, especially of the registrant. While the Court did not say so, its analysis suggests that mitigating circumstances may also affect the assessment of the registrant's ability to change their behaviour in the future.

Here the discipline tribunal, by only considering Mr. Abrametz's age and absence of a prior discipline history, failed to consider the following mitigating factors:

- Mr. Abrametz had self-reported some of the conduct (in the face of an audit) and had cooperated with some aspects of the investigation.
- While the delay in this case did not amount to an abuse of process, it was still a mitigating factor. The "financial, reputational, [and] emotional" impact of such a lengthy delay was not insignificant.
- While Mr. Abrametz did not "plead guilty", and while his explanation that he did not misappropriate trust funds and had made some restitution was not a defence to the allegations, his explanation did mitigate the worst aspects of his conduct.
- Mr. Abrametz had practised under restrictions and supervision for six years, without incident. Both the impact of such restrictions and his compliance with them were mitigating factors that should have been considered.
- The Court also noted that community service and general character evidence was relevant.

In addition to considering mitigating factors, the discipline tribunal also needed to assess the parity or proportionality of the sanction compared to other cases. The Court said that "parity relates to the imposition of a similar sentence based on similarities in the offenders and the circumstances." The Court recognized "that the difficulty that is frequently present in applying the principle of parity – that the circumstances of offences and offenders differ from case to case – was very much present in this case." But focussing only on cases like revocation for misappropriation of trust funds, which did not occur here,

and emphasizing the seriousness of the conduct without reference to the mitigating factors “resulted in a failure [of the discipline tribunal] to properly apply the proportionality principle....”

The sanction of revocation was set aside, and the case was returned for a new decision on sanction. Mr. Abrametz, who is now in his seventies, faces another proceeding.

Drawing the Line

Not every imprudent action by a registrant constitutes professional misconduct. At some point the conduct is “an understandable error” or “too trivial” to reach that state of opprobrium. By providing practical examples, [*Mcculloch v Investigation Committee Of The Saskatchewan Registered Nurses Association*](#), 2023 SKKB 203 (CanLII), gives some sense of how that line might be drawn.

Jessica McCulloch was a nurse who worked in two facilities housing prisoners or inmates, many of whom had mental illnesses. McCulloch was found to have engaged several forms of professional misconduct. Two were set aside by the Court. The first involved giving to a patient a Q-tip that had been brought in from outside, allegedly contrary to the facility’s contraband policy. The evidence indicated that a Q-tip could constitute a weapon or could be used to jam a lock, jeopardizing security.

The Court held that most definitions of professional misconduct take a strict liability approach to intent. That means that a registrant can defend against an allegation if they demonstrate that, in all the circumstances, they exercised due diligence. In this case, the rules of the facility were vague as to what constituted “contraband”. In addition, the evidence was that McCulloch only gave the Q-tip to one patient, supervised its use, and retrieved it afterwards. The Court held that this demonstrated due diligence and the finding of professional misconduct was set aside.

The second finding related to an allegation of completing a patient’s jigsaw puzzle while they slept “knowing” that it would upset the patient. This language of the allegation required a degree of deliberateness and thus, was not a “strict liability” allegation. There was conflicting evidence as to whether McCulloch completed the puzzle to irritate the patient or completed it with the patient’s prior knowledge. There was also inconsistent evidence as to which patient had been working on the puzzle. The discipline panel did not address the inconsistencies and did not explicitly find that McCulloch acted to irritate a patient. That finding was also set aside.

The Court also examined whether the above actions were too trivial to constitute professional misconduct. The Court found that the discipline panel did not apply the test it espoused, namely looking at “the gravity of the misconduct, its duration, the number of breaches, the presence or absence of *mala fides*, and the harm caused by the respondent’s conduct.” The Court said:

For example, the Discipline Committee did not consider that both incidents happened only once; that the duration of each incident was brief; that no consequence arose from the Q-tip incident; and that, according to Ms. McCulloch’s testimony, [the patient] was not upset that she completed his puzzle. Respecting the gravity of the conduct, even the Discipline Committee stated that some of the allegations under charge 8, “might, at face value, appear trivial.”

The Court also looked at the specific examples of concerns expressed in the legislative definition of professional misconduct, which referred to much more serious examples of inappropriate behaviour.

To permanently mar a nurse's professional reputation for allowing one patient to use one Q-tip (even if it could be considered "contraband") or for potentially upsetting a patient when completing a jigsaw puzzle is not the type of misconduct contemplated by s. 26 of the *RN Act*.

A third finding related to McCulloch circumventing the suspension of canteen privileges of two patients by providing them with items "such as soft drinks, chips and candy" on one occasion. The Court upheld this finding. It said:

I accept that in the context of a forensic psychiatric institution there exists a need for consistency in providing and denying privileges to patients. I accept the Discipline Committee's finding that patients with criminal backgrounds or facing criminal proceedings, all having a real or suspected measure of mental health issues, require consistent treatment by all staff. Ms. McCulloch should have been keenly aware that unexpected, sometimes violent behavior can erupt....

Breaching rules that involve the distribution of soft drinks, chips and candy would be trivial in many circumstances. But, in the context of the Sask Hospital, and the evidence that Ms. McCulloch was deliberately defying those rules, I find that the Discipline Committee's decision that Ms. McCulloch's conduct moved over the line and into professional misconduct cannot be disturbed on appeal.

Other findings, related to the inappropriate management of wasted narcotic or controlled drugs, were also upheld.

The Court also upheld the discipline panel's approach to the evidence that McCulloch had a mental disability flowing from a terrifying hostage taking incident she experienced some years previously:

...the Discipline Committee accepted Dr. Arnold's statement that Ms. McCulloch's PTSD diagnosis could affect her general performance as a nurse. But, as to the question of whether Ms. McCulloch had established a nexus or connection between her acts and omissions and her mental health, the Discipline Committee declined to find such a nexus.

It was reasonable for the discipline panel to view that evidence as being relevant to sanction rather than as a complete defence to the findings in this case. Since two findings were set aside and because a global sanction had been imposed, the matter was referred back to the discipline panel to reconsider sanction.

It is important for discipline tribunals to explain why conduct at the low end of the spectrum of seriousness does or does not constitute professional misconduct.



The College of Naturopaths of Ontario

Council Meeting Evaluation
May 31, 2023
8 Evaluations Received

Topic	Question	Data	Overall
Were issues discussed essential?	Please rate how essential you feel the issues covered in today's meeting were using a scale: 1 - Not all all essential to 5 - Very Essential.	0 @ 1 0 @ 2 1 @ 3 1 @ 4 4 @ 5	4.5
Achieve Objectives?	Please rate how well you feel the meeting met the intended objectives using the following scale: 1 - Not at all met to 5 - All objectives met.	0 @ 1 0 @ 2 0 @ 3 0 @ 4 6 @ 5	5
Time Management	Please rate how well you feel our time was managed at this meeting using the following scale: 1 - Not at all managed to 5 - Very well managed.	0 @ 1 0 @ 2 1 @ 3 0 @ 4 5 @ 5	4.6
Meeting Materials	Please rate how helpful you feel the meeting materials for today's meeting were using the following scale: 1 - Not at all helpful to 5 - Very helpful.	0 @ 1 0 @ 2 0 @ 3 0 @ 4 6 @ 5	5
Right People	Please rate the degree to which you felt the right people were in attendance at today's meeting using the following scale: 1 - None of the right people were here to 5 - All of the right people were here.	0 @ 1 0 @ 2 0 @ 3 0 @ 4 6 @ 5	5
Your Preparedness	Please rate how you feel your own level of preparedness was for today's meeting using the following scale: 1 - Not at all adequately prepared to 5 - More than adequately prepared.	0 @ 1 0 @ 2 0 @ 3 2 @ 4 4 @ 5	4.6
Group Preparedness	Please rate how you feel the level of preparedness of your Council	0 @ 1 0 @ 2 0 @ 3	5

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	colleagues was for today's meeting using the following scale: 1 - Not at all adequately prepared to 5 - More than adequately prepared.	0 @ 4 6 @ 5			
Interactions between Council members	Please rate how well you feel the interactions between Council members were facilitated using the following scale: 1 - Not well managed to 5 - Very well managed.	0 @ 1 0 @ 2 0 @ 3 0 @ 4 6 @ 5	5		
What Worked Well	From the following list, please select the elements of today's meeting that worked well.				
	• Meeting agenda		6/6		
	• Council member attendance		6/6		
	• Council member participation		6/6		
	• Facilitation (removal of barriers)		6/6		
	• Ability to have meaningful discussions		6/6		
	• Deliberations reflect the public interest		6/6		
	• Decisions reflect the public interest		6/6		
Areas of Improvement	From the following list, please select the elements of today's meeting that need improvement.				
	• Meeting agenda		0/6		
	• Council member attendance		0/6		
	• Council member participation		0/6		
	• Facilitation (removal of barriers)		0/6		
	• Ability to have meaningful discussions		0/6		
	• Deliberations reflect the public interest		0/6		
	• Decisions reflect the public interest		0/6		
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	- Loved having an in-person Council meeting. Thank you to the staff for all your hard work in preparing for this event. - If affordable, it is worth repeating. - I really enjoyed the ability to meet in person. It facilitated a lot more open dialogue and insights.				

Comparison of Evaluations by Meeting 2023-2024

	2022/23 Overall	2023-2024						
Topic		May 2023	July 2023	Sept 2023	Nov 2023	Jan 2024	Mar 2024	Ave
Were issues discussed essential? 1 – Not at all essential to 5 – Very Essential.	4.7	4.6	4.7	4.5				4.6
Achieve Objectives? 1 - Not at all met to 5 - All objectives met.	4.9	5.0	4.7	5				4.8
Time Management 1 - Not at all managed to 5 - Very well managed.	4.8	5.0	4.6	4.6				4.8
Meeting Materials 1 - Not at all helpful to 5 - Very helpful.	4.9	4.9	4.8	5				4.8
Right People 1 - None of the right people to 5 - All of the right people.	4.7	4.7	4.8	5				4.7
Your Preparedness 1 - Not at all adequately prepared to 5 - More than adequately prepared.	4.6	4.5	4.6	4.6				4.5
Group Preparedness 1 - Not at all adequate 5 - More than adequate.	4.5	4.7	4.2	5				4.4
Interactions between Council members 1 - Not well managed to 5 - Very well managed.	4.7	5.0	4.7	5				4.8
Number of Evaluations	7.7	8	8	6				4.67



The College of Naturopaths of Ontario

Conflict of Interest Summary of Council Members Declarations 2023-2024

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

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

16.01 Definition

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

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

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

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

Elected or Appointed Positions

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

Interests or Entities Owned

Council Member	Interest	Explanation
	None	

Interests from which they receive Financial Compensation

Council Member	Interest	Explanation
	None	

Existing Relationships

Council Member	Interest	Explanation
	None	

Council Members

The following is a list of Council members for the 2023-25 year and the date they 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
Dr. Jonathan Beatty, ND	May 31, 2023	May 29, 2023	None
Dr. Shelley Burns, ND	May 31, 2023	May 24, 2023	None
Dean Catherwood	May 31, 2023	May 26, 2023	None
Dr. Amy Dobbie, ND	May 31, 2023	May 25, 2023	Yes
Brook Dyson	May 31, 2023	May 30, 2023	None
Lisa Fenton	May 31, 2023	May 30, 2023	None
Dr. Anna Graczyk, ND	May 31, 2023	May 30, 2023	None
Tiffany Lloyd	May 31, 2023	June 9, 2023	None
Dr. Denis Marier	May 31, 2023	May 29, 2023	None
Sarah Griffiths-Savolaine	May 31, 2023	May 29, 2023	None
Paul Phillion	May 31, 2023	May 24, 2023	None
Dr. Jacob Scheer, ND	May 31, 2023	May 29, 2023	None
Dr. Jordan Sokoloski, ND	May 31, 2023	May 24, 2023	None

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

Updated: June 13, 2023

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.



The College of Naturopaths of Ontario

Report from the Council Chair

November 2023

This is the third Chair's Report of six for the current Council cycle and provides information for the period from September 1 to October 31, 2023.

In September, Andrew and I had one of our regularly scheduled meetings with the senior leadership of the OAND, CEO Christine Charnock and Board Chair Dr. Cyndi Gilbert, ND. We exchanged updates on recent initiatives and also spoke at length about the joint In Conversation With session happening later this month. The session will be a great opportunity for Registrants to learn more about our two organizations, our distinct roles, and the ways we can support each other.

Andrew and I had a few scheduled meetings as well. Topics included discussions around Council education for the November meeting, as well as updates from CANRA.

I encourage Council members not to hesitate to contact me should they have any questions or wish to discuss anything related to our work.

Wishing you all an enjoyable and safe end to 2023 and all the best for the coming year. Thank you for all of the work you do for the people of Ontario and the naturopathic profession!

Respectfully submitted,

Dr. Jordan Sokoloski, ND
Council Chair
16 November 2023



The College of Naturopaths of Ontario

REGULATORY OPERATIONS REPORT HIGHLIGHTS

The following are the highlights of the Regulatory Operations Report presented for the period ending October 31, 2023.

Registration

As of October 31, 2023, the College had 1632 Registrants in good standing who held a General class certificate of registration and 171 who held an Inactive class certificate or registration. There are also 24 Life Registrants.

Examinations

The College examinations are operating as anticipated. In September-October, the following sessions were offered; Ontario Biomedical Examination, Ontario Clinical Practical Examination and Ontario Prescribing and Therapeutics Examination with 78, 43 and 46 exam candidates respectively.

Quality Assurance

In this reporting period, 47 Peer & Practice Assessments were completed. Registrants in Group III were required to report their continuing education credits in this period. All but one of the 464 Registrants in the Group submitted their reports.

Inspection Program

This program is presently conducting inspections for two distinct purposes. The first are inspections of new premises, which occur in two parts. A single Part I inspection and two Part II inspections were completed in this reporting period.

The second are inspections conducted after the 5th anniversary of the initial inspection as required by the Regulation. A total of 56 second inspections are required this year, 10 of these inspections were completed in this reporting period and 22 have been completed thus far this year.

Under this program, the College also receives occurrence reports when patients have adverse reaction to the administration of IVIT. A total of four Type 1 occurrence reports were received in this reporting period. All Type 1 Occurrence Reports are reviewed by the Inspection Committee.

Complaints and Reports

Typically, each year the College will receive approximately 20 complaints and initiate another 20 of its own investigations. Between September-October, the College received two new complaints and initiated one new Report. Most common concerns were related

to advertising, ineffective treatment, fees & billing and lab testing. Three files were also completed by the ICRC; however, none of these were referred to the Discipline Committee. There are presently 19 ongoing matters before the ICRC.

Hearings

Three matters had been referred to the Discipline Committee in the prior year, one of which was completed in July/August. No pre-hearing conferences and no hearings were conducted during this reporting period.

Regulatory Guidance

The data for September-October indicates an increase in inquiries from the prior reporting period. Fees and billing, record keeping, scope and practicing with new graduates are among the most common inquiries.

Respectfully submitted,

Andrew Parr, CAE
Chief Executive Officer
November 2023



The College of Naturopaths of Ontario

Report on Regulatory Operations

Regulatory Activity			May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD	
1.1 Regulatory Activity: Registration										
Registrants (Total)			1859	-9	3				1853	
	General Class (Total)		→ → → → → → → → → → → → → → → →							1649
		In Good Standing	1633	-3	2				1632	
		Suspended	20	-3	0				17	
	Inactive Class (Total)		→ → → → → → → → → → → → → → → →							180
		In Good Standing	170	0	1				171	
		Suspended	12	-3	0				9	
	Emergency Class (Total)		→ → → → → → → → → → → → → → → →							0
		In Good Standing	0	0	0				0	
		Suspended	0	0	0				0	
	Life Registrants		24	0	0				24	

Changes in Registration Status Processed (Total)													33
	Suspensions		8	0	1								9
	Resignations		2	0	3								5
	Revocations		5	2	0								7
	Reinstatements		1	0	0								1
	Class Changes (Total)		→ → → → → → → → → → → → → →										11
	General Class to Inactive Class		5	1	2								8
	Inactive Class to General Class		1	1	1								3
	Any Class to Life Registrant Status		0	0	0								0
	Emergency Class to General Class		0	0	0								0

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
Professional Corporations (Total)								118
	Professional Corporations approved from prior periods	→	→	→	→	→	→	113
	New applications approved	2	0	3				5
	PC Renewals							
	Renewed	20	19	13				52
	Not Yet Renewed in this period	→	→	→	→	→	→	60
	Revoked	0	0	1				1
	Resigned/Dissolved	0	0	0				0

1.2 Regulatory Activity: Entry-to-Practise

Total ETP Applications								23
	On-going applications from prior period(s)	→	→	→	→	→	→	21
	New applications received	9	0	20				29
	Certificates issued	22	3	2				27
Applications Currently before the Registration Committee								0
	Referrals from prior period	→	→	→	→	→	→	0
	New referrals	3	1	1				5
	Decisions Issued	3	1	1				5
Registration Committee Outcomes								5
	Approved	3	1	1				5
	Approved – TCLs	0	0	0				0
	Approved – Exams required	0	0	0				0
	Approved – Education required	0	0	0				0
	Denied	0	0	0				0

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

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
1.3 Regulatory Activity: Examinations								
Examinations Conducted								
Ontario Clinical Sciences Examination								
	Exam sittings scheduled	0	1	0				1
	Exam sittings held	0	1	0				1
	Number of candidates sitting exam	0	77	0				77
Ontario Biomedical Examination								
	Exam sittings scheduled	0	0	1				1
	Exam sittings held	0	0	1				1
	Number of candidates sitting exam	0	0	78				78
Ontario Clinical Practical Examination								
	Exam sittings scheduled	0	1	1				2
	Exam sittings held	0	1	1				2
	Number of candidates sitting exam	0	53	43				96
Ontario Therapeutic Prescribing Examination								
	Exam sittings scheduled	1	0	1				2
	Exam sittings held	1	0	1				2
	Number of candidates sitting exam	45	0	46				91
Ontario Intravenous Infusion Examination								
	Exam sittings scheduled	1	0	0				1
	Exam sittings held	1	0	0				1
	Number of candidates sitting exam	22	0	0				22
Examination Appeals								
Ontario Clinical Sciences Examination Appeals (Total)								0
	Appeal Granted	0	0	0				0
	Appeal Denied	0	0	0				0
Ontario Biomedical Examination Appeals (Total)								0
	Appeal Granted	0	0	0				0
	Appeal Denied	0	0	0				0

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

Exam Questions Developed (Total)								93
CSE questions developed		0	0	0				0
BME questions developed		0	93	0				93

1.4 Regulatory Activity: Patient Relations								
Funding applications								
New applications Received								0
	Funding application approved	0	0	0				0
	Funding applilcation declined	0	0	0				0
Number of Active Files								
Funding Provided		\$691	\$1,610	\$500				\$2,801

1.5 Regulatory Activity: Quality Assurance								
Peer & Practice Assessments (Total for Year)								92
	Pool selected by QAC	→	→	→	→	→	→	→
	Assessments ordered by QAC	0	16	47				63
	Completed	0	16	47				63
	Deferred to later year	0	8	0				8

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
Quality Assurance Committee Reviews								
Assessments reviewed by Committee		0	0	0				0
	Satisfactory Outcome	0	0	5				5
	Ordered Outcome (SCERP, TCL, etc.)	0	0	0				0
CE Reporting								
	Number in group	0	0	464				464
	Number received	0	0	463				463
	Number of CE Reports with deficiencies	0	0	0				
QAC Referrals to ICRC		1	0	0				1
1.6 Regulatory Activity: Inspection Program								
Registered Premises (Total Current)								151
	Total Registered from prior year (as of May 1)	→	→	→	→	→	→	148
	Newly registered	4	2	3				9
	De-registered	6	0	0				6
Inspections of Premises								
	New Premises							
	Part I Completed	3	3	1				7
	Part II Completed	6	1	2				9
	5-year Anniversary Inspections							
	Premises requiring 5-year inspection	→	→	→	→	→	→	56
	Completed	8	4	10				22
Inspection Outcomes								
	New premises-outcomes (Parts I & II)							
	Passed	6	8	4				18
	Pass with conditions	5	4	0				9
	Failed	0	0	0				0

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
5-year Anniversary Inspection Outcomes								
	Passed	8	5	5				18
	Pass with conditions	3	4	1				8
	Failed	0	0	0				0

Type 1 Occurrence Reports (Total Reported)								8
	Patient referred to emergency	2	1	3				6
	Patient died	0	0	0				0
	Emergency drug administered	1	0	1				2

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

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
	Record keeping	0	0	0				0
	Fees & billing	2	1	1				4
	Lab testing	0	0	1				1
	Delegation	0	0	0				0
	Harassment	0	0	0				0
	QA Program comply	0	1	0				1
	C&D compliance	0	0	0				0
	Failure to cooperate	0	0	0				0
	Boundary issues	0	0	0				0
	Practising while suspend.	0	1	0				1
	Unprofessional, unbecoming conduct	0	0	0				0
	Other	0	0	0				0

1.8 Regulatory Activity: Unauthorized Practitioners

Cease and Desist Letters

	Letters Issued	2	1	1				4
	Letters signed back by practitioner	1	0	0				1

Injunctions from Court

	Sought	0	1	0				1
	Approved	0	0	0				0

1.9 Regulatory Activity: Hearings

Matters Referred by ICRC

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

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

1.10 Regulatory Activity: Regulatory Guidance								
Inquiries Received (Total)								288
	E-mail	65	49	57				171
	Telephone	38	24	55				117
Most Common Topics of Inquiries								
	Scope of practice	9	5	7				21
	Conflict of interest	4	3	0				7
	Tele-practice	11	9	5				25
	Inspection program	0	4	5				9
	Patient visits	7	0	6				13
	Advertising	0	0	0				0
	Lab testing	6	9	6				21
	Notifying patients when moving	0	0	0				0
	Fees & billing	0	4	15				19
	Record keeping	9	4	8				21

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
	Consent and Privacy	5	0	0				5
	Grads Practising with Registrant	0	0	7				7
	Injections	7	0	0				7
	Discharging a patient	0	0	0				0
	Registration & CPR	0	0	0				0
	Prescribing	4	4	0				8
	Delegation and Referrals	6	3	6				15
	Endorsements	0	3	0				3

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

Regulatory Activity		May-Jun	Jul-Aug	Sep-Oct	Nov-Dec	Jan-Feb	Mar-Apr	YTD
1.12 Regulatory Activity: HRTO Matters								
Matters filed against the College								
	Matters in progress from prior period(s)	1	0	1				2
	New matters	0	0	0				0
	Matters where HRTO rendered a decision	0	0	0				0
	HRTO Decisions on Matters							
	In favour of applicant	0	0	0				0
	In favour of College	0	0	0				0

Report on Operations – Mid-year Report

YEAR 1-APRIL 1, 2023 TO SEPTEMBER 30, 2023

I. INTRODUCTION TO THE OPERATIONAL PLAN FOR 2023-2027

The coming four years of operations will be realigned and re-prioritized to match the Council's new Strategic Plan and Ends Statements. Much of what the College does is set out in the legislative framework governing the College and the profession. These continue to be reflected in this operational plan given the substantial financial and human resources required to meet these obligations.

Unlike the Operational Plan of the last several years, this plan is organized within the strategic objectives and priorities established by the Council. This is intended to allow the Council and the reader to understand which initiatives being undertaken are supporting which objectives and priorities. It is acknowledged that some initiatives may support more than one strategic priority. While this will be noted, the initiatives will be set out only one time and, in the area, where it is identified as the major operational priority.

We will continue to focus on excellence in regulation, ensuring we fulfill our core mandate to protect the public, and oversee the practice of naturopathy. Operations will focus on ensuring we clearly define our goals, evaluate our progress, and success in achieving them. Very specific initiatives have been identified to meet the objectives identified above.

II. STRATEGIC OBJECTIVES AND PRIORITIES OF THE COUNCIL

On January 25, 2023, the Council approved its Strategic Plan and Ends Statements. These are as follows:

Objective 1: The College engages its stakeholders, through education and collaboration, to ensure that they understand the role of the College and trust in its ability to perform its role.

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

Objective 2: Naturopathic Doctors are trusted because they are effectively regulated.

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

Each of the priorities has been numbered for ease of reference. The numbers are intended to reflect the order the Council has laid them and are not indicative of priorities within the objectives.

III. PURPOSEFUL ENGAGEMENT OF STAKEHOLDERS

The Council's first of two overall objectives it has established is that the College will engage, through collaboration and education, its stakeholders and will do so with purpose. The stated purpose is to ensure that they understand the role of the College and trust the College to perform its regulatory role. It specifically states:

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

The following operational activities will be undertaken in support of this objective and its related priorities.

1.1	The College engages its system partners to further their understanding and trust in the College and the profession.
-----	--

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

The College's systems partners will include the Ministry of Health (MOH), Ontario Association of Naturopathic Doctors (OAND), the Canadian College of Naturopathic Medicine (CCNM), Health Professions Regulators of Ontario (HPRO), and Canadian Alliance of Naturopathic Regulatory Authorities (CANRA). The relationship with each system partner will be unique such that one approach will not fit all. Two activities will be undertaken in support of this priority. The overall focus of this priority is to provide education and collaboration opportunities.

1.1.1	Individualized System Partner Engagement											
The College will engage with each of its system partners on a regularized basis as an opportunity to discuss issues of mutual concern or importance within the regulatory system.					- Meetings will be scheduled with each system partner at a frequency and timing that meets the needs of each partner and the College. - The College will oversee the process of scheduling, agenda development, meeting minutes (where agreed upon) and development of meeting highlights to be released for transparency purposes. Each agenda will be focused on education of each stakeholder by each stakeholder and seeking opportunities to collaborate in the broader public interest.							
Timeframe:		All 4 Planning Years						Responsible:		Chief Executive Officer		
Year-to-date outcomes:		Two meetings with the leadership of the OAND have been held thus far this year and three meetings between the OAND/CoNO CEOs have been held. One meeting was held with the leadership of CCNM. The Ministry of Health joined the College in presenting an <i>In Conversation With</i> session in April 2023.										
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred
Commentary:		CCNM has indicated that their area of interests are pan-Canadian and therefore one on one meetings with individual regulators are not necessary to their mandate.										

1.1.2	System Partners' Forum			
The College will develop and launch a System Partners' Forum where all system partners will be invited to participate and to focus on issues that are or may be arising (based on risk-based data) in the regulatory system with the intent of developing risk mitigating opportunities.		- Meetings will be arranged a minimum of twice per year, with those who wish to attend. - The College will oversee the process of scheduling, agenda development, meeting minutes (where agreed upon) and		

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

				development of meeting highlights to be released for transparency purposes.				
Timeframe:	All 4 Planning Years					Responsible:	Chief Executive Officer	
Year-to-date outcomes:	The System Partner Forum project has not been initiated at this time.							
Year-to-date rating:	☒	Not started	☐	In progress	☐	Completed	☐	To be deferred
Commentary:								

1.2 The College engages its Registrants and the public to further their understanding and trust in the College and the profession.

Although this priority focuses on engagement of both the Registrants of the College and the public, it is intended that this engagement will focus on education and collaboration. There are a number of activities in which the College engages that will fall within this priority; however, many of these can and will be augmented to improve the overall effectiveness and impact that they have.

1.2.1	In Conversation With Program												
The College will continue to deliver its <i>In Conversation With</i> series, a fireside chat concept that engages both the public and Registrants on key issues in regulation. This series will continue to focus on questions posed by attendees to be responsive to the needs of these groups.					• A minimum of four ICW events will be offered each year. • Topics will be developed by the College and the sessions, whenever possible, will include a volunteer/staff partnership as a means of allowing the Registrants and public to see themselves involved in these sessions.								
Timeframe:		All 4 Planning Years							Responsible:		Communications		
Year-to-date outcomes:		Three In Conversation With sessions were held thus far on topics relating to how regulation works (April 2023 with the Ministry of Health), the inspection program (June 2023) and mandatory reporting (September 2023).											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
Commentary:													

1.2.2	Consultation Program				
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Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

The College will continue to engage the public and its Registrants in consultation on key issues and initiatives; however, an augmented process will be introduced that allows the public and the Registrants to hear directly from the College about the intent and outcomes of the regulatory changes under consultation.				• The College will release consultation documents on each significant change being proposed to the regulatory framework, albeit regulations, by-laws, Council policies. • Feedback will be sought through written and on-line opportunities. • The College will invite the public and Registrants to attend free information sessions about the consultation topic as an opportunity for the College to provide education and allow participants to gain a fulsome understanding of what is being proposed and to provide meaningful feedback. • The College will establish an on-going mechanism for Registrants and the Public to provide feedback with respect to the tables of permitted drugs and substances within the General Regulation so that the College can ensure that they are accurate and up-to-date and work with the Association to allow it to consider changes that may reflect a change in scope of practice.				
Timeframe:	All 4 Planning Years			Responsible:		Chief Executive Officer		
Year-to-date outcomes:	Two consultations, proposed amendments to the by-laws and proposed amendments to the Registration Policy (Currency), have been initiated.							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:								

1.2.3	Regulatory Education Program (REP)				
The College will develop and launch a new Regulatory Education Program that provides detailed education into regulatory issues and concerns. The REP will be informed both by current issues as well as by data derived from the Risk-based Regulation Program of the College.			- A Request for Proposals will be issued annually seeking topic presenters from among the professions. - A minimum of ten sessions will be offered on-line annually at no cost to Registrants. - The Quality Assurance Committee will be asked to consider awarding continuing education credits to these sessions as appropriate.		
Timeframe:	All 4 Planning Years		Responsible:	Chief Executive Officer	

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

Year-to-date outcomes:	Three Regulatory Education Program sessions have been developed by the College and delivered in partnership with Registrants of the College. They include: - Consent (July 7, 2023) - Scope of Practice (August 14, 2023) - Advertising (September 18, 2023)							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:	Sessions have been very well received by Registrants, based on evaluations received and overall, the number of attendees has increased steadily over the reporting period.							

1.2.4	On-going Corporate Communications												
The College will maintain a program of outbound communications and messaging to Registrants, public and stakeholders through defined program elements.					- Registrants and stakeholders of the College will be informed of the College’s on-going work and new developments through: - The iNformed e-newsletter; - The Blog and News sections of the College’s website. - Accuracy and currency of the College’s website. - The College’s social media channels.								
Timeframe:		All 4 Planning Years				Responsible:		Communications					
Year-to-date outcomes:		Six editions of iNformed have been published and delivered to all Registrants. The website continues to be updated regularly and monthly posts to the College’s social media accounts have been made.											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
Commentary:													

1.3 The College relies on a risk-based approach to proactively regulate the profession.

Risk-based regulation is intended to alter the regulatory landscape from one that is primarily reactive (complaint and report driven) to one that is pro-active. It is intended to use information and data from the College's regulatory activities as a means of identifying current and emerging risks to the public and to develop appropriate mechanisms (education, information, research) to mitigate those risks. Research remains conflicted in terms of specific measures that can be used from within the regulatory system; however, it is believed that an overall systemic approach will provide sufficient information to allow risks to be identified and risk mitigation techniques to be deployed.

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

1.3.1	Risk-based Regulation Program Development												
The College will finalize its Risk-based regulation approach and present the final concept to the Council during the first year of this plan.					• The plan will be developed and articulated in writing and will include input from system partners, the public and Registrants. • The Senior Management Team of the College will present the final plan to the Council no later than March 2024.								
Timeframe:		2023-2024							Responsible:		Chief Executive Officer		
Year-to-date outcomes:		The program outline continues under development. Staff are currently identifying the available information for the program and additional types of data needed and sources to collect that information. Changes to the next Information Return are underway to collect new data sets from Registrants.											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
Commentary:													

1.3.2	Risk-based Regulation Program Implementation												
The risk-based regulatory approach will be implemented by developing and launching the necessary mechanisms to collect and interpret the data.					• Data will be collected and assembled in raw form. • The data will be presented to system partners for discussion and enunciation of the inherent risks to the public identified. • Appropriate mitigation techniques will be identified and delivered.								
Timeframe:	2024-2027								Responsible:	Chief Executive Officer			
Year-to-date outcomes:		Implementation is not scheduled to occur in this program year.											
Year-to-date rating:		☐	Not started		☐	In progress		☐	Completed		☒	To be deferred	
Commentary:													

IV. EFFECTIVE REGULATION LEADS TO TRUST IN THE PROFESSION.

The Council' second of two overall objectives focus on effective regulation of the profession with the intention that the regulation will increase the trust the public has in the profession itself. It specifically states:

2. Naturopathic Doctors are trusted because they are effectively regulated.

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

Although the Council has identified five priority activities in support of this strategic objective, there are a number of on-going corporate activities that are necessary in order to accomplish “**effective regulation**”. For the College to regulate, it must have:

- A. A functioning Council that operates under the principles of good governance.
- B. A system of Committees that are properly constituted with capable individuals sitting on those committees.
- C. A program that seeks out volunteers, assesses and trains volunteers how to properly perform their duties.
- D. A well instituted human resource program and a human resources plan to ensure that the skills needed to operate the College are available and on a sustained basis.
- E. A financial management system that ensures the College operates within generally accepted accounting principles and is using its financial resources effectively.
- F. A program that supports both transparency and accountability.
- G. The ability and commitment to the oversight requirements placed on the College in the public interest that allow proper and full accounting of the College.

Each of these will be addressed prior to addressing the Council’s five priority activities.

2 (A)	Operating under the principles of good governance			
2(A)-1	Quality Decision-making			
The College will operate a program that ensures that the Council is properly equipped to make decisions on policy matters brought before it.		- Council will be fully briefed on all major issues and policy matters to be brought before it and Council will receive its materials for meetings in a timely manner. - Briefing notes on major issues and policies will be developed as needed and presented to Council to facilitate the deliberative process. - Briefings of Council will include a detailed analysis of the risk, privacy, financial, transparency and public interest considerations of the decisions being considered.		
Timeframe:	All 4 Planning Years		Responsible:	Chief Executive Officer
Year-to-date outcomes:	The Council has been briefed on all major issues to have arisen thus far this year. Matters addressed include: Committee Appointments			

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

	• IVIT Exam Blueprint Amendments • Educational Briefing – Discipline Processes • Educational Briefing – Complaints and Reports processes							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:								

2(A)-2	A Commitment to equity, diversity, inclusion and belonging												
The College will continue its commitment to and integrate the principles of equity, diversity, inclusion and belonging into all of its activities.					• The Equity, Diversity and Inclusion Committee (EDIC) will complete the development of its equity tool that will be used as a means of evaluating programs, policies, and procedures etc. • The Committee will work with the Committees of the Council and the College to provide training on the proper and effective use of the tool. • By the completion of the four year plan, the EDIC will be disbanded with individual members joining other committees where they can champion the EDIC effort. • A new Diversity, Equity, Inclusion and Belonging (DEIB) Working Group will be founded where these committee members can support each other and address any DEIB issues that should arise system wide.								
Timeframe:	All 4 Planning Years			Estimated cost:	\$3,350			Responsible:	Human Resources				
Year-to-date outcomes:		The Equity, Diversity and Inclusion Committee continued to meet during this reporting period and continued the development of the Equity, Diversity, Inclusion and Belonging EDIB Lens Tool to be used by Committees and the College as part of their work. Planning for presentations of the tool to committees was initiated during this period.											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

Commentary:	A soft launch of the EDIC's developed lens tool was initiated on October 5, 2023, with the first Committee training session (ICRC). Additional College Committee training sessions on the lens tool, and the collection of Committee feedback for consideration by the EDIC, will occur between November 2023 – February 2024.
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2 (B)	Committees that are properly constituted with capable individuals sitting on those committees.
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The College will operate a program to ensure that the College Council, and its committees are always properly constituted and therefore able to fulfill their governance obligations.		- Council elections will be delivered annually in accordance with the by-laws. - Executive Committee elections will be delivered annually, and supplemental elections held as needed, in accordance with the by-laws and Council policies. - Public member appointments will be monitored to ensure applications for renewals are submitted in a timely manner and that the Public Appointments Secretariat is aware of vacancies and the need to appoint and re-appoint as necessary.		
The College will maintain a program to ensure that Committees are properly constituted, volunteers are recruited, and appointments are sought from the Council.		- The CEO will monitor all committees to ensure that they are properly constituted as set out in the College by-laws. - Council will be presented a slate of appointments, at minimum annually at its May meeting and on-going appointments will be presented to the Council or the Executive Committee on an as-needed basis.		
Timeframe:	All 4 Planning Years	Estimated cost:	\$193,694	Responsible: Human Resources
Year-to-date outcomes:	Council elections were initiated in January 2023 for Districts 7 and 8. At the close of nominations, one nomination was received for District 8 while none were received for District 7. A supplemental election was conducted immediately thereafter resulting in one nomination for District 7. Both candidates were acclaimed to their positions and assumed their roles in May 2023. The Executive Committee elections (election of officers) were conducted in April/May and concluded with the election at the Council's May 2023 meeting.			

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

	During this reporting period, the College sought the input of all current volunteers to determine their willingness to continue for the upcoming program year and their areas of interest. Based on this input, a complete list of volunteer appointments was created and presented to the Council at its May 2023 meeting. The Council approved all appointments at that time.							
Year-to-date rating:	☐	Not started	☐	In progress	☒	Completed	☐	To be deferred
Commentary:								

2 I	Volunteer Recruitment, Assessment and Training program.
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2(C)-1	Recruitment												
The College will maintain a comprehensive volunteer program to ensure the involvement of the public and Registrants in regulatory processes.					- Recruitment of volunteers from among Registrants and the public will be undertaken on an on-going basis. - A retention program will be implemented that incorporates best practices in retention including regular feedback opportunities from current volunteers and those that may exit the program. - A mentoring program will be implemented as a means of providing support to volunteers and adding value for both new and existing volunteers. - A recognition program for volunteers will be implemented as a means of augmenting the retention of volunteers and recognizing the value that the Council and College places on its human resources.								
Timeframe:		All 4 Planning Years							Responsible:		Human Resources		
Year-to-date outcomes:		Recruitment needs are maintained up to date on the College’s website. The College is a member with Volunteer Canada to extend applicable volunteer postings and gain valuable research to enhance existing programming. The recruitment process has been more streamlined to expedite the processing of incoming applications.											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
2(C)-2	Competency Assessment												

Activity			Key Performance Indicators					
All 4 Planning Years	2023-2024	2024-2025		2025-2026	2026-2027			
The College will fully implement and manage the Council’s Qualifying Program for all volunteers, including those seeking election to Council and appointment to a Council Committee.			- A minimum of two orientation sessions will be delivered for potential candidates for election and individuals seeking appointment to Committees to provide an overview of their duties and responsibilities and overall time commitment. - Each volunteer will be required to complete a competency-based self-assessment based on the competencies established by the Council in its Governance Process policies. - Each volunteer will be screened by the Governance Committee to confirm their competency and overall fit with the College’s volunteer program. - The Governance Committee will determine eligibility for election to the Council and make recommendations to the Council for volunteer appointments to committees.					
Timeframe:	All 4 Planning Years		Responsible:		Human Resources			
Year-to-date outcomes:	One new member has been appointed by Council at the September 2023 meeting to a committee that is pending general orientation. Each volunteer is required to complete the full application process, including the competency assessment and all applications that are for Committee appointments are first screened by the Governance Committee.							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:								

2(C)-3	Training
The College will operate a program to ensure that all new and existing Council and Committee members are afforded the necessary training and fulfill their duties.	- A minimum of one live training session will be offered annually for new Council and committee members that sets out their duties and responsibilities surrounding due diligence, public protection and other key matters. - A minimum of one training session bi-annually or as needed for Council and committee chairs and co-chairs. - All new volunteers will be required to complete training on bias, diversity, human rights, accessibility and anti-discrimination.

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

			All sitting Council and Committee members will be required to complete an on-line version of the training as a refresher every two years.		
Timeframe:	All 4 Planning Years	Estimated cost:	\$13,975	Responsible:	Human Resources
Year-to-date outcomes:	The Council was in receipt of a full day of training of in person training in September 2023 on their duties, responsibilities, public protection, leadership, system partners, finances and risk management.				
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred	
Commentary:					

2 (D)	Proper Human Resource Management and a Human Resources Plan.
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2(D)-1	Effective Human Resource Management
The College will manage its human resources in such a way at to recognize the value of its staff and in keeping with best practices for human resource management in the not-for-profit sector.	- The College will undertake recruitment of new personnel in a way that first emphasises current staff and is open and transparent. - College staff will be compensated in a manner that reflects the current market value of the positions. - New staff will be provided with the information and tools necessary to the performance of their duties with the College. - Staff performance will be evaluated in an open and transparent way based on standardized performance management processes. - Staff who are leaving the College will be treated with respect and dignity.
College management and staff will work collectively to continue to build and enhance the College “team” as a unified work force and to ensure that the College’s workplace environment is conducive to the team approach.	- The College shall take all necessary and prudent steps to ensure that the College workplace environment promotes diversity and inclusivity, and is free from harassment, abuse and discrimination, including annual reviews of the College’s relevant policies and ensuring that proper investigations are conducted when concerns are raised. - The College shall foster a team approach through shared work and social experiences.

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

The College will provide staff with on-going training to enhance individual and program performance.			- The CEO will provide all staff with group training in areas of importance to the College and its regulatory work. - A formal process to support and encourage staff professional development will be established and integrated to the annual performance review process, to enhance their own performance, that of the program areas and as developmental opportunities. - The College shall maintain membership in both the Council on Licensure, Enforcement and Regulation (CLEAR) and Canadian Network of Agencies for Regulation (CNAR) and share information from these organizations with staff. - Within the budgetary restrictions, the College will send staff to the CLEAR Annual Education Conference and to the CNAR Annual Education Conference. - Processes will be implemented to assist staff in self identifying training needs related to their program area(s) and opportunities for future advancement.	
Timeframe:	All 4 Planning Years		Responsible:	Human Resources
Year-to-date outcomes:	All vacancies are shared with staff internally. Opportunities for career growth and training opportunities are included in annual performance reviews. With COVID restrictions lifted during this reporting period two staff representatives attended the CLEAR conference, and two staff representatives attended the CNAR conference. The College continues to host bi-monthly staff meetings for information sharing and uses the Teams platform to communicate regularly including an "All staff" chat.			
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred
Commentary:				

2(D)-2	Human Resources Plan
The College will have a Human Resources Plan that ensures the long-term sustainability and stability of the College.	A Human Resources Plan that sets out the current and future plans for staffing of the College is developed and appended to the Operational Plan.

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

				The Plan sets out the evolution of the staffing configuration that aligns with the Council’s strategic plan and the College’s Operational Plan.					
The Human Resources Plan will be updated annually and attached to the Operational Plan presented to the Council.				Each year as the Operational Plan is updated, the Human Resources Plan is also updated to reflect any changing operations or operational priorities.					
Timeframe:	All 4 Planning Years					Responsible:	Senior Management Team		
Year-to-date outcomes:		The Human Resources Plan for 2023-2024 has been reviewed by the Senior Management Team and updated in September 2023 for the coming year.							
Year-to-date rating:		☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:									

2 (E)	Sound Financial Management.
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2(E)-1	Effective financial management								
The financial resources of the College will be managed in accordance with generally accepted accounting principles and best practices for the not-for-profit sector and will meet all legislative and oversight requirements.				- Capital and Operating budgets will be developed for presentation to and acceptance by the Council, that will include a one-year budget and two years of estimates, based on a three-year operating plan. - Unaudited financial statements and the variance report will be provided to Council as part of the next Council meeting as soon as they are finalized and in accordance with the Councils Annual Planning Cycle (GP08). - The annual external audit of the College’s financial status will be supported by the staff.					
Timeframe:	All 4 Planning Years					Responsible:	Director, Operations		
Year-to-date outcomes:		Annual audit for 2022-2023 fiscal year was presented and accepted by the Council at its July 2023. Q1 Unaudited financial statements were presented and accepted by Council at its September 2023 meeting.							
Year-to-date rating:		☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:									

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

2 (F)	Transparency and Accountability			
2(F)-1	Commitment to and Action on the Transparency principles			
The College will operate a program that supports the transparency principles adopted by the Council and increases transparency of College decision-making wherever possible.		• A qualitative Annual Report that provides not only statistical information but also necessary context and trending information, will be developed and released annually. • Audited financial statements and the Auditor's report will be presented to the Council at its July meeting and included in the Annual Report. • Regular Committee reports will be sought from Committee Chairs and included in the Council consent agenda for each Council meeting and Annual Committee reports will be developed by the staff and reviewed by Committee Chairs and presented to the Council in July. • Council and Executive Committee meeting materials will be made publicly available unless redacted in accordance with the Code. As such, ○ Council meeting materials will be posted to the website prior to the Council meeting. ○ Executive Committee materials will be posted to the website in advance of the meeting in accordance with the Committee terms of reference.		
Timeframe:	All 4 Planning Years		Responsible:	Chief Executive Officer
Year-to-date outcomes:	The Audited Financial Statements and Auditor's Report were presented to and accepted by the Council at its July 2023 meeting. Regular committee reports are collected and provided to Council within the Consent Agenda materials for each Council meeting (May, July and September 2023). The Annual Committee Reports were presented to and accepted by the Council at its July 2023 meeting. All Council meeting materials are published on the College's website a minimum of one week prior to the date of the Council meeting.			

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

	The Executive Committee has not met during this period.							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:	-							

2(F)-2	Open Regulatory Process												
Regulatory processes and matters of the public interest will be routinely disclosed.				- The College will maintain (update regularly) a summary table of active and resolved complaints and inquiries on the website. - The College will alert the public to pending discipline hearings including the status of the matter and the notices of hearings. - Discipline hearing outcomes will be provided to the public, including posting on the website of Agreed Statements of Facts and Joint Submissions on Penalty and Costs, which are exhibits to hearings, and posting of Decisions and Reasons from panels of the Discipline Committee.									
Timeframe:	All 4 Planning Years						Responsible:	Chief Executive Officer					
Year-to-date outcomes:		Summary table of active and resolved complaints is updated monthly (or sooner if change occurs to the status). Discipline hearing information is updated and maintained on the College website and notices of upcoming hearings are posted on the website and in the College’s various communication tools such as social media, iNformed etc. Decisions of panels of the Discipline Committee are published on the College’s website. The College launched a new feature on its home page of the website alerting the public to new Suspensions, Revocations, Resignations, and Reinstatements by any Committee of the College and for administrative reasons.											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
Commentary:													

2(F)-3	Council Oversight Responsibilities							
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Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

The College will operate a reporting program to ensure that the Council is able to fulfill its oversight duties as set out in the Code, the Act and the College by-laws.			• The CEO will submit bi-monthly Regulatory Operations Reports to the Council detailing regulatory operational activities in line with part I of this Operational Plan. These reports will be made public. • The CEO will submit a semi-annual report on progress towards meeting the goals set out in this Operational Plan. As such, ○ A mid-year report based on the work set out in the Operational (excluding Part 1) will be presented to the Council at its November meeting. ○ A year-end report based on the work set out in the Operational Plan (including Part 1) will be presented to the Council at its July meeting.					
Timeframe:	All 4 Planning Years				Responsible:	Chief Executive Officer		
Year-to-date outcomes:	The year-end Report for the period April 1, 2022 to March 31, 2023 was filed with and accepted by the Council at its July 2023 meeting. For the current reporting period, Regulatory Operations Reports have been presented at each of the Council meetings for May, July and September 2023. The mid-year report for this period is this document.							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:								

2(F)-4	CEO Annual Assessment												
The College will operate a program to ensure that the Council can properly assess the performance of the CEO.					Council will undertake a performance review of the CEO on an annual basis in accordance with its policies. A such, the Council will be provided with the necessary materials to undertake the review, which is based on the goals and development plan set by the CEO and approved by the Council.								
Timeframe:	All 4 Planning Years						Responsible:	Council					
Year-to-date outcomes:		The annual review of the CEO was presented by the CEO Review Panel at its July 2023 Council meeting and signed off by both parties in August 2023.											
Year-to-date rating:		☐	Not started		☐	In progress		☒	Completed		☐	To be deferred	
Commentary:													

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

2(F)-5	Council Self-Assessment			
The College will operate a program to ensure that the Council can properly assess, its own performance, the performance of its committees and individual Council and Committee members.		- The Council will undertake a performance review of itself, the Committees and individual Council and Committee members through an independent and neutral third party. - The review will be initiated no later than April and completed by the end of July.		
Timeframe:	All 4 Planning Years		Responsible:	Chief Executive Officer
Year-to-date outcomes:	The Council self assessment process for the prior year was initiated in May 2023 and concluded by the end of July 2023. Subsequently, the consultancy presented the reports to each of the Committees and to Council. Individual one-on-one meetings to discuss results were extended into August and September.			
Year-to-date rating:	☐ Not started	☐ In progress	☒ Completed	☐ To be deferred
Commentary:				

2(F)-6	Council Risk Assessment			
The College will operate a program that identifies and mitigates risks to the Council and the College.		- The CEO, on behalf of the Council, will maintain appropriate insurance policies to cover risks to the organization, including directors and officer's liability insurance, commercial general liability insurance and property insurance. These policies will be reviewed bi-annually. - The College will institute and manage an Enterprise Risk Management (ERM) Program and will support the Council's Risk Committee to ensure the Council is aware of the risks facing the College and processes instituted to mitigate those risks. - The ERM assessment will be updated annually.		
Timeframe:	All 4 Planning Years		Responsible:	Chief Executive Officer
Year-to-date outcomes:	Council and committee's annual performance reviews have been facilitated by Satori Consulting and results have been shared with the Council and committees.			

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

	All insurance policies have been aligned to renew at the same time. Insurance policies have all been renewed in July 2023.							
	The Enterprise Risk Management program has not been fully operationalized at this time.							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:								

2 (G)	Commitment to oversight requirements.												
2(G)-1	HPARB Appeals												
The College will operate a program in support of the Health Professions Review and Appeal Board (HPARB) appeals process for appeals of decisions of the Registration Committee (RC) and for appeals of decisions of the Inquiries, Complaints and Reports Committee (ICRC).					• College staff will provide documentation relating to appeals to HPARB as soon as possible after receiving notification of an appeal. • Legal Counsel for the College will be notified and provided copies of all materials provided to HPARB. • Staff will attend conferences and hearings in defence of RC decisions rendered and as a resource to HPARB in matters of appeals of ICRC decisions. • HPARB decisions will be reported to the Committees and the Council, and any matters returned by HPARB will be brought to the appropriate committee on an expedited basis.								
Timeframe:	All 4 Planning Years								Responsible:	Deputy CEO			
Year-to-date outcomes:		College staff provide all information to HPARB regarding appeals and staff attend all appeal hearings as a resource.											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
Commentary:													

2(G)-2	HRTTO Matters							
The College will operate a program that allows it to respond to matters filed with the Human Rights Tribunal of Ontario (HRTTO).				- All notices received by the HRTTO will be provided to Legal Counsel of the College. - College staff will support Legal Counsel by providing all necessary information to allow for a proper defence to be mounted.				

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

			- College senior staff will participate in all conferences and hearings of the HRT0. - All outcomes of the HRT0 will be reported to the Council and any impacted Committees.		
Timeframe:	All 4 Planning Years	Estimated cost:		Responsible:	Chief Executive Officer
Year-to-date outcomes:	Matter still awaits review and decision from HRT0.				
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred	
Commentary:					

2(G)-3	College Performance Measure Framework												
The College will support the work of the Ministry of Health in its oversight capacity through the College Performance Measure Framework (CPMF) .					• The College will assemble the necessary quantitate and qualitative data for the CPMF between January and March annually. • The College’s draft submission will be presented to Council in March annually. • Once approved, the report will be submitted to the Ministry. • The Ministry’s summary of all College reports will be reviewed to identify best practices which this College may adopt in the future.								
Timeframe:	All 4 Planning Years							Responsible:	Senior Management Team				
Year-to-date outcomes:		Not yet initiated for this program year.											
Year-to-date rating:		☒	Not started		☐	In progress		☐	Completed		☐	To be deferred	
Commentary:		Assembly of CMFP data begins in the fourth quarter of the fiscal year (January 2024) with the report presented to the Council in March for final approval.											

2(G)-4	Fair Registration Practices				
The College will support the work of the Office of the Fairness Commissioner (OFC) in its effort to ensure that registration practices of regulatory authorities are fair, objective, impartial and transparent.			- The College will submit the annual Fair Registration Practices report on the schedule set by the OFC and will make such reports publicly available. - The College will engage the OFC in support of its registration practices assessment conducted approximately every three years.		

Activity				Key Performance Indicators								
All 4 Planning Years		2023-2024		2024-2025		2025-2026		2026-2027				
The College is committed to registration practices that are transparent, objective impartial and fair, further incorporating recommendations made by the OFC in conjunction with their Risk-informed Compliance Framework, and best practices as highlighted by the Ontario Ministry of Health’s CPMF Reporting.					The College will seek to implement any additional recommendations resulting from further OFC assessments, changes to OFC fair registration practices or fair access requirements, or Ministry feedback in relation to the CPMF reporting.							
Timeframe:	All 4 Planning Years					Responsible:	Director, Registration					
Year-to-date outcomes:	The College’s 2022 report was submitted by the OFC’s August 4, 2023, deadline. Notice for the filing of the 2023 Fair Registration Practices Report is anticipated for December 2023, with a March 2024 submission deadline.											
Year-to-date rating:	☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
Commentary:												

The following operational activities will be undertaken in support of the Council's second strategic objective and the five strategic priorities it has identified.

2.1	Applicants are evaluated based on their competence and evaluations are relevant, fair, objective, impartial and free of bias and discrimination.				
2.1.1	Examinations				
The College will operate an Examinations program that enables the College to properly assess the competencies of graduates from Council on Naturopathic Medical Education (CNME)-accredited programs and PLAR applicants seeking registration with the College, as well as naturopaths seeking to demonstrate that they have the competencies required of those standards.			- The College will deliver three (3) sittings of the Clinical (Practical) examinations annually. - The College will deliver two (2) sittings of the written Clinical Sciences examination annually. - The College will deliver two (2) sittings of the written Biomedical examination annually. - The College will deliver two (2) sittings of the Intravenous Infusion Therapy (IVIT) examination annually. - The College will deliver two (2) sittings of the Prescribing & Therapeutics examination annually. - The Ontario Jurisprudence exam will be available online.		
All College examinations will be maintained through an examination question development and retirement program.			A minimum of thirty (30) new examination questions will be developed annually in concert with item writers, item reviewers		

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

			and the Examination Committee (ETP) for each of the BME and CSE exams. 25% of the questions and cases used in the Clinical (Practical) Exams will be reviewed annually.		
Timeframe:	All 4 Planning Years	Estimated cost:	\$319,283	Responsible:	Director, Examinations
Year-to-date outcomes:	See Regulatory Operations Report.				
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred	
Commentary:					

2.1.2	Entry-to-Practice				
The College will operate an Entry-to-Practice program that enables new graduates, Prior Learning Assessment and Recognition (PLAR) applicants, and naturopaths registered in other jurisdictions to seek registration as a naturopath in the Province of Ontario.		- An application for registration process with the College will be maintained. - All applications will be screened to ensure that the entry-to-practise requirements set out in the Registration Regulation, College by-laws and Council policies are met. - Applicants that meet the requirements will be provided a Certificate of Registration. - Applicants that appear not to meet the requirements will be referred to the Registration Committee (RC) for review. Complete files for matters referred to the RC will be presented to the RC at the first available meeting and staff will support the Committee by preparing Decisions & Reasons on files referred to the Committee for review and approval of the RC. Decisions & Reasons of the RC will be provided to applicants and Registrants as soon as they are approved by the Committee. - Applicants referred to the Registration Committee will be kept informed of the progress of the review, both informally and formally through decisions rendered.			
The College will operate a program that will allow an individual to be assessed to determine whether their education and experience is substantial equivalent under the Prior Learning Assessment and		A process for evaluating individuals under the Council's PLAR policy will be maintained and applicants for assessment will be processed in accordance with that policy.			

Activity			Key Performance Indicators					
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027				
Recognition Program (PLAR) to that of an individual who has graduated from a CNME-accredited program.			- Current information about the PLAR process will be made publicly available by the College. - PLAR Assessors will be recruited and provided training and related tools to the assessment process. - Successful PLAR applicants will be invited to sit the Clinical (Practical) examinations and the Ontario Jurisprudence examination, and to make an application for registration under the Entry-to-Practise program.					
The final demonstration-based, OSCE-type component (“Interaction with a Simulated Patient”) of the PLAR program will be developed and implemented.			- The “Interaction with a Simulated Patient” (ISP) component of the PLAR program will be operationalized: - Three cases will be beta tested and finalized for use as part of the PLAR process. - Associated staff and recruited demonstration-based assessors will be trained on the administration of the ISP.					
Timeframe:	All 4 Planning Years		Responsible:		Director, Registration			
Year-to-date outcomes:	See Regulatory Operations Report for Entry to Practice and PLAR data. Beta testing for the ISP component of the PLAR program has not been started. The PLAR Committee is presently undertaking a review of the PLAR program (initial discussion October 2023) and policy, with a focus on the demonstration-based components. Recommendations for any proposed changes are anticipated to be presented to the Registration Committee for review and discussion in early 2024.							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:								

2.2	Registrants and the public are aware of and adhere to the standards by which NDs are governed.	
2.2.1	Inspection Program	
The College will operate an Inspection Program as set out in Part IV of the General Regulation made under the <i>Naturopathy Act, 2007</i> to regulate premises in which IVIT procedures are performed.		The College will maintain a process for new IVIT premises to become registered with the College and for registering of the designated registrant and other personnel operating from the

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	
			premises and for existing premises to maintain their information with the College.		
			• The College will maintain a process for the inspection of new premises as well as a process for the subsequent re-inspection of premises every five years.		
			• Fees for new premises registered and inspections will be levied and collected.		
			• A pool of qualified and trained inspectors will be maintained.		
			• Incidences of IVIT procedures being provided in unregistered premises will be reviewed and, where appropriate, a request made to the Inquiries, Complaints and Reports Committee (ICRC) to appoint an investigator and a cease & desist letter is sent to the Registrant.		
			• Inspection reports will be presented to the Inspection Committee, along with other relevant matters and staff will support the Committee by preparing materials for review, drafting decisions & Inspection Reports on files for review and approval of the Committee. Decisions of the Inspection Committee will be provided to the designated Registrant as soon as they are approved by the Committee.		
			• The IVIT Premises Registry will be maintained on the College website with new and amending information added on a routine and regular basis.		
			• Type 1 occurrence reports are reviewed by staff on receipt and reviewed by the Committee at the next meeting. If the Committee requires further action by the reporting Registrant, they will be contacted by staff.		
			• Type 2 occurrence report forms will be collected annually, analyzed and reported to the Committee and Council.		
Timeframe:	All 4 Planning Years		Estimated cost:	\$65,000	
Responsible:		Deputy CEO			
Year-to-date outcomes:		See Regulatory Operations Report.			
Year-to-date rating:		☐ Not started	☒ In progress	☐ Completed	☐ To be deferred

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

Commentary:	
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2.2.2	Standards Program			
The College will operate a program to develop and maintain the Standards of Practice of the profession and any related policies and guidelines. Standards and guidelines will be reviewed by the Standards Committee (SC) to ensure that the standards fully support patient-centred care. New standards will be developed as identified by the Committee and/or Council.		- College staff will support the SC as it initiates reviews of any or all of the Core Competencies, Code of Ethics and Standards and Guidelines. - Staff will support the SC as it undertakes consultation of stakeholders relating to existing or new standards, guidelines or policies. - Where the SC makes amendments to any of the standards, guidelines or policies, staff will update the materials and release them publicly. - Staff will also maintain a program of alerting Registrants of any changes to the standards.		
Timeframe:	All 4 Planning Years		Responsible:	Deputy CEO
Year-to-date outcomes:	The Standards Committee continues to undertake its complete review of all Standards of Practice with the intention to initiate consultation on proposed amendments later in the fiscal year.			
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred
Commentary:				

2.2.3	Regulatory Guidance Program			
The College will operate a Regulatory Guidance program that will respond to Registrants' questions and provide information, whenever possible, and guide the profession to the resources available to it.		- E-mail and telephone inquiries will be responded to by the Regulatory Education Specialist. - Statistics based on the number and nature (topic) of inquiries will be maintained and presented to the Council.		
Timeframe:	All 4 Planning Years		Responsible:	Deputy CEO
Year-to-date outcomes:	See Regulatory Operations Report.			
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred
Commentary:				

2.3	Registrants are held accountable for their decisions and actions.			
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Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

2.3.1	Registration of Individuals and Corporations			
The College will operate a Registration program that enables naturopaths registered with the College to maintain their status with the College as individuals who hold either a General Class certificate of registration or an Inactive Class certificate of registration.		- A registration renewal process will be conducted annually, in accordance with the by-laws that will enable all Registrants to update their information with the College and pay their annual registration fees. - Class change applications will be processed by the College with those requiring a review by the RC being presented to the Committee with the information needed for decisions and with Decision & Reasons drafted based on Committee discussions, approved by the Committee, and provided to the Registrant. - The public registers will be maintained in accordance with the Code, regulations, and by-laws.		
The College will ensure that Registrants maintain their CPR and PLI status as required under the by-laws.		- The College will monitor individual compliance with the requirements for a cardiopulmonary resuscitation certification and for carrying the necessary amounts of professional liability insurance. - Regular follow up with Registrants whose CPR and/or PLI will expire will be undertaken. - Registrants who are not in compliance with these requirements will be provided notices and/or suspended in accordance with the Registration Regulation and the Code.		
The College will operate a program that allows Registrants to obtain Certificates of Authorization for professional corporations that they wish to establish.		- A process for Registrants to apply for a Certificate of Authorization for a professional corporation will be maintained. - Applications will be reviewed, and decisions will be provided to Registrants. - New corporations will be added to the Corporations register of the College website. - A process for annual renewals of Certificates of Authorization will be maintained ensuring that all professional corporations are properly authorized.		
Timeframe:	All 4 Planning Years	Estimated cost:	\$21,000	Responsible: Director, Registration

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

Year-to-date outcomes:	See Regulatory Operations Report.			
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred
Commentary:	Registration Renewal planning is presently underway with renewal anticipated to launch on February 14, 2024.			

2.3.2	Patient Relations Program			
The College will operate a Patient Relations Program as set out in the <i>Regulated Health Professions Act, 1991</i> . Applications for funding will be accepted and reviewed under the new rules and patients entitled to funding supported by the College.		• A Patient relations program will be maintained. • Current information (handbooks) for Registrants and Patients will be maintained and made publicly available. • A process for applying for funding for counselling will be maintained in accordance with the Code. • Applications for funding will be presented to the Patient Relations Committee (PRC) at the next available meeting and decisions will be communicated to applicants.		
Timeframe:	All 4 Planning Years	Estimated cost:	\$10,500	Responsible: Deputy CEO
Year-to-date outcomes:	See Regulatory Operations Report.			
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred
Commentary:	Patient Relations information including guides and resources are maintained on the College's website.			

2.3.3	Complaints & Reports			
The College will operate a Complaints and Reports program to receive information and complaints about Registrants of the profession and to fulfil its obligations to investigate the matters in accordance with the <i>Regulated Health Professions Act, 1991</i> through the Inquiries, Complaints and Reports Committee (ICRC).		• Complaints received by the College will be processed in accordance with the Code. As such, • Concerns relating to professional misconduct or incompetence brought to the College's attention will be referred to the CEO for consideration of initiating a request for investigation. • Complaint and report files will be presented for the consideration and screening by the ICRC. • Complaints and Reports outcomes are monitored on an ongoing basis. Any deviation from ICRC decisions is reported to the Deputy CEO.		

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

			- The status and summary of active and closed complaints and reports are regularly updated and maintained on the College's website. - Program information will be maintained on the College's website.		
Timeframe:	All 4 Planning Years	Estimated cost:		Responsible:	Deputy CEO
Year-to-date outcomes:	See Regulatory Operations Report.				
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred	
Commentary:					

2.3.4	Cease & Desist											
The College will operate an Unauthorized Practitioners program that will issue Cease and Desist (C&D) letters to individuals not registered with the College who are holding themselves out as naturopathic doctors or providing naturopathic treatments and to Registrants who are breaching the standards of practice in a manner that presents a risk of public harm.				• C&D letters are drafted and sent to the individual via Process Server, where applicable. • Names of unauthorized practitioners are posted on the Register of Unauthorized Practitioners on the College’s website. • Staff follows up on the performance of signed confirmations and updates the Register of Unauthorized Practitioners. • Information regarding practitioners who have violated the confirmation is provided to the Deputy CEO. • Information about unauthorized practitioners who fail to sign a confirmation is provided to the Deputy CEO. • Matters are presented to the CEO for a decision on whether the College will seek an injunction from the Ontario Superior Court of Justice.								
Timeframe:	All 4 Planning Years							Responsible:	Deputy CEO			
Year-to-date outcomes:		See Regulatory Operations Report.										
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred
Commentary:												

2.3.5	Alternative Dispute Resolution Program				
The College will operate an Alternative Dispute Resolution Program (ADR) to ensure that matters that meet the eligibility criteria and are		Complaints received by the College will be reviewed by College staff for ADR eligibility.			

Activity				Key Performance Indicators									
All 4 Planning Years		2023-2024		2024-2025		2025-2026		2026-2027					
agreed to by both the Complainant and Registrant are properly resolved in accordance with section 25 of the RHPA and the program policies.					- An independent College approved Mediator is appointed for each eligible ADR matter. - A matter referred to ADR by the CEO must be completed and submitted for ratification within a maximum of 120 days of the referral.								
Timeframe:	All 4 Planning Years						Responsible:	Deputy CEO					
Year-to-date outcomes:		All complaints are reviewed for ADR eligibility. Where a matter meets the criteria, the parties are contacted and provided information about ADR and asked if they would like to proceed down this avenue.											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
Commentary:													

2.3.6	Prosecution through Hearings	
The College will operate a Hearings Program to ensure that matters that are referred by the Inquiries, Complaints and Reports Committee are properly adjudicated.		- Each matter referred by the ICRC will be assessed, and a determination made on the appropriateness of and opportunity for settlement. - Information for disclosure is provided to the CEO/legal counsel. - Matters that may be settled will proceed with a Pre-hearing conference as required, a draft Agreed Statement of Fact and Joint Submission on penalty that is consistent with the outcomes of similar disciplinary matters of the College and other Colleges. - Where no settlement is possible or appropriate, a full contested hearing will be delivered with the CEO representing the College, with support of legal counsel, as prosecution. - The College will facilitate the Chair's selection of panels for hearings, coordinating hearings, counsel, Independent Legal Counsel (ILC) and witnesses and providing technological support for hearings of the Discipline Committee (DC) and Fitness to Practise Committee (FTP). - Discipline hearings are scheduled and held as required.

Activity			Key Performance Indicators			
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027		
			- Information about current referrals to DC, hearings scheduled and completed, and DC decisions are published on the website and updated regularly. - The Registrant is notified of the ICRC decision and provided with a copy of allegations referred to DC. - Orders of panels will be monitored on an on-going basis to ensure the Registrant is in compliance. Any deviation from the order is reported to the CEO. - Terms, conditions and limitations imposed by the Panel and summaries of Undertakings are published in the Register.			
			- ILC will be retained by the College to provide on-going legal support to the Committee and the Chair. If requested by the Chair, a Request for Proposals will be developed and issued by the College with evaluations to be completed by the Committee. - Full committee meetings will be facilitated by the staff as directed by the Chair, including making necessary arrangements with ILC for training.			
As a corollary, the College will support the Discipline and Fitness to Practise Committees as quasi-judicial and independent adjudicative bodies.						
Timeframe:	All 4 Planning Years	Estimated cost:	\$342,945		Responsible: Chief Executive Officer	
Year-to-date outcomes:	See Regulatory Operations Report.					
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred		
Commentary:						

2.4 Registrants maintain their competence as a means of assuring the public that they will receive safe, competent, ethical care.

2.4.1	Quality Assurance Program
The College will operate a Quality Assurance (QA) Program as set out in the <i>Regulated Health Professions Act, 1991</i> and the Quality Assurance Regulation made under the <i>Naturopathy Act, 2007</i>.	
- Annual Registrant self-assessment - Review renewals to ensure all Registrants have completed their annual self-assessment, follow up with those who do not. - Continuing Education (CE) Reporting, in three groups, one group each year	

Activity				Key Performance Indicators									
All 4 Planning Years		2023-2024		2024-2025		2025-2026		2026-2027					
				○ The reporting group will be tracked, and CE reports analyzed. ○ Follow up with those not received. ○ Those not meeting requirements are presented to the Quality Assurance Committee (QAC) for review and further follow up.									
				• Peer & Practise Assessment program ○ QAC determines number of assessments to be completed and details of standards to be reviewed. ○ Registrants are randomly selected and undergo assessment by a peer. ○ Follow up with those who do not complete it or where issues are raised.									
				• CE course approval program ○ Applications for CE credits are presented to the QAC for review and approval. ○ List of approved courses is maintained on the website.									
Timeframe:		All 4 Planning Years				Responsible:		Deputy CEO					
Year-to-date outcomes:		See Regulatory Operations Report.											
Year-to-date rating:		☐	Not started		☒	In progress		☐	Completed		☐	To be deferred	
Commentary:													

2.4.2	Currency Hour Audits
The College's Registration program will establish and maintain a process for auditing the currency hours of Registrants to ensure that they meet the requirements as set out in section 6 of the Registration Regulation or appropriate steps are taken to mitigate the potential risk to patients.	• Currency hour reporting cycles are tracked, and annually declared currency hours will be analyzed. • Notices will be sent to General Class Registrants to alert them to their three-year currency cycle and accrued hours, starting in year one of their reporting cycle. • Annual currency hour audits will be conducted of those Registrants who have completed their three-year currency cycle.

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

				Those not meeting requirements will be provided with options as set out in the Registration Regulation and Registration policy for addressing currency hour deficiencies.				
Timeframe:	All 4 Planning Years					Responsible:	Director, Registration	
Year-to-date outcomes:	An audit of currency hours for the period 2020-2022 was completed in May 2023; the audit of practise hours for the period 2021-2023 will be initiated in April 2024. Reference and information documents, e.g., the Information Return Guide, are presently being updated to assist Registrants in better understanding reporting requirements including calculating, allocating and reporting their practise hours to the College. Further refinements to these documents are anticipated following conclusion of the Currency consultation currently underway and Council’s review of proposed amendments to the Registration Policy early in the new year.							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:								

2.5	The College examines the regulatory model to maximize the public protection benefit to Ontarians.
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2.5.1	Registration Regulation and Related Policies
In consultation with the Registration Committee, the College will undertake a comprehensive review of the structure and provisions of the Registration Regulation and related policies and make recommendations to the Council on any approaches that might maximize public protection for Ontarians. Wherever possible, recommendations that might reduce the overall reporting burden and "red tape" embodied in the regulation will be included.	- The College will consider the current classes of registration to determine if there is an alternative approach that might improve public protection and reduce the regulatory burden on Registrants. This will include whether objectives achieved through TCLs set in policy would be better placed in Regulation. - The College will consider the current structure of the entry-to-practice examinations to determine whether there may be opportunities to streamline the examinations and improve timeliness of access to the profession. - The College will consider whether all of the current ETP requirements surrounding acupuncture and naturopathic manipulation should remain or whether an alternative post-

Activity			Key Performance Indicators			
All 4 Planning Years	2023-2024	2024-2025	2025-2026		2026-2027	
			certification approach, such as rostering, may be beneficial to public protection and access to the profession. • The College will consider whether a specialization program might be warranted and in the public interest. • The College will consider current requirements set out in by-laws and standards that might more appropriately be incorporated into the Registration Regulation to improve enforcement opportunities in the public interest. • The Registration Committee, with the support of and training from the EDIC, will apply the EDIB tool to the regulation and make recommendations as to changes that may be warranted in keeping with the Council’s commitment to equity, diversity, inclusion and belonging.			
Timeframe:	2023-2024		Responsible:		Chief Executive Officer	
Year-to-date outcomes:	Work is presently underway to include policy provisions and operationalize the Emergency class certificate of registration in accordance with amendments made to the Registration Regulation (August 2023). Regulation amendments also included the adding of CPR to the terms and conditions of every General class certificate of registration in the interest of public protection.					
Year-to-date rating:	☐ Not started	☒ In progress	☐ Completed	☐ To be deferred		
Commentary:	EDIB lens tool training with the Registration Committee is scheduled for November 22, 2023. As part of its work with CANRA, the College has completed the initial draft of a proposed national entry to practise competency profile. Feedback on competency profile will be sought from the profession across the regulated jurisdictions starting in November 2023.					

2.5.2	General Regulation and Related Policies
In consultation with the Committees, the College will undertake a comprehensive review of the structure and provisions of the General Regulation and related policies and make recommendations to the Council on any approaches that might maximize public protection for Ontarians. Wherever possible, recommendations that	The Committees and staff of the College, with the support of and training from the EDIC, will apply the EDIB tool to the regulation and to make recommendations as to changes that may be warranted in keeping with the Council's commitment to equity, diversity, inclusion and belonging.

Activity			Key Performance Indicators		
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027	

might reduce the overall reporting burden and “red tape” embodied in the regulation will be included.					
Timeframe:	All 4 Planning Years			Responsible:	Chief Executive Officer
Year-to-date outcomes:	No activity scheduled in this reporting period.				
Year-to-date rating:	☒	Not started	☐	In progress	☐ Completed ☐ To be deferred
Commentary:					

2.5.3	Professional Misconduct Regulation and Related Policies				
In consultation with the Inquiries, Complaints and Reports Committee, the College will undertake a comprehensive review of the structure and provisions of the Professional Misconduct Regulation and related policies and make recommendations to the Council on any approaches that might maximize public protection for Ontarians. Wherever possible, recommendations that might reduce the overall reporting burden and “red tape” embodied in the regulation will be included.			- The College will consider whether retaining the prohibition on the use of testimonials is in keeping with modern approaches to regulation or whether it might be restructured or removed. - The College will consider whether a program of specialization is recommended in other reviews and therefore whether changes to the Professional Misconduct Regulation might be warranted. - The College will consider whether a breach of by-laws should be included as a defined act of professional misconduct. - The ICRC and staff, with the support of and training from the EDIC, will apply the EDIBtool to the regulation and to make recommendations as to changes that may be warranted in keeping with the Council’s commitment to equity, diversity, inclusion and belonging.		
Timeframe:	2024-2025			Responsible:	Chief Executive Officer
Year-to-date outcomes:	No activity scheduled in this reporting period.				
Year-to-date rating:	☒	Not started	☐	In progress	☐ Completed ☐ To be deferred
Commentary:	This matter will be undertaken in later years covered by the Strategic Plan.				

2.5.4	Quality Assurance Regulation and Related Policies				
In consultation with the Quality Assurance Committee, the College will undertake a comprehensive review of the structure and provisions of the Quality Assurance Regulation and related policies and make recommendations to the Council on any approaches that			The College will consider whether the structure of the Committee as mandated in the Regulation is appropriate and in the public interest.		

Activity			Key Performance Indicators	
All 4 Planning Years	2023-2024	2024-2025	2025-2026	2026-2027

might maximize public protection for Ontarians. Wherever possible, recommendations that might reduce the overall reporting burden and “red tape” embodied in the regulation will be included.				• The College will consider whether provisions mandating participating in a College developed program for Registrant portfolios is required or recommended. • The Quality Assurance Committee, with the support of and training from the EDIC, will apply the EDIB tool to the regulation and make recommendations as to changes that may be warranted in keeping with the Council’s commitment to equity, diversity, inclusion and belonging.					
Timeframe:	2025-2026					Responsible:	Chief Executive Officer		
Year-to-date outcomes:		No activity scheduled in this reporting period.							
Year-to-date rating:		☒	Not started	☐	In progress		Completed	☐	To be deferred
Commentary:									

2.5.5	Standards Review												
In consultation with the Standards Committee, the College will undertake a comprehensive review of the structure and provisions of the standards and related policies and in the context of other recommendations made under this priority activity and will make recommendations to the Council on any changes necessary. Wherever possible, recommendations that might reduce the overall reporting burden and “red tape” embodied in the regulation will be included.					• The College will consider whether any commensurate amendments to the standards are necessary based on the proposed changes set out under the other area of this priority activity. • The Standards Committee, with the support of and training from the EDIC, will apply the EDIB tool to the standards and make recommendations as to changes that may be warranted in keeping with the Council’s commitment to equity, diversity, inclusion and belonging.								
Timeframe:		All 4 Planning Years				Responsible:		Deputy CEO					
Year-to-date outcomes:		No activity scheduled in this reporting period.											
Year-to-date rating:		☒	Not started		☐	In progress		☐	Completed		☐	To be deferred	
Commentary:													

2.5.6	By-laws Review			
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Activity			Key Performance Indicators					
All 4 Planning Years	2023-2024		2024-2025		2025-2026		2026-2027	
In consultation with the committee, the College will undertake a comprehensive review of the structure and provisions of by-laws in light of other recommendations made under this priority activity and will make recommendations to the Council on any changes that may be necessary. Wherever possible, recommendations that might reduce the overall reporting burden and “red tape” embodied in the regulation will be included.				- The College will consider whether any commensurate amendments to the by-laws are necessary based on the proposed changes set out under the other area of this priority activity. - The staff of the College, with the support of and training from the EDIC, will apply the EDIB tool to the by-laws and make recommendations as to changes that may be warranted in keeping with the Council’s commitment to equity, diversity, inclusion and belonging.				
Timeframe:	All 4 Planning Years					Responsible:	Chief Executive Officer	
Year-to-date outcomes:	The first round of by-law amendments, relating to the Emergency Class of Registration, will be brought forward to Council in November.							
Year-to-date rating:	☐	Not started	☒	In progress	☐	Completed	☐	To be deferred
Commentary:	As other regulations and policies are reviewed in the coming years, further changes may be necessary.							



The College of Naturopaths of Ontario

MEMORANDUM

DATE: November 17, 2023

TO: Council members
College of Naturopaths of Ontario

FROM: Agnes Kupny
Director of Operations

RE: Variance Report – Q2 Unaudited Financial Statements

I am pleased to provide this Variance Report and the Unaudited Financial Statements of the College of Naturopaths of Ontario as of September 30, 2023, which represents the second quarter (Q2) of our fiscal year 2023-2024.

Statement of Financial Position

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

Our accounts receivable had a balance of \$542,737.78 owing to the College, most of which pertains to registration fees where the Registrants are on the College's Payment Plan. At the end of Q2 a total of six of the 10 pre-authorized deductions have taken place for 663 Registrants. Through the first two quarters, we have seen a trend emerge where a single Registrant will have the monthly payment declined by their bank due to non-sufficient funds (NSF) repeatedly. Overall, our NSF rates for this quarter are averaging at 1% with four to six items returned each month. Upon follow up with Registrant's we are able to resolve each payment matter within three business days.

Additional monies being owed to the College include Ordered DC costs in the amount of \$79,283.04. This quarter the College has received two small partial payments in the amount of \$3,138.

The pre-paid account in the amount of \$65,532.06 is a combination of annual membership license fees that are billed annually and then pro-rated month over month.

Under Liabilities the Accounts Payable account has a balance of \$103,071.58. This is made up of month-end payments for legal costs, investigation costs and exam maintenance and delivery costs. The College ensures that all monies owed are paid within 30 days.

The small amount noted in accrued liabilities of \$2,149.77 are the remaining monies for vacation time that staff are permitted to roll over that we are anticipating being utilized and cleared up by the end of Q3.

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

Statement of Operations

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

- **Blue**- notes actual budget and actual expenditures for Q2 only.
- **Green**- is a calculation of how much was spent in Q2 versus the Q2 budget.
- **Yellow**- historical data from the previous year to illustrate actual expenditures versus the budget.
- **Purple**- captures the budget and actual expenditures compounding from quarter to quarter. In this report the table includes data for Q1 and Q2.
- **Pink**- illustrates the actual annual budget and the percentage of the budget received or spent to date.

Revenue

Total Year-to-Date actual revenue was \$3,410,553. This compares to the Year-to-Date budget of \$3,391,371 resulting in a favourable balance of \$19,182. At the end of the quarter the College has exceeded its year to budgeted targets by 1% and is 9% away from meeting its annual budgeted targets.

This quarter all items generated revenue with the exception of miscellaneous income. This line item has a small budget allocation for incidentals. The primary line items that resulted in favourable variances this quarter are incorporation fees, interest, and investments.

Line Item	Current 2023-2024 Fiscal Year				Prior 2022-2023 Fiscal Year		
	Year to Date Revenue	Year to Date Budget	Variance in \$	% of Budget	Q2- Actual Revenue	Q2- Variance in \$	Q2- Variance in %
Registration Fees	\$3,082,248	\$2,990,946	\$91,302	103% of budget	\$2,838,677	(\$24,831)	99% of budget
Examination Fees	\$201,275	\$243,875	(\$42,600)	82.5% of budget	\$182,400	(\$11,900)	94% of budget
Incorporation Fees	\$13,750	\$13,850	(\$100)	99% of budget	\$12,050	(\$4,550)	73% of budget
Ordered Costs Recovered	\$3,138	\$45,000	(\$41,863)	7% of budget	\$10,200	(\$38,800)	21% of budget
Inspection Fees	\$64,200	\$85,000	(\$20,800)	75.5% of budget	\$66,100	(\$18,900)	78% of budget
Interest	\$12,338	\$1,200	\$11,138	1028% of budget	\$2,748	\$1,548	229% of budget
Investment Income	\$33,604	\$11,200	\$22,404	300% of budget	\$7,310	\$1,910	135% of budget

Registration Fees (103% of YTD Budget)– This quarter there was one Registrant who changed status from inactive to active, two Entry-to-Practice applications were received and three certificates were issued. This line item has met its annual budgeted amount.

Examination Fees (83% of YTD Budget) –This quarter examinations had a shortfall of \$42,600 against our year-to-date budgeted revenues. This quarter 43 Jurisprudence exams were completed, 79 candidates attended the Biomedical exam, 47 candidates attended the Therapeutic exam, 35 candidates attended the Clinical practical exam, and nine candidates attended the Clinical sciences exam. The Clinical Practical and the Clinical Sciences exams both had less than 50% candidate enrollments against what had been projected in the budget.

Professional Corporation Fees (99% of YTD Budget)– This quarter there were 20 premises which were renewed and one new application. The fees for Incorporations are billed based on when the premises were first incorporated. This line item is anticipated to meet its budgeted allocation.

DC Ordered Costs (7% of YTD Budget)- Two Registrant's have made partial payments against the orders issued by the Discipline Committee. There are also two larger amounts held by two Registrants in which the College at this time is not expecting remuneration. The College has taken legal action against one of the Registrants. All other Registrants who have ordered costs are on repayment plans that are distributed over a period of one to two years.

Inspection Fees (76% of YTD Budget)- This quarter the College completed nine 5-year premise inspections and five new premise inspections. The shortfall year to date of \$20,800 is due to the budget being overstated. It is not anticipated that this program will meet its budgeted targets.

Interest (1028% of YTD Budget)- The College's chequing accounts bears little to no interest due to the number of transactions and service fees. Due to a slight increase in the College's savings account the rate of return is higher than budgeted. This line item has exceeded its annual budgeted allocation.

Investment Income- (300% of YTD Budget)- The College's investment portfolio includes a GIC and Mutual funds which have both been renewed this quarter for a one-year term. With interest rates increased both the GIC and Mutual Funds are performing better than budgeted. This line item has exceeded its annual budgeted allocation.

Expenses

Total Year-to-Date expenses were \$1,607,472 versus the Year-to-Date budget of \$2,089,813. The favorable variance of \$482,341 is within 77% of the budget. There was a total of two line items that exceeded budgeted expectations. These items are Rent and Utilities which has been rolled over from the previous quarter and Hearings.

The accounts with the greatest cost savings this quarter include: Office and General, Consulting Fees Complaints and Inquiries, Legal Fees General and Education and Training, each with over 50% cost savings year to date.

Line Item	2023-2024				2022-2023		
	Year to Date Expense	Year to Date Budget	Variance in \$	% within the Budget	Q2-Actual Expense	Q2-Variance in \$	Q2-Variance in %
Rent and Utilities	\$95,741	\$88,100	(\$7,641)	109% of budget	\$138,608	\$32,899	81% of budget
Hearings	\$15,261	\$11,915	(\$3,346)	128% of budget	\$10,478	\$4,522	70% of budget
Office and General	\$64,017	\$146,303	\$82,286	44% of budget	\$48,522	\$25,487	66% of budget
Consulting Fees- Complaints and Inquiries	\$30,387	\$67,500	\$37,113	45% of budget	\$53,072	\$14,428	79% of budget
Legal Fees-General	\$6,788	\$14,000	\$7,212	48% of budget	\$4,524	\$18,192	20% of budget
Education and Training	\$5,915	\$12,225	\$6,310	48% of budget	\$4,322	\$11,483	27% of budget

Rent and Utilities (109% of YTD Budget)- At the end of Q2, the College had budgeted the payment of rent over two months as was anticipating the return of the College's last month security deposit from the previous landlord. This differential will be balanced at Q4 when the College receives its security deposit.

Hearings (128% of YTD Budget)- There were no hearings held in Q2. In this quarter this line item exceeded budget due to the translation of a Decision and Reason. These documents may be lengthy and commonly incur translation fees of \$2,000 to \$3,000 each. Although this quarter hearings have exceeded its budgeted allocation it is on track to end the year within budget.

Office and General (44% of YTD Budget)- With the College continuing to work on a hybrid model, less fees are being incurred for office supplies and janitorial services. This quarter no fees were incurred for translation and membership fees. The two major membership fees will be processed between Q3-Q4 with one each quarter. This line item is expected to finish the year under budget.

Consulting Fees- Complaints and Inquires (45% of YTD Budget)- This quarter one complaint was opened, and three complaints were closed. There were also three CEO Inquires opened and one closed. This line item is anticipated to end the year with cost savings, due to the timings of investigations and referrals to discipline.

Legal Fees-General (48% of YTD Budget)- This quarter the costs of legal fees throughout the various departments have been low or have not been incurred by certain programs including inspections and professional corporations. It is anticipated that cost savings will be incurred by this line item.

Education and Training (48% of YTD Budget) – The roll out of bi-annual training for all staff with the Canadian Centre for Diversity and Inclusion (CCDI) will be rolled out in Q3. All staff will

also be participating in one additional supplementary training session with CCDI alongside the Council. The College is anticipating year-end cost savings in this line item.

Overall Standing

Based on the analysis provided, as highlighted in pink, the overall revenues at the end of Q2 are 91% of the budget. Examinations and Incorporation fees are on track to achieving budgeted expectations. Overall expenses are at 40% of the budget, which is lower for the end of the quarter using the benchmark of 50%.

Capital Expenditures

This quarter only the IT equipment capital was utilized for the purchase of one laptop. A total of 52% of the IT equipment budget has been used to date.

No purchases have been made for Office Furniture and Fixtures in Q2. We are planning to use these monies between Q3-Q4 for additional storage.

We have received approval by the City of Toronto for us to commence construction to the suite as well as three vendor quotes to complete the construction. After careful consideration due to the cost of construction, we have opted to leave the suite as is and purchase some furniture to store office supplies. We will be engaging the office interior designer we used to assist with the office move to do this work. As a result, we anticipate having full cost savings for this line item.

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

Respectfully submitted.



The College of Naturopaths of Ontario

STATEMENT OF FINANCIAL POSITION
As of September, 2023 (Q2)
50% of Fiscal Year

ASSETS

Chequing / Savings	
Bank - Operating Funds	\$ 77,492.83
Bank - Savings	\$ 932,203.35
Petty Cash	\$ 500.00
Refund Clearing	\$ (1,454.54)
<i>Total Chequing / Savings</i>	<i>\$ 1,008,741.64</i>
Accounts Receivable	
Accounts Receivable	\$ 542,737.78
Allowance for Doubtful Accounts	\$ (43,015.68)
Ordered DC Costs	\$ 79,283.04
<i>Total Accounts Receivable</i>	<i>\$ 579,005.14</i>
Other Current Assets	
Prepaid Expenses	\$ 65,532.06
Investment in Mutual funds	\$ 1,632,732.58
Accrued Interest	\$ 8,233.51
Investment in GIC	\$ 515,388.75
<i>Total Other Current Assets</i>	<i>\$ 2,221,886.90</i>
Fixed Assets	
Construction	\$ -
Computer Equipment	\$ 96,417.47
Furniture and Fixtures	\$ 150,050.08
Accumulated Amortn - Computers	\$ (69,265.18)
Accumulated Amortn - Furniture	\$ (129,388.69)
<i>Total Fixed Assets</i>	<i>\$ 47,813.68</i>

TOTAL ASSETS**\$ 3,857,447.36****LIABILITIES AND EQUITY**

Accounts Payable	
Accounts Payable	\$ 103,071.58
Credit cards	\$ (238.52)
<i>Total Account Payable</i>	<i>\$ 102,833.06</i>
Other Current Liabilities	
Accrued Liabilities	\$ 2,149.77
Accrued Liabilities-Discipline	\$ -
Deferred Income	\$ -
HST Payable	\$ 53,035.17
<i>Total Current Liabilities</i>	<i>\$ 55,184.94</i>
Equity	
Retained Earnings	\$ (332,159.76)
Patient Relations Fund	\$ 90,385.13
Business Continuity Fund	\$ 1,083,877.00
Investigations and Hearing Fund	\$ 1,004,246.00
Succession Planning Fund	\$ 50,000.00
Current Earnings	\$ 1,803,080.99
<i>Total Equity</i>	<i>\$ 3,699,429.36</i>

TOTAL LIABILITIES AND EQUITY**\$ 3,857,447.36**



The College of Naturopaths of Ontario

Analysis of Statement of Operations for Q2 commencing July 01, 2023 to September 30, 2023

	Q1						12 MONTH ENDING MARCH 31, 2024				ANNUAL BUDGET	% OF BUDGET REC'D AND/OR SPENT
	Jul-Sep'23 Budget	Jul-Sep'23 Actual	BUDGET FAV (UNFAV) VARIANCE		Jul-Sep'22 Actual	Jul-Sep'22 FAV (UNFAV) VARIANCE	YTD Budget	YTD Actual	BUDGET FAV (UNFAV) VARIANCE			
	\$'s	\$'s	\$	%	\$'s	\$	\$'s	\$'s	\$	%		
Revenue												
Registration and Member Renewals	18,078	8,778	(9,300)	49%	13,681	(35,659)	2,990,946	3,082,248	91,302	103%	3,049,041	101%
Examination Fees	181,150	82,125	(99,025)	45%	92,058	(70,242)	243,875	201,275	(42,600)	83%	337,625	60%
Deferred Capital Funding	-	-	-	0%	-	-	-	-	-	0%	-	0%
Incorporation Fees	6,450	7,200	750	112%	6,300	1,650	13,850	13,750	(100)	99%	29,000	47%
Ordered Costs Recovered	-	3,138	3,138	0%	5,600	5,600	45,000	3,138	(41,863)	7%	135,000	2%
Inspection Fees	42,500	25,300	(17,200)	60%	45,200	2,700	85,000	64,200	(20,800)	76%	170,000	38%
Interest	600	8,042	7,442	1340%	1,972	1,372	1,200	12,338	11,138	1028%	2,400	514%
Investment Income	3,500	17,196	13,696	491%	5,938	4,138	11,200	33,604	22,404	300%	18,200	185%
Miscellaneous Income	100	-	(100)	0%	105	105	300	-	(300)	0%	400	0%
Total Revenue	252,378	151,779	(100,599)	60%	170,854	(90,336)	3,391,371	3,410,553	19,182	101%	3,741,666	91%
Expenses												
Salaries and Benefits	509,192	495,472	13,720	3%	432,729	48,247	1,080,710	902,538	178,172	16%	2,112,864	43%
Rent and Utilities	51,600	47,165	4,435	9%	63,387	22,366	88,100	95,741	(7,641)	-9%	191,300	50%
Office and General	77,681	32,103	45,578	59%	20,698	15,781	146,303	64,017	82,286	56%	258,173	25%
Consulting Fees-General	4,000	8,198	(4,198)	-105%	1,505	15,895	12,700	10,583	2,117	17%	57,750	18%
Consulting Fees-Complaints and Inquires	32,250	18,984	13,266	41%	27,642	4,608	67,500	30,387	37,113	55%	132,000	23%
Consulting Fees-Assessors/Inspectors	15,000	7,095	7,905	53%	3,153	15,747	22,500	12,861	9,639	43%	65,000	20%
Exam Fees and Expenses	106,547	65,163	41,384	39%	41,972	46,996	187,962	123,804	64,158	34%	319,283	39%
Legal Fees-General	6,800	4,478	2,322	34%	1,910	9,448	14,000	6,788	7,212	52%	28,400	24%
Legal Fees-Complaints	13,000	7,220	5,781	44%	21,353	(8,653)	37,000	26,683	10,317	28%	104,000	26%
Legal Fees-Discipline	15,000	50,998	(35,998)	-240%	38,948	(38,948)	105,000	78,695	26,305	25%	300,000	26%
Council Fees and Expenses	102,595	57,304	45,290	44%	85,901	3,476	142,433	102,925	39,508	28%	193,694	53%
Hearings (Discipline, Fitness to Practice)	-	6,454	(6,454)	0%	5,369	(5,369)	11,915	15,261	(3,346)	-28%	42,945	36%
Amortization/Depreciation	-	-	-	0%	-	-	-	-	-	0%	28,425	0%
Insurance	-	23,039	(23,039)	0%	-	-	36,000	33,448	2,552	7%	36,000	93%
Equipment Maintenace	12,690	14,577	(1,887)	-15%	12,838	(136)	25,580	24,372	1,208	5%	50,960	48%
Audit Fees	17,000	16,400	600	4%	15,600	900	17,000	16,400	600	4%	17,000	96%
Public Education	11,420	8,343	3,077	27%	19,682	(8,679)	82,215	56,457	25,758	31%	112,555	50%
Education and Training	2,225	3,215	(990)	-44%	(518)	1,968	12,225	5,915	6,310	52%	13,975	42%
Postage and Courier	328	170	158	48%	67	605	670	598	72	11%	1,327	45%
Total Expenses	977,328	866,376	110,952	11%	792,236	124,252	2,089,813	1,607,472	482,341	23%	4,065,650	40%
Total Revenue over Expenses	(724,950)	(714,597)	(211,551)	29%	(621,382)	(214,588)	1,301,558	1,803,081	(463,159)	29%	(323,984)	



The College of Naturopaths of Ontario

Statement of Operations

	2023-2024			
	Budget	Y-T-D Actual	YTD as % of Budget	Apr-Sept'23 Budget
REVENUES				
Registration and member renewal fees	\$ 3,049,041	\$ 3,082,248	101%	\$ 2,990,946
Examination fees	\$ 337,625	\$ 201,275	60%	\$ 243,875
Deffered capital funding	\$ -	\$ -	#DIV/0!	\$ -
Incorporation fees	\$ 29,000	\$ 13,750	47%	\$ 13,850
Ordered costs recovered	\$ 135,000	\$ 3,138	2%	\$ 45,000
Inspection fees	\$ 170,000	\$ 64,200	38%	\$ 85,000
Interest	\$ 2,400	\$ 12,338	514%	\$ 1,200
Investment Income	\$ 18,200	\$ 33,604	185%	\$ 11,200
Miscellenous	\$ 400	\$ -	0%	\$ 300
TOTAL REVENUES	\$ 3,741,666	\$ 3,410,553		\$ 3,391,371
EXPENSES				
Salaries and benefits	\$ 2,112,864	\$ 902,538	43%	\$ 1,080,710
Rent and utilities	\$ 191,300	\$ 95,741	50%	\$ 88,100
Office and general	\$ 258,173	\$ 64,017	25%	\$ 146,003
Consulting fees				
Consultants - general	\$ 57,750	\$ 10,583	18%	\$ 12,700
Consultants - complaints and inquiries	\$ 132,000	\$ 30,387	23%	\$ 67,500
Consultants - assessors/inspectors	\$ 65,000	\$ 12,861	20%	\$ 22,500
Exam fees and expenses	\$ 319,283	\$ 123,804	39%	\$ 187,962
Legal fees				
Legal fees - general	\$ 28,400	\$ 6,788	24%	\$ 14,000
Legal fees - complaints	\$ 104,000	\$ 26,683	26%	\$ 37,000
Legal fees - discipline	\$ 300,000	\$ 78,695	26%	\$ 105,000
Council fees and expenses	\$ 193,694	\$ 102,925	53%	\$ 142,433
Hearings (Discipline, Fitness to Practise)	\$ 42,945	\$ 15,261	36%	\$ 11,915
Amortization/Depreciation	\$ 28,425	\$ -	0%	\$ -
Insurance	\$ 36,000	\$ 33,448	93%	\$ 36,000
Equipment maintenance	\$ 50,960	\$ 24,372	48%	\$ 25,580
Audit fees	\$ 17,000	\$ 16,400	96%	\$ 17,000
Public education	\$ 112,555	\$ 56,457	50%	\$ 82,215
Education and training	\$ 13,975	\$ 5,915	42%	\$ 12,225
Postage & Courier	\$ 1,327	\$ 598	45%	\$ 670
TOTAL EXPENSES	\$ 4,065,650	\$ 1,607,472		\$ 2,089,513
EXCESS OF REVENUES OVER EXPENSES	\$ (323,984)	\$ 1,803,081		\$ 1,301,858



2023-24 Capital Statement

Line Item	Total Budget (April 2023-March 2024)	April	May	June	July	August	September	October	November	December	January	Febuary
Computer Equipment	\$14,000.00		\$4,939.92			\$2,367.21						
Furniture & Fixtures	\$3,000.00											
Leasehold Improvement	\$30,000.00											
Total	\$47,000.00											

March	YTD Actual	Balance
	\$7,307.13	\$6,692.87
	\$0.00	\$3,000.00
	\$0.00	\$30,000.00
	\$7,307.13	\$39,692.87

 The College of Naturopaths of Ontario	Policy Type	COUNCIL POLICIES
	ENDS	
	Title	Policy No. E02.06
	PRIORITIES	Page No. 1

There are several critical underpinnings to the College Council's strategic objectives and priorities. These include effective regulation, good governance, engendering trust and engagement through education and collaboration.

1. The College's primary focus will be on effectively regulating the profession in accordance with the legislative framework and demonstrating the principles of good governance, both in terms of the organization and its financial performance. As such,
 - a. The College will deliver and optimize the necessary regulatory functions encompassed within the legislative framework, including:
 - i. Registration practices that ensure qualified individuals have access to the profession;
 - ii. Setting standards of practice that guide the profession, premises and the public to ensure safe, competent, ethical care;
 - iii. Ensuring continuing competence of the profession through education and professional development;
 - iv. Holding the profession accountable for its decisions and ability to practice within the standards and legislation; and
 - v. Supporting patients through programming to prevent sexual abuse and supporting those who may have encountered it.
 - b. The College will govern itself and its programming to ensure adherence to the principles of
 - i. Transparency and accountability;
 - ii. Equity, diversity, inclusion and belonging;
 - iii. Quality decision-making made by highly competent and professional individuals;
 - iv. Proper management and support of its human resources, both staff and volunteers; and
 - v. Sound financial and risk management, resource allocation and support practices to ensure the long-term security of the College and its ability to fulfill its public interest role.
2. The College's secondary focus will leverage its accomplishments from its primary focus to engender trust of the College and trust of the profession among the public and its other stakeholders. As such,
 - a. The College will engage its system partners, Registrants and other stakeholders in processes that increase their understanding of the College, its performance and creates the opportunity to engender trust. As such,
 - i. The College will engage both individually and collectively with its system partners;
 - ii. The College will provide information and education through its programming to both create opportunities for dialogue but also for education and training.
 - b. The College will focus on effective regulation within the context of the regulations, policies and standards that it has within its control. As such,

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

 The College of Naturopaths of Ontario	Policy Type	COUNCIL POLICIES
	ENDS	
	Title	Policy No. E02.06
	PRIORITIES	Page No. 2

- i. Risk-based regulation will become a focus of the College to proactively regulate the profession in the public interest;
- ii. Reviews will be undertaken of the regulations, standards and program policies to ensure that they maximize the College's ability to protect the public and support public safety.

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



The College of Naturopaths of Ontario

BRIEFING NOTE Proposed By-law Changes

PURPOSE: To consider proposed changes to the College's by-laws.

OUTCOME Review and approval of the proposed changes.

NATURE OF DECISION ☐ Strategic ☐ Regulatory Processes & Actions ☒ Other

PROCESS:

Activity:	Presentation of by-law changes.		
Results:	Discussion and agreement on adopting the changes.		
Overall Timing:	15 minutes		
Steps/Timing:	1.	Presentation	5 minutes
	2.	Q&A / Discussion	8 minutes
	3.	Motion and voting	2 minutes

BACKGROUND:

At its March 2023 meeting, the Council of the College approved proposed changes to the Registration Regulation to enable an Emergency Class Certificate of Registration. This action was taken at the request of the Government of Ontario.

In August 2023, the Lieutenant Governor in Council provided Royal Assent to Ontario Regulation 290/23 thereby adopting the amendments that had been agreed upon by the Minister.

With the Regulation amended, the College then proceeded to review the College by-laws to incorporate this new class of registration. A review was undertaken by the CEO, Deputy CEO, Director, Registration & Examinations and General Counsel to the College.

In addition, whenever amendments are being considered for the by-laws, a thorough review of the full set of by-laws is undertaken to avoid later changes.

The following are the categories of changes being proposed and correspond with the coding set out in the Compendium of Proposed Changes (copy attached):

- EC Proposed changes identified with the category EC are those to accommodate the new Emergency Class Certificate of Registration in the event that the class is opened. The types of EC proposed changes include accounting for individuals holding this certificate of registration being on the public register and the kinds of information that must be displayed.
- H Proposed changes identified with category H are housekeeping changes being proposed. Housekeeping changes typically involve typographical or grammatical changes that have not previously been found. These changes have no significant policy considerations.

PA Proposed changes intended to align the by-laws with Council policies are identified with category PA. Council can and does amend its policies on a more frequent basis than the by-laws, and these policies can include policy elements that extend those requirements set out in the by-laws. These amendments align the by-laws with these policies to incorporate the added details that may only currently appear in policy. For example, eligibility criteria for appointments to Council in the by-laws may refer to not being the subject of a suspension due to non-payment of fees; however, Council policies refer to administrative suspensions that consider both non-payment of fees and failure to return information to the College. Aligning the by-laws to the policies is important for both clarity and consistency between the by-laws themselves and various policies.

Fees Finally, there are proposed changes to the Fee Schedule, which is Schedule 3 of the by-laws. This is necessary to enable the Emergency Class; however, there are also changes to align the approach to Registration Fees for Registrants and Professional Corporations and to consider increases in fees that have not changed in the eight years since proclamation of the *Naturopathy Act, 2007*.

On September 8, 2023, the CEO initiated a consultation of all stakeholders in support of the by-law changes. The deadline for submissions was November 10, 2023.

DISCUSSION POINTS:

Feedback Received

The College has received two submissions from Registrants, one regarding fees generally and one specifically objecting to the increase in fees for the Ontario Clinical (Practical) Examinations. Anonymized copies of the submissions are attached.

No other feedback was received from Registrants or stakeholders.

Comments on Feedback

With respect to the comments on ND fees being the highest and without the same opportunity for monetization, it is important to note that the proposed fee increases do not impact individual NDs. The only fees proposed to be changed are those to be paid by Professional Corporation applications and processing, which have not been increased since proclamation in 2015 and Ontario Clinical (Practical) Examination fees. These increases are reflective of the overall increases in costs encountered by the College due to inflation since that time.

With respect to the comments on examination fees, as noted, the proposed changes are intended to reflect overall inflationary increases in costs encountered by the College as well as additional costs incurred as a result of increased health and safety measures employed for in-person examinations since the onset of the pandemic; however, it should be noted that the increase is in the amount of \$20 for the initial examination attempt and an increase of \$20 for any retakes that might be needed. These are not exorbitant fee increases.

Overview of Proposed Changes

The following is an overview of the proposed changes that have been incorporated into the attached Compendium of By-law Amendments along with brief explanations. Council members are invited to review the Compendium itself for more detailed explanations.

Section	Explanation
1.01 Definitions	This change is required in support of the creation of the Emergency Class of registration in the Registration Regulation.
10.05 Eligibility for Election	These changes are intended to accommodate the new Emergency Class as well as to simplify the wording of the provision by removing duplicate wording. It is noted that Emergency Class certificate holders cannot be elected to the Council. Changes also align the content with wording elsewhere in the by-laws and with Council policy.
10.06 Eligibility to Vote	Changes are intended to simplify the wording of the provision.
10.33 Filling of Vacancies and 10.34 By-election Requires	These changes are intended to simplify the process for filling vacancies by leaving the decision as to whether to appoint a person to fill a vacancy or run a bi-election to the Council. It is reflective of current issues with finding potential candidates for election to the Council.
11.07 Manner of Meeting	This change ensures recognition that video conferences are an appropriate and explicitly defined means for the Council to meet.
13.14 Registrant Eligibility for Appointment	The changes here are intended to simplify the wording where possible and align with other aspects of the eligibility and disqualification requirements in the by-laws. It is important to note that Emergency Class Registrants can be appointed to Committees although they are not eligible for election to Council.
13.14.1 Eligibility for Appointment as a Public member	These changes are intended to remove unnecessary barriers to participation and that might be deemed to be contrary to the Council's commitment to equity, diversity, inclusion and belonging.
16.11 Employment Positions 16.11.01 Appointment to In-field positions	The conflict-of-interest provisions are clarified to note who is an employee and when a resignation is required to apply for an employment position. It has been clarified that a Council member, Committee member and in-field volunteer positions are not employment positions. As such, a person could perform all three roles with the College at the same time; however, they cannot apply for a paid staff position without first resigning from any such positions.
18.01.1 Annual Registration Fee and 18.02 Renewal Process	These combined changes are intended to bring clarity to the annual fees and the renewal process and set the date for payment of fees. They also incorporate that at the time of renewal, any outstanding fees owed by a Registrant by order of a College committee automatically become part of the next year's annual fees.
18.07 Proration of Fees	This change clarifies that fees for the Emergency class certificate of registration are not included in the proration provision. This is because the fees are being set low at \$100.

Section	Explanation
20.05 Additional Registrant Information	These changes are to enable the Emergency class of registration.
20.12 Information Requests	These changes are made to enable the Emergency class of registration which requires supervised practice. The changes also enable enforcement of the CPR provisions now included in Regulation.
20.13 Automatic Notification of the College	These changes reduce the timeframe for notifying the College of certain information from 30 to fourteen or two days in some instances.
21.05.01 Automatic Inflationary Increase	These changes apply the Consumer Price Index changes currently in place for Registration fees to the fees for professional corporations.
23.01 Designation of Life Registrants and 23.01.01	These provisions streamline approval for applications for life registration and mimic those for a general class certificate of registration allowing the CEO to approve them or, if they are not prepared to do so, for them to be referred to the Registration Committee for consideration.
Schedule 3 - fees	Certain fees have been added to enable the Emergency Class. Other changes have applied increases to Professional Corporation Fees and entry to practise practical examination fees that are reflective of inflationary increases since 2015.

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. Only those risks that have been identified will be addressed.

- Operational risk:
 - Process – despite best efforts, there is a risk that one or more provisions that should have been amended have not been.
- Strategic risk:
 - Economic environment – although inflation is easing, there remains considerable pressure on the costs for Canadians to maintain their lives. Similarly, the costs experienced by the College are increasing as well. This brings a sense of instability and sensitivity to price increases.
 - Reputation – there is always a risk that some of the Registrants or stakeholders will oppose the by-law changes after approval. These risks have been mitigated as best as possible through the consultation process.

Privacy Considerations – The feedback from the two Registrants has been included in this briefing; however, personal information has been redacted, reducing the risk of a privacy breach.

Transparency – 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. Only those transparency principles that are relevant have been identified and addressed. In this instance, transparency has been accomplished in a number of ways:

- Information to foster trust – detailed explanations have been included in the Compendium of By-law changes which was circulated as part of the consultation process.
- Timely, accessible and contextual – information provided was timely in that it was released in accordance with the legal requirements and at the time the decisions were being contemplated and with the full context of the issues raised.

Financial Impact – There is no immediate financial impact; however, long-term the increase in the number of fees should work to reduce on-going annual deficits.

Public Interest – 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.

- Many of the changes support the implementation of the emergency class of registration which the Government has deemed a matter of public interest.
- The matters relate to or support the College's statutory obligations.

EDIB – The Council and the College have made a commitment to equity, diversity, inclusion and belonging generally and to ensuring that its policies and programs do not include any elements of racism and promote EDIB principles. With respect to this matter, EDIB has been considered in the context of the information that is used for certain decisions and ensuring that the information is necessary and warranted and does not systemically discriminate against certain group.

RECOMMENDATIONS

It is recommended that the Council approve the proposed by-law changes as presented.

Andrew Parr, CAE
Chief Executive Officer
November 2023

**Proposed Changes to the By-laws
August 2023**

1. INTERPRETATION

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
1. INTERPRETATION					
1.01 Definitions					
“Patient interaction”	means a patient encounter that includes an assessment and/or diagnosis, treatment and/or monitoring of a patient or patient’s condition in accordance with the standards of practice of the profession;	“Patient interaction”	means a patient encounter that includes an assessment and/or diagnosis, treatment and/or monitoring of a patient or patient’s condition in accordance with the standards of practice of the profession;	EC	This provision is added in support of the new Emergency Class of registration where supervised practice is required.
10. ELECTION OF REGISTRANTS TO COUNCIL					
10.05 Eligibility for Election					
A Registrant is eligible for election to Council if the Registrant has been nominated in accordance with these by-laws, the Registrant has completed and returned the Election Package and if, on the deadline for the receipt of nominations and up to		A Registrant is eligible for election to Council if the Registrant has been nominated in accordance with these by-laws, the Registrant has completed and returned the Election Package and if, on the deadline for the receipt of nominations and up to		H	Wording change to simplify the provision.

¹ Cat. Refers to category of the change and indicates the following: H designates a housekeeping measure; EC designates a measure to introduce the Emergency Class of Registration; PA designates a policy alignment of the by-laws with Council policies, NA designates that the particular provision is not the subject of any proposed changes.

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
and including the date of the election the Registrant :		and including the date of the election the Registrant:			
(i)	Repealed holds a certificate of registration in the General Class or Inactive Class;	(i)	holds a certificate of registration in the General Class or Inactive Class;	EC	This provision establishes that individuals who hold an Emergency Class Certificate of Registration are not eligible to be elected to the Council. This is due to the transitional and temporary nature of the class.
(ii)	the Registrant is principally engaged in the practise of the profession in the electoral district for which they are nominated or, if they Registrant is not engaged in the practise of the profession, hold a certificate of registration in the Inactive Class of Registration, they the Registrant principally resides in the electoral district for which they are nominated;	(ii)	is principally engaged in the practise of the profession in the electoral district for which they are nominated or, if they hold a certificate of registration in the Inactive Class of Registration, they principally reside in the electoral district for which they are nominated;	PA	This provision simplifies the content and aligns it with policy of the Council. There is no impact on eligibility for election as this is merely a wording change.
(iii)	the Registrant is not in default of payment of any fees to the College;	(iii)	is not in default of payment of any fees to the College;	H	Wording change to simplify the provision.
(iv)	the Registrant is not the subject of any disciplinary or incapacity proceeding;	(iv)	is not the subject of any disciplinary or incapacity proceeding;	H	Wording change to simplify the provision.
(v)	the Registrant has not been the subject of any professional misconduct, incompetence or incapacity finding in the preceding three years;	(v)	has not been the subject of any professional misconduct, incompetence or incapacity finding in the preceding three years;	H	Wording change to simplify the provision.
(vi)	the Registrant's has not had their certificate of registration been revoked or suspended in the preceding six years for any reason other than non-payment of fees or failure to return information to the College ;	(vi)	has not had their certificate of registration revoked or suspended in the preceding six years for any reason other than non-payment of fees or failure to return information to the College;	PA	This provision aligns with policy and provisions elsewhere in the by-laws. Individuals who have had an administrative suspension (due to lack of payment of fees or returning information to the College) are not eligible for election.
(vii)	the Registrant's holds a certificate of registration that is not subject to a term,	(vii)	holds a certificate of registration that is not subject to a term, condition, or	H	Wording change to simplify the provision.

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
	condition, or limitation imposed by either the Discipline Committee or the Fitness to Practise Committee;		limitation imposed by either the Discipline Committee or the Fitness to Practise Committee;		
(viii)	the Registrant has not held any position such as director, owner, board member, officer or employee that the Registrant held with a professional association relating to naturopathy for a minimum of two years prior to seeking election;	(viii)	has not held any position such as director, owner, board member, officer or employee that the Registrant held with a professional association relating to naturopathy for a minimum of two years prior to seeking election;	H	Wording change to simplify the provision.
(ix)	the Registrant has not held any position such as director, owner, board member, or officer that the Registrant holds with an educational institution relating to naturopathy for a minimum of two years prior to seeking election;	(ix)	has not held any position such as director, owner, board member, or officer that the Registrant holds with an educational institution relating to naturopathy for a minimum of two years prior to seeking election;	H	Wording change to simplify the provision.
(x)	the Registrant has not been disqualified from Council within the preceding three years;	(x)	has not been disqualified from Council within the preceding three years;	H	Wording change to simplify the provision.
(xi)	the Registrant is not a member of a council of any other college regulated under the RHPA;	(xi)	is not a member of a council of any other college regulated under the RHPA;	H	Wording change to simplify the provision.
(xii)	the Registrant is not an employee of the College;	(xii)	is not an employee of the College;	H	Wording change to simplify the provision.
(xiii)	the Registrant does not have a any real or perceived conflict of interest as defined in these by-laws and as determined by the CEO to serve as a Council member or has agreed to remove any such conflict of interest before taking office;	(xiii)	does not have any real or perceived conflict of interest as defined in these by-laws and as determined by the CEO or has agreed to remove any such conflict of interest before taking office;	PA	This provision aligns the by-laws with the Council's policies and ensures that definition of conflict of interest set out in the by-laws is applied and not an alternate definition. It also ensures that the person responsible is the CEO as set out in Council policy.
(xiv)	the Registrant has substantially complied with the Election Guidelines of the College;	(xiv)	has substantially complied with the Election Guidelines of the College;	H	Wording change to simplify the provision.

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
(xv)	the Registrant is not in any default of returning any required form or information to the College; and	(xv)	is not in any default of returning any required form or information to the College; and	H	Wording change to simplify the provision.
(xvi)	(new provision – did not exist)	(xvi)	has no concerning social media posts relating to any regulated profession;	PA	These provisions appear in the section relating to disqualification of a Council member but not in the eligibility section. This change is to ensure consistency in the by-laws and with Council policy.
(xvii)	(new provision – did not exist)	(xvii)	has not initiated, joined, materially contributed or continued a legal proceeding against the College or any Committee or representative of the College; and	PA	
(xviii)	the Registrant meets the competencies required and has successfully completed any qualifying process established by the Council.	(xviii)	meets the competencies required and has successfully completed any qualifying process established by the Council.	H	Wording change to simplify the provision.
10.06 Eligibility to Vote					
A Registrant is eligible to vote in a Council election if, on the day of the election, the Registrant:		A Registrant is eligible to vote in a Council election if, on the day of the election, the Registrant:		NC	No change.
(i)	(no changes)	(i)	holds a certificate of registration;	NC	No change.
(ii)	has their principal place of practice or, if they hold a certificate of registration in the Inactive Class of Registration , the Registrant does not practise the profession ; their principal place of residence, in the electoral district for which an election is being held;	(ii)	has their principal place of practice or, if they hold a certificate of registration in the Inactive Class of Registration, their principal place of residence, in the electoral district for which an election is being held;	PA	This provision is designed to align with the Council's policies and to simplify the provision for clarity.
(iii)	(no changes)	(iii)	is not in default of any fees or other amounts owed to the College; and	NC	No change.
(iv)	(no changes)	(iv)	is not in default of returning any required form or information to the College.	NC	No change.
10.33 Filling of Vacancies					

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
If the seat of a Registrant elected to Council becomes vacant less than twelve months before the expiry of the term of office , Council may,		If the seat of a Registrant elected to Council becomes vacant, Council may,		PA	This change is to align with the Council’s policies and to simplify the provision. Decisions about what to do when a vacancy occurs rests with the Council.
(i)	(no changes)	(i)	leave the seat vacant;	NC	No change.
(ii)	(no changes)	(ii)	appoint a Registrant who meets the criteria for eligibility for election set out in article 10.05; or	NC	No change.
(iii)	(no changes)	(iii)	direct the CEO to hold a by-election in accordance with these by-laws.	NC	No change.
10.34 By-Election Required					
If the seat of a Registrant elected to Council becomes vacant more than twelve months before the expiry of the term of office, the CEO shall hold a by-election in accordance with these by-laws.		(repealed)		PA	Removal of this provision aligns with Council policy and reduces the burden of having to run an election when one may not be required.
11. COUNCIL MEETINGS					
11.07 Manner of Meeting					
Any meeting of Council may be conducted by means of video conference , teleconference or any other means that permits all persons participating in the meeting to communicate with each other simultaneously and instantaneously (including audio or videoconferencing), and persons participating in the meeting by such means are deemed to be present at the meeting.		Any meeting of Council may be conducted by means of video conference, teleconference or any other means that permits all persons participating in the meeting to communicate with each other simultaneously and instantaneously (including audio or videoconferencing), and persons participating in the meeting by such means are deemed to be present at the meeting.		PA	This change aligns with Council policy which is to hold the majority of its meetings by video conference.
13. SPECIFIC COMPOSITION AND SELECTION OF COMMITTEES					
13.14 Registrant Eligibility for Appointment					

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
A Registrant is eligible for appointment to a Committee, if on the date of the appointment the Registrant :		A Registrant is eligible for appointment to a Committee, if on the date of the appointment the Registrant:		H	Wording change to simplify the provision.
(i)	repealed;	(i)	repealed;	EC	By not amending this provision, the Council is intending to permit individuals who hold an emergency class certificate of registration to be appointed to committees.
(ii)	the Registrant is not in default of payment of any fees prescribed by College by-law;	(ii)	is not in default of payment of any fees prescribed by College by-law;	H	Wording change to simplify the provision.
(iii)	the Registrant is not the subject of any disciplinary or incapacity proceeding;	(iii)	is not the subject of any disciplinary or incapacity proceeding;	H	Wording change to simplify the provision.
(iv)	the Registrant has not been the subject of any professional misconduct, incompetence or incapacity finding in the preceding three years;	(iv)	has not been the subject of any professional misconduct, incompetence or incapacity finding in the preceding three years;	H	Wording change to simplify the provision.
(v)	the Registrant's certificate of registration has not had their certificate of registration been revoked or suspended in the preceding six years for any reason other than non-payment of fees or failure to provide information to the College ;	(v)	has not had their certificate of registration revoked or suspended in the preceding six years for any reason other than non-payment of fees or failure to provide information to the College;	PA	This provision aligns with policy and provisions elsewhere in the by-laws. Individuals who have had an administrative suspension (due to lack of payment of fees or returning information to the College) are not eligible for election.
(vi)	holds a the Registrant certificate of registration that is not subject to a term, condition, or limitation imposed by either the Discipline Committee or the Fitness to Practise Committee;	(vi)	holds a certificate of registration that is not subject to a term, condition, or limitation imposed by either the Discipline Committee or the Fitness to Practise Committee;	H	Wording change to simplify the provision.
(vii)	the Registrant has agreed to and does resign, before taking office, any position such as director, owner, board member, officer or employee that the Registrant holds with a professional association relating to naturopathy;	(vii)	has agreed to and does resign, before taking office, any position such as director, owner, board member, officer or employee that the Registrant holds with a professional association relating to naturopathy;	H	Wording change to simplify the provision.

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
(viii)	the Registrant has agreed to and does resign, before taking office, any position such as director, owner, board member, or officer that the Registrant holds with an educational institution relating to naturopathy;	(viii)	the Registrant has agreed to and does resign, before taking office, any position such as director, owner, board member, or officer that the Registrant holds with an educational institution relating to naturopathy;	H	Wording change to simplify the provision.
(ix)	the Registrant has not been disqualified from Council within the preceding three years;	(ix)	has not been disqualified from Council within the preceding three years;	H	Wording change to simplify the provision.
(x)	the Registrant is not a Council member of any other college regulated under the RHPA;	(x)	is not a Council member of any other college regulated under the RHPA;	H	Wording change to simplify the provision.
(xi)	the Registrant is not an employee of the College;	(xi)	is not an employee of the College;	H	Wording change to simplify the provision.
(xii)	the Registrant is not in any default of returning any required form or information to the College; and	(xii)	the Registrant is not in any default of returning any required form or information to the College; and	H	Wording change to simplify the provision.
(xiii)	has no concerning social media posts relating to any regulated profession;	(xiii)	has no concerning social media posts relating to any regulated profession;	PA	These provisions appear in the section relating to disqualification of a Council member but not in the eligibility section. This change is to ensure consistency in the by-laws and with Council policy.
(xiv)	does not have any real or perceived conflict of interest as defined in these by-laws and as determined by the CEO;	(xiv)	does not have any real or perceived conflict of interest as defined in these by-laws and as determined by the CEO;	PA	
(xv)	has not initiated, joined, materially contributed or continued a legal proceeding against the College or any Committee or representative of the College; and	(xv)	has not initiated, joined, materially contributed or continued a legal proceeding against the College or any Committee or representative of the College; and	PA	
(xvi)	the Registrant meets the competencies required and has successfully completed any qualifying process established by the Council.	(xvi)	meets the competencies required and has successfully completed any qualifying process established by the Council.	H	Wording change to simplify the provision.
13.14.1 Eligibility to be Appointed as a Public Representative					

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
A person is eligible for appointment to a Committee, if on the date of the appointment the person:		A person is eligible for appointment to a Committee, if on the date of the appointment the person:		NC	No change.
(i)	is not a Public Member of any Council of a College of a profession and is not a member of any health professions as set out in Schedule 1 of the RHPA;	(i)	is not a Public Member of any Council of a College of a profession and is not a member of any health professions as set out in Schedule 1 of the RHPA;	NC	No change.
(ii)	has not declared bankruptcy within the past seven years;	(ii)	repealed	PA	This provision is a hold over to a much earlier policy and is no longer necessary. It is intended to remove unnecessary barriers.
(iii)	does not have a prior conviction and is not currently charged under the Criminal Code (Canada), or with Provincial Offences that are relevant to their suitability to serve;	(iii)	does not have a prior conviction and is not currently charged under the Criminal Code (Canada), or Provincial Offences that are relevant to their suitability to serve;	PA	This change is intended to align with the approach to Registrants so that the only prior convictions are those that are relevant to their suitability to serve. Those that are not relevant might be Highway Traffic Act offences and municipal by-law infractions.
(iv)	has agreed to and does resign, before taking office, any position such as director, owner, board member, officer or employee that the person holds with a professional association relating to naturopathy or with a naturopathic educational program;	(iv)	has agreed to and does resign, before taking office, any position such as director, owner, board member, officer or employee that the person holds with a professional association relating to naturopathy or with a naturopathic educational program;	NC	No change.
(v)	is not an employee of the College nor of any other College of any health profession set out in Schedule 1 of the RHPA;	(v)	is not an employee of the College nor of any other College of any health profession set out in Schedule 1 of the RHPA;	NC	No change.
(vi)	has no concerning social media posts relating to any regulated profession;	(vi)	has no concerning social media posts relating to any regulated profession;	NC	No change.
(vii)	does not have any real or perceived conflict of interest as determined by the CEO;	(vii)	does not have any real or perceived conflict of interest as determined by the CEO;	NC	No change.
(viii)	has not initiated, joined, materially contributed or continued a legal	(viii)	has not initiated, joined, materially contributed or continued a legal	NC	No change.

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
	proceeding against the College or any Committee or representative of the College; and		proceeding against the College or any Committee or representative of the College; and		
(vix)	meets the competencies required and has successfully completed any qualifying process established by the Council.	(vix)	meets the competencies required and has successfully completed any qualifying process established by the Council.	NC	No change.
16. CONFLICTS OF INTEREST					
16.11 Staff Employment Positions					
A Council, or Committee member or In-field Volunteer may not hold any other employment or appointment with the College while serving as a Council, or Committee member or In-field Volunteer . This includes, but is not limited to, positions as peer assessor, investigator, inspector, examiner or staff. Where Council, or Committee members or In-field Volunteers wish to be considered for any such employment position with the College or appointment , they must first resign their position and agree to an undertaking not to seek election or appointment to Council or a Committee for a period of two years after they cease to be employed or appointed by the College or from the date they are informed in the event that they are unsuccessful in their application for employment or appointment by the College.		A Council, Committee member or In-field Volunteer may not hold employment with the College while serving as a Council, Committee member or In-field Volunteer. Where Council, Committee members or In-field Volunteers wish to be considered for any employment position with the College, they must first resign their position and agree to an undertaking not to seek election or appointment to Council or a Committee for a period of two years after they cease to be employed or from the date they are informed in the event that they are unsuccessful in their application for employment by the College.		PA	This change aligns with the College’s practice in the area of volunteers where volunteers have expressed an interest in taking roles on Committees as well as providing in-field positions. As In-field positions are paid either based on a stipend or per diem, the do not qualify as employees under the College’s employment policies. They should therefore be able to perform both In-field and Committee volunteer roles simultaneously provided there is not conflict between these roles. This conflict is address in the new proposed provision 16.11.01.
16.11.01 Appointment to In-field Positions					
Council or Committee members may hold In-field Volunteer positions with the College, including but not necessarily limited to positions as peer assessors, investigators, inspectors, or examiners, provided that they do not site on		Council or Committee members may hold In-field Volunteer positions with the College, including but not necessarily limited to positions as peer assessors, investigators, inspectors, or examiners, provided that they do not site on Committees		PA	This is a new provision to ensure that in-field volunteers can also hold positions on Committees provided the Committee is not responsible for the program for which they are in-field volunteers.

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
Committees that oversee or are directly involved in the governance and administration of an In-field Volunteer position to which they are or have applied to be appointed.		that oversee or are directly involved in the governance and administration of an In-field Volunteer position to which they are or have applied to be appointed.			
18. FEES					
18.01 Registration Year					
The registration year for Registrants shall be from the first day of April to the last day of March of the following year.		The registration year for Registrants shall be from the first day of April to the last day of March of the following year.		NC	No change. It is provided for context in the numbering of the subsequent provision.
18.01.1 Annual Registration Fee					
Every holder of a certificate of registration or certificate of authorization for a professional corporation shall pay an annual fee as set out in Schedule 3 of these by-laws subject to the following:		Every holder of a certificate of registration or certificate of authorization for a professional corporation shall pay an annual fee as set out in Schedule 3 of these by-laws subject to the following:		H	This provision is moved from 18.02 to this section and clarifies the requirement that an annual registration fee to be paid is required.
(a)	Unless a Registrant enrolls in a payment plan established by the CEO pursuant to article 18.08, the annual registration fee for a registration year is due on or before the last day of March of the preceding registration year; and	(a)	Unless a Registrant enrolls in a payment plan established by the CEO pursuant to article 18.08, the annual registration fee for a registration year is due on or before the last day of March of the preceding registration year; and	H	This provision is moved from 18.02 and sets out the due date for payment of fees and an exception for those in the payment plan program.
(b)	In addition to the amount set out in Schedule 3, where a Registrant is in default of payments for any outstanding balance owing to the College in respect of any decision made by a committee, and any fees payable under these by-laws, will be added to and included in the annual fees.	(b)	In addition to the amount set out in Schedule 3, where a Registrant is in default of payments for any outstanding balance owing to the College in respect of any decision made by a committee, and any fees payable under these by-laws, will be added to and included in the annual fees.	PA	This provision is new and incorporates any ordered costs by any committee of the College into the next year’s annual fee if the Registrant is in default of any payment. This allows the College to immediately suspend individuals who have failed to make a payment of ordered costs without necessarily having to refer the matter to ICRC.
18.02 Renewal Process					

Tracked Changes to Original	Clean Copy of Proposed Amended Provision	Cat. ¹	Intent/Explanation
Unless a Registrant enrolls in a payment plan established by the CEO pursuant to article 18.08, the annual registration fee for a registration year is due on or before the last day of March of the preceding registration year. At least forty-five days before the annual registration fee is due, the CEO shall send to each Registrant, a notice stating that the annual registration fee is due, setting out the amount of the annual fee for each category of registration, and a request for information required under the regulations and these by-laws. The obligation to pay the annual registration fee continues even if the CEO fails to provide the notice or the Registrant fails to receive such notice.	At least forty-five days before the annual registration fee is due, the CEO shall send to each Registrant, a notice stating that the annual registration fee is due, setting out the amount of the annual fee for each category of registration, and a request for information required under the regulations and these by-laws. The obligation to pay the annual registration fee continues even if the CEO fails to provide the notice or the Registrant fails to receive such notice.	H	The portion of the provision removed has been moved to the prior section. Doing so leaves the provision to address the renewal process alone since the earlier provision deals with timing.
18.04 Automatic Inflationary Increase			
The f Fees for r RRegistration set out in Schedule 3 are adjusted annually by an amount equivalent to the change in the Consumer Price Index, by Province, for All-Items Ontario as published by Statistics Canada, or any successor organization, for November and rounded up to the nearest dollar. Annual increases will be published by the CEO no later than the 15 th day of January each year.	The Fees for Registration set out in Schedule 3 are adjusted annually by an amount equivalent to the change in the Consumer Price Index, by Province, for All-Items Ontario as published by Statistics Canada, or any successor organization, for November and rounded up to the nearest dollar. Annual increases will be published by the CEO no later than the 15 th day of January each year.	H	The change is made merely to reflect the formal title used in Schedule 3.
18.07 Proration of Fees at Initial Registration			
For applicants seeking a General Class certificate of registration who have never been registered with the College, the initial registration fee set out in Schedule 3 will be prorated as follows:	For applicants seeking a General Class certificate of registration who have never been registered with the College, the initial registration fee set out in Schedule 3 will be prorated as follows:	EC	This provision ensures that applicants for an emergency class Certificate of Registration are not eligible for proration of their initial registration fees. This is because the fees will be set at a very low level.

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
(i)	if the certificate of registration is issued between April 1 and June 30, 100% of the posted registration fee;	(i)	if the certificate of registration is issued between April 1 and June 30, 100% of the posted registration fee;	NC	No change.
(ii)	if the certificate of registration is issued between July 1 and September 30, 75% of the posted registration fee;	(ii)	if the certificate of registration is issued between July 1 and September 30, 75% of the posted registration fee;	NC	No change.
(iii)	if the certificate of registration is issued between October 1 and December 31, 50% of the posted fee;	(iii)	if the certificate of registration is issued between October 1 and December 31, 50% of the posted fee;	NC	No change.
(iv)	if the certificate of registration is issued between January 1 and March 1, 25% of the posted registration fee; or	(iv)	if the certificate of registration is issued between January 1 and March 1, 25% of the posted registration fee; or	NC	No change.
(v)	if the certificate of registration is issued between March 2 and March 31: 100% of the posted registration fee for the following registration year.	(v)	if the certificate of registration is issued between March 2 and March 31: 100% of the posted registration fee for the following registration year.	NC	No change.
20. THE REGISTER					
20.05 Additional Registrant Information					
Pursuant to paragraph 20 of subsection 23(2) of the Code, the register shall contain the following additional information, which is designated as public information, with respect to each Registrant:		Pursuant to paragraph 20 of subsection 23(2) of the Code, the register shall contain the following additional information, which is designated as public information, with respect to each Registrant:		NC	No change.
(xii)	where the Registrant has resigned, retired, is deceased or has had their registration revoked, expired or otherwise terminated, the register shall be maintained for a period of ten years, except for any information related to discipline proceedings in Ontario, in which case it shall be entered on the register for a period of fifty years after	(xii)	where the Registrant has resigned, retired, is deceased or has had their registration revoked, expired or otherwise terminated, the register shall be maintained for a period of ten years, except for any information related to discipline proceedings in Ontario, in which case it shall be entered on the register for a period of fifty years after	EC	The provision incorporates the new emergency class, the certificate of which can expire.

Tracked Changes to Original			Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
	the termination of registration, and the register shall also include:			the termination of registration, and the register shall also include:		
(xiv)	where the Registrant holds an Emergency Class Certificate of Registration;		(xiv)	where the Registrant holds an Emergency Class Certificate of Registration;		These provisions set out the information that must appear on the Public Register for individuals who hold an emergency class certificate of registration. This ensures that the public can clearly identify that the Registrant must be supervised and the terms, conditions and limitations on their certificate of registration.
	a)	The locations where the Registrant practises and the name(s) of the Registrant(s) in the General Class who are supervising the Registrant at each location; and		a)	The locations where the Registrant practises and the name(s) of the Registrant(s) in the General Class who are supervising the Registrant at each location; and	
	b)	The terms, conditions and limitations placed on the Registrant's Certificate of Registration in accordance with the Registration Regulation.		b)	The terms, conditions and limitations placed on the Registrant's Certificate of Registration in accordance with the Registration Regulation.	
20.12 Information Requests from College						
The College may forward to its Registrants requests for information in printed or electronic form approved by the CEO. Each Registrant shall accurately and fully complete and return such form, electronically or otherwise as specified by the College, by the due date set by the College. A request for Registrant information may include, but is not limited to, the following: ...			The College may forward to its Registrants requests for information in printed or electronic form approved by the CEO. Each Registrant shall accurately and fully complete and return such form, electronically or otherwise as specified by the College, by the due date set by the College. A request for Registrant information may include, but is not limited to, the following: ...		NC	No change.
(viii)	whether the Registrant acts in the capacity of a preceptor or practice supervisor as part of their practice;		(viii)	whether the Registrant acts in the capacity of a preceptor or practice supervisor as part of their practice;		This change is required in order that the College can ensure proper notation of which Registrants are supervising other Registrants in their practice.
(x)	the Registrant's currency hours and activities, including but not limited to Patient Interactions;		(x)	the Registrant's currency hours and activities, including but not limited to Patient Interactions;		This change is required in order for the College to properly monitor Emergency Class Registrants who transition to the General Class.

Tracked Changes to Original			Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
(xv)	Proof of cardiopulmonary resuscitation (CPR) certification, including the:		(xv)	Proof of cardiopulmonary resuscitation (CPR) certification, including the:	EC	This provision was added as part of the emergency class amendments to the Registration Regulation; however, they apply to all Registrants. It allows the College to make inquiries about the status of a Registrants CPR.
	(a)	name of the course provider;		(a) name of the course provider;		
	(b)	level of certification; and		(b) level of certification; and		
	(c)	the date the certification was issued.		(c) the date the certification was issued.		
(xvi)	Where a Registrant holds an Emergency Class certificate of registration, or a General Class certificate of registration with a term, condition or limitation on their certificate of registration requiring them to be supervised while practising the profession, the:		(xvi)	Where a Registrant holds an Emergency Class certificate of registration, or a General Class certificate of registration with a term, condition or limitation on their certificate of registration requiring them to be supervised while practising the profession, the:	EC	This provision is required to accommodate both the emergency class as well as the Registrants who are working to remove a non-clinical term, condition and limitation due to the current audit. These provisions allow the College to confirm whether individuals have met the requirements and complied with the TCLs placed on their certificates of registration.
	(a)	name or names of individuals who have supervised their practice;		(a) name or names of individuals who have supervised their practice;		
	(b)	location or locations of practice;		(b) location or locations of practice;		
	(c)	controlled acts that the Registrant has performed and under whose delegation or supervision;		(c) controlled acts that the Registrant has performed and under whose delegation or supervision;		
	(d)	number of completed Patient Interactions undertaken at each location in a defined period; and		(d) number of completed Patient Interactions undertaken at each location in a defined period; and		
	(e)	number of hours of practice at each location in which the Registrant is practising.		(e) number of hours of practice at each location in which the Registrant is practising.		
(xvii)	Where a Registrant holds a General Class certificate of registration and supervises another Registrant in their practice, the		(xvii)	Where a Registrant holds a General Class certificate of registration and supervises another Registrant in their practice, the	EC	This provision is required to accommodate both the emergency class as well as the Registrants who are working to remove a non-clinical term, condition and limitation due to the current audit. These provisions allow the
	(a)	name or names of Registrants they have or are supervising;		(a) name or names of Registrants they have or are supervising;		

Tracked Changes to Original			Clean Copy of Proposed Amended Provision			Cat. ¹	Intent/Explanation
	(b)	location or locations in which the supervision has occurred or is occurring;		(b)	location or locations in which the supervision has occurred or is occurring;		College to confirm whether individuals have met the requirements and complied with the TCLs placed on their certificates of registration.
	(c)	controlled acts that the Registrant has delegated or supervised the performance of by the supervisee;		(c)	controlled acts that the Registrant has delegated or supervised the performance of by the supervisee;		
	(d)	number of completed Patient Interactions undertaken by the supervisee in a defined period; and		(d)	number of completed Patient Interactions undertaken by the supervisee in a defined period; and		
	(e)	number of hours of practice the supervisee has undertaken at the location(s).		(e)	number of hours of practice the supervisee has undertaken at the location(s).		
20.13 Automatic Notification of the College							
The Registrant shall notify the College, in writing, of any changes to the following information:			The Registrant shall notify the College, in writing, of any changes to the following information:			NC	No change.
(i)	within fourteen thirty days of the effective date, any change to the information published on the register as set out in articles 20.01 through 20.11 of these by-laws inclusive;		(i)	within fourteen days of the effective date, any change to the information published on the register as set out in articles 20.01 through 20.11 of these by-laws inclusive;		PA	These proposed changes align the by-laws with more modern practices. When first established, the College was informed of changes via mail; however, the advent of self-service via the Registrant portal increases the speed and efficiency of changes. It is imperative that the Public Register be accurate and up-to-date so that patients can confirm the identify of their ND and that they are indeed registered with the College.
(ii)	within fourteen thirty days of the effective date, information about any finding of incapacity or similar finding that has been made against the Registrant by a body that governs a profession, inside or outside of Ontario, where that finding has not been reversed on appeal, including:		(ii)	within fourteen days of the effective date, information about any finding of incapacity or similar finding that has been made against the Registrant by a body that governs a profession, inside or outside of Ontario, where that finding has not been reversed on appeal, including:			
	(a)	the finding;		(a)	the finding;	NC	No change.
	(b)	the name of the governing body that made the finding;		(b)	the name of the governing body that made the finding;	NC	No change.

Tracked Changes to Original			Clean Copy of Proposed Amended Provision			Cat. ¹	Intent/Explanation
	(c)	the date the finding was made;		(c)	the date the finding was made;	NC	No change.
	(d)	a summary of any order made; and		(d)	a summary of any order made; and	NC	No change.
	(e)	information regarding any appeals of the finding; and		(e)	information regarding any appeals of the finding; and	NC	No change.
(iii)	within two days, any change to the information set out in paragraph (xii) of article 20.12 of these by-laws regarding the Registrant’s professional liability insurance.		(iii)	within two days, any change to the information set out in paragraph (xii) of article 20.12 of these by-laws regarding the Registrant’s professional liability insurance.		NC	No change.
(iv)	within two days, for any Registrant who practices under supervision, any change in the status of any of their supervisor(s).		(iv)	within two days, for any Registrant who practices under supervision, any change in the status of any of their supervisor(s).		EC	This is required due to the new emergency class. It is a TCL on the certificate of registration that the Registrant be supervised. This ensures the College is aware that the terms are met and the public is aware of the status of the Registrant.
21. PROFESSIONAL CORPORATIONS							
21.05.01 Automatic Inflationary Increase							
The Fees Relating to Professional Corporations and Certificates of Authorization set out in Schedule 3 are adjusted annually by an amount equivalent to the change in the Consumer Price Index, by Province, for All-Items Ontario as published by Statistics Canada, or any successor organization, for November and rounded up to the nearest dollar. Annual increases will be published by the CEO no later than the 15 th day of January each year.			The Fees Relating to Professional Corporations and Certificates of Authorization set out in Schedule 3 are adjusted annually by an amount equivalent to the change in the Consumer Price Index, by Province, for All-Items Ontario as published by Statistics Canada, or any successor organization, for November and rounded up to the nearest dollar. Annual increases will be published by the CEO no later than the 15 th day of January each year.			PA	This change aligns the fees for professional corporations with fees for registration by enabling an automatic inflationary increase to these fees. Corporations enjoy certain tax benefits by incorporation and as such, the costs associated with the corporations should be maintained at the proper market value.
23. LIFE REGISTRANTS							
23.01 Designation of Life Registrants							

Tracked Changes to Original		Clean Copy of Proposed Amended Provision		Cat. ¹	Intent/Explanation
Upon receiving a request, the Registration Committee CEO may designate a Registrant as a Life Registrant if the Registrant:		Upon receiving a request, the CEO may designate a Registrant as a Life Registrant if the Registrant:			Rationale is to speed up the review of applications and enable referrals to the RC only if the person may not meet the requirements or the CEO intends to refuse the application.
(i)	has been registered for 25 years under the Act, or its predecessor, the <i>Drugless Practitioners Act</i> ;	(i)	has been registered for 25 years under the Act, or its predecessor, the <i>Drugless Practitioners Act</i> ;	NC	No change.
(ii)	at the time of making the request, the Registrant is in good standing; and	(ii)	at the time of making the request, the Registrant is in good standing; and	NC	No change.
(iii)	the Registrant has retired from the practice of naturopathy and agrees not to engage in the practice.	(iii)	the Registrant has retired from the practice of naturopathy and agrees not to engage in the practice.	NC	No change.
23.01.01 Referral to the Registration Committee					
The CEO shall refer a request received under 23.01 to the Registration Committee if the CEO:		The CEO shall refer a request received under 23.01 to the Registration Committee if the CEO:		PA	These provisions align the Life Registrant application process with other applications. If the individuals meets the criteria, they can be given the Life status by the CEO; however, only the RC can deny the status to a Registrant.
(i)	Has doubts, on reasonable grounds, about whether the Registrant meets the requirements for Life Registration; or	(i)	Has doubts, on reasonable grounds, about whether the Registrant meets the requirements for Life Registration; or		
(ii)	Proposes to refuse the request.	(ii)	Proposes to refuse the request.		

SCHEDULE 3 TO THE BY-LAWS
Fees²

Fee Category and Item		Current	Proposed New	Intent/Explanation
Fees Relating to Examinations				
	Written Clinical Sciences Examination	\$850	\$850	No change.
	Written Biomedical Sciences Examination	\$450	\$450	No change.
	Retake of the written Clinical Sciences Examination	\$850	\$850	No change.
	Retake of the written Biomedical Sciences Examination	\$450	\$450	No change.
	Initial Clinical Examinations	\$350	\$370	A small increase is proposed to offset continued rising costs in the delivery of the examinations through outside facilities.
	Retake of any Clinical Examination (per exam)	\$150	\$170	
	Jurisprudence Examination	\$75	\$75	No change.
	Prescribing Examination	\$500	\$500	No change.
	Retake of the Prescribing Examination	\$500	\$500	No change.
	IV Infusion Therapy Examination	\$650	\$650	No change.
	Retake of IV Infusion Therapy Examination	\$650	\$650	No change.
	Examination Appeal fee, each appeal	\$75	\$90	A small increase is proposed to offset continued rising costs.
	Examination Deferral	\$50	\$60	
Fees Relating to Applications for Registration³				
	Initial Registration Application	\$275	\$275	No change.
	Application to Change Class (General Class to Inactive, Inactive to General Class (within 2 years of initial entry to Inactive Class))	\$100	\$100	No change.
	Application to Change Class (Inactive to General Class 2 years or more since entry to Inactive Class)	\$275	\$275	No change.
	Application to Change Class	n/a	\$275	

² All fees are subject to applicable taxes.

³ Fee covers the review and processing of applications.

	(Emergency Class (over two years) to General Class)			These have been added to accommodate the new emergency class and the process for a person to move from this class to the General Class.
	Application to Change Class (Emergency Class (under two years) to General Class)	n/a	\$100	
	Prior Learning Assessment and Recognition (PLAR) – Paper Based Review	\$300	\$300	No change.
	Administrative Reconsideration of PLAR Paper Based Review	\$300	\$300	No change.
	PLAR Written Examination #1 (Biomedical Examination)	\$450	\$450	No change.
	PLAR Written Examination #2 (Clinical Sciences Examination)	\$850	\$850	No change.
	Request for Administrative Reconsideration – Paper Based Review	\$300	\$300	No change.
	Appeal of PLAR – Paper Based Review	\$75	\$75	No change.
	PLAR Demonstration-based Assessment Interview (and retakes)	\$450	\$450	No change.
	PLAR Demonstration-based Standardized Patient Assessment (and retakes)	\$1,300	\$1,300	No change.
	Appeal of PLAR – Demonstration Component	\$75	\$75	No change.
Fees Relating to Registration⁴				
	Annual Registration Fee – Clinical/General Class ⁵ (was 1475 in 2015 (21.5%	\$1793	\$1793	No change; however, Registration fees are indexed against the Consumer Price Index annually.
	Annual Registration Fee – Inactive Class ⁴ was 740 in 2015 21.5%	\$899	\$899	
	Late Renewal Fee – All Classes ⁴	\$317	\$317	
	Reinstatement Fee – All Classes ⁴	\$276	\$276	
	Annual Registration Fee – Emergency Class	n/a	\$100	New! Emergency Class fees are set low given its temporary nature.
Fees Relating to Professional Corporations and Certificates of Authorization				
	Application fee (increase is based on total amount increased since 2015 to annual registration fees which have increased 21.5%)	\$400	\$485	These fees have not changed since 2015. It is proposed to increase them at a rate that is consistent with overall registration fees given that corporations enjoy certain tax benefits.
	Issuance fee	\$250	\$305	
	Renewal fee	\$200	\$250	
	Administrative fee	\$50	\$50	
	Documentation fee	\$50	\$50	
Fees Relating to the Quality Assurance Program				

⁴ Fees are paid for the annual registration.

⁵ Current as of Jan 9, 2023 for the 2023 Registration year

	QAC Ordered Assessment ⁶	\$500	\$500	
Other Fees				
	Additional/Replacement Certificates of Registration/ID Cards	\$50		Fee is unnecessary as the college does not issue these documents.
	Withdrawal of Nomination for Election	\$50	\$50	
	Election Recount Fees	\$200	\$200	
	Fee for Name Change and New Documents	\$50	\$50	
	Administrative fees for Notices ⁷	\$50	\$50	
	Returned Cheques/Declined Credit Cards	\$35	\$35	
	Letters of Good Standing	\$25	\$25	
	Duplicate Receipts (when issued manually by the College)	\$10	\$10	Fee only applies if the College must print and mail the receipt. Most Registrants download these on their own.
Fees Related to the Inspection Program				
	Premises Registration fee	\$100	\$100	Although no change has been proposed, the notation that fees are payable within 30 days has been removed as the notation is not necessary.
	Regularly Scheduled 5-year Inspection	\$2,000	\$2,000	
	Inspection ordered by the Inspection Committee	\$2,000	\$2,000	
	Inspection of a new premises	\$2,500	\$2,500	

⁶ For an assessment or re-assessment ordered by the QA Committee or a panel thereof except for an assessment that occurs as a result of a random-type selection.

⁷ Fee for each notice sent by the CEO to the Registrant for failure to provide information or a form to the College within the specified timeframe.



By-law Consultation 2023 Submission Report

1. SUBMITTED BY:	
First Name	
Last Name	
Registered with CoNO	Yes
Organizational Representation	
Organization Name	

2. FEEDBACK	
Section(s) for which Feedback is Provided	Schedule 3 Fees
2.01: Section 1.01 Definitions	
2.02: Section 10.05 Eligibility for Election to Council	
2.03: Section 10.06 Eligibility to Vote	
2.04: Section 10.33 Filling of Vacancies	
2.05: Section 11 Council meetings	
2.06: Section 13.14 Registrant Eligibility for Appointment	

2.07: Section 13.14.1 Eligibility to be Appointed as a Public Representative	
2.08: Section 16.11 Staff Positions	
2.09: Section 18.01.1 Annual Registration Fee	
2.10: Section 18.02 Renewal Process	
2.11: Section 18.04 Automatic Inflationary Increase	
2.12: Section 18.07 Proration of Fees at Initial Registration	
2.13: Section 20.05 Additional Registrant Information	
2.14: Section 20.12 Information Requests from College	
2.15: Section 20.13 Automatic Notification	
2.16: Section 21.05.01 Automatic Inflationary Increase	

2.17: Section 23.01 Designation of Life Registrants	
2.18: Section 23.01.01 Referral to the Registration Committee	
2.19: Schedule 3 Fees	ND's have some of the highest fees of regulated health professionals without the same opportunities for monetization.



By-law Consultation 2023 Submission Report

1. SUBMITTED BY:	
First Name	
Last Name	
Registered with CoNO	Yes
Organizational Representation	
Organization Name	

2. FEEDBACK	
Section(s) for which Feedback is Provided	Schedule 3 Fees
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2.03: Section 10.06 Eligibility to Vote	
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2.05: Section 11 Council meetings	
2.06: Section 13.14 Registrant Eligibility for Appointment	

2.07: Section 13.14.1 Eligibility to be Appointed as a Public Representative	
2.08: Section 16.11 Staff Positions	
2.09: Section 18.01.1 Annual Registration Fee	
2.10: Section 18.02 Renewal Process	
2.11: Section 18.04 Automatic Inflationary Increase	
2.12: Section 18.07 Proration of Fees at Initial Registration	
2.13: Section 20.05 Additional Registrant Information	
2.14: Section 20.12 Information Requests from College	
2.15: Section 20.13 Automatic Notification	
2.16: Section 21.05.01 Automatic Inflationary Increase	

2.17: Section 23.01 Designation of Life Registrants	
2.18: Section 23.01.01 Referral to the Registration Committee	
2.19: Schedule 3 Fees	I'm writing to submit my feedback for the proposed amendments to the bylaws. Although it sounds like my fees will not be affected as I am already a registered ND, I do feel that how any increase in fees be handled is important. I do not think that the fees students pay to write their entry to practice exams should be increased as a result of these changes. Students struggle financially enough as it is and the cost of the entry to practice exams coupled with the time away from work in order to study for them is already an enormous burden for them. To further increase it would be prohibitive in nature.



The College of Naturopaths of Ontario

BRIEFING NOTE FUNDING CANRA'S EXAM PROJECT

PURPOSE: To seek Council approval to enter into a loan agreement with the Canadian Alliance of Naturopathic Regulators.

OUTCOME Authorization to sign an agreement and provide funding in 2024.

NATURE OF DECISION ☐ Strategic ☐ Regulatory Processes & Actions ☒ Other

PROCESS:

Activity:	A brief presentation will be made by the Chair of CANRA.		
Results:	Agreement to provide funding.		
Overall Timing:	15 minutes		
Steps/Timing:	1.	Presentation	6 minutes
	2.	Discussion & Questions	6 minutes
	3.	Motion and voting	3 minutes

BACKGROUND:

CANRA, which is the Canadian Alliance of Naturopathic Regulatory Authorities, was formally established in 2021 following a strategic planning process held in the CoNO offices in February 2020.

Two urgent initiatives were identified during and in follow-up to the strategic planning process. The first was to formalize the Alliance, which was completed in 2021. The Alliance has among its members the regulatory authorities from British Columbia, Alberta, Saskatchewan, Manitoba, Ontario and the Northwest Territories. The "board" includes the CEOs from BC, Saskatchewan and Ontario with Ontario acting in the capacity as Chair.

As part of the formalization of CANRA, an office was established in Alberta, a part-time Executive Director retained, and a website set up. Christy Duban (nee Prichard) is presently serving as the Executive Director. Christy Pritchard was on staff with CoNO for approximately 18 months in 2012-2013.

The second major initiative of CANRA was to develop national examinations that would meet the needs of all of the Canadian regulators, including exam delivery, addressing accommodation requests, enabling access in French. After extensive discussions, it was agreed that a national clinical practical examination would be the priority.

CANRA has retained a group of consultants who specialize in examination development. The project is presently fully operational focusing first on a set of national competencies. From these competencies, the clinical practical exam will be developed. The two phases of this project are anticipated to be completed within 24 months of start. This places the target for a national exam as April 2025.

Once the competencies are completed and the clinical practical examination is operational, CANRA will turn its attention to the written examinations and opportunities for the CoNO clinical sciences and biomedical examinations to be transitioned to the auspices of CANRA.

DISCUSSION POINTS:

Funding Needs

Funding for the development of the national competencies has been managed through the reserves held by CANRA from three years of membership. However, funding for the second phase of the plan, the development of the examination, is not available from CANRA itself. CANRA has turned to each of its members to determine the level of funding that might be provided.

Bearing in mind that most of the regulators outside of Ontario and BC have a small number of Registrants and small budgets, funding has been made available from:

- CNPBC - \$100,000,
- SANP (Saskatchewan Association of Naturopathic Practitioners) - \$20,000.

This results in a shortfall of \$175,000 for which CANRA is seeking the assistance of CoNO.

Funding Agreement

CANRA has developed a draft funding agreement for all of the regulatory authorities who have agreed to provide funding. The terms of the agreements are essentially the same except for the amount of funds being lent.

The major terms include:

- Interest charged at 4.5% on funds lent to CANRA beginning on the date funds are transferred.
- Repayment would be accomplished in equal payments beginning July 1, 2024 and would be completed in 60 months.
- The monthly payment from CANRA to CoNO would be \$3,262.53.

CANRA's Future Funding and Stability

The examination development process is very labour intensive and consuming much of the resources available; however, as the development process moves forward, a priority will be to design the delivery model for the exam and obtain the buy-in from the regulators. This is not anticipated to be problematic as each of the regulatory authorities are presently members and have members on the project's Steering Committee.

Future stability is relatively assured inasmuch as the anchors of CANRA (BC and Ontario) are highly committed to the organization. There are indications that Alberta may step back in 2024; however, we are working to convince them otherwise and would always welcome them back in the future. Nova Scotia is reportedly moving towards a full regulatory model and CANRA is hoping to welcome them into the Alliance.

CANRA's income presently is earned from member dues at approximately \$78,000. Should Alberta leave, the result would be less than a 10% decline in revenue which may be offset in part should Nova Scotia join. Longer term, CANRA anticipates examination revenues which when combined with member fees, will allow CANRA to repay the examination development loans.

It is worth noting that should anything happen that threatens the long-term stability of CANRA and results in its demise, CoNO and the other contributing regulators would have access to any excess funds after the closing of CANRA in the same ratio as they've contributed. CoNO has contributed the most funds to CANRA since its inception by way of membership fees, which are set based on the number of Registrants per regulator.

CoNO's Financial Standing

Based on the Q2 unaudited financial statements, the College has cash assets as follows:

• Operating bank account	\$160,742.33
• Savings bank account	\$932,203.35
• Petty cash	\$500.00
• Refunds pending	(\$1454.54)
• Mutual funds	\$1,615,536.87
• GIC Investments	\$515,388.75
Total Cash Assets	\$3,222,916.76

The Reserve Funds established by the Council have a value of \$2,228,508.16 which must be protected. This leaves a cushion of \$994,408.60 to cover any excess of expenses in the fiscal year and any other activities.

Options Open to the Council

Although it may seem that the Council really has little choice in providing the loan for funding, the decision to provide funds is not necessarily tied to the longevity of CANRA. Of course, if no funding is provided by any or all the regulatory authorities, the examination project will not proceed. CANRA would have to re-examine its mandate and priorities to determine how it is needed in support of the regulators.

CoNO funding for CANRA and the clinical practical examination development process will determine whether CoNO's prior aspiration of moving developed Ontario examinations to the national level to support all regulated Canadian jurisdictions is feasible.

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. Only those risks that have been identified will be addressed.

- Operational risk:
 - People
 - Process
 - Systems
 - External events – inherent in this proposal is the risk that CANRA does not complete the development of the national competencies or the clinical practical examination or these are delayed significantly to impact its ability to repay the loan.
- Financial risk:
 - Market risk – there is a risk that the rate of interest charged to CANRA (4.5%) becomes significantly lower than the market value which CoNO might have earned if the funds were invested in other interest-bearing bonds.
 - Credit risk – the College would become a creditor to CANRA and there is always the risk of default that could result in the loss of the money loaned in this matter.
 - Price risk
- Strategic risk:

- Economic environment – there is risk in the economic environment today, both in terms of inflation and should the economy slip into recession which could have a significant impact on the overall revenues of the College.
- Demographics
- Political – as seen, there are risks that the other regulatory authorities may decide to withdraw from CANRA in the future, jeopardizing the ability to finalize and implement the examination nationally.
- Reputation – support of CANRA's initiatives runs the risk that nationally CoNO is seen as dominating based on its overall economic position. Should CANRA not produce results in the project could result in a negative reaction among stakeholders.

Privacy Considerations – There are no privacy considerations with this matter.

Transparency – 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. Only those transparency principles that are relevant have been identified and addressed.

- Information to foster trust – CoNO by discussing this matter publicly as part of the Council has provided information to stakeholders to foster trust. CoNO is making it clear that it is one of three regulatory authorities providing financial assistance for the project and the terms of the contract indicate no special favours in return.
- Timely, accessible, and contextual – CANRA has made it known that it is working on this initiative and that it has the support of the regulatory authorities. It has used volunteers to support the project and has initiated the first of several consultations.

Financial Impact – This matter has the potential to impact CoNO's cash flow given that it would be removing \$175,000 from its cash assets. Should CANRA default on repayment, there would be more of a financial impact on the College, however, the reserves maintain the overall stability of the College.

Public Interest – 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 intent of the national clinical practical examination is to standardize testing across regulated jurisdictions. This provides assurances in the future that applicants under labour mobility have met the same rigorous standard regardless of the jurisdiction in which they initially registered. The examinations ensure that the successful candidates who become registered are ethical, safe, and competent and can provide good quality care. The public interest can also be determined by asking to whom this provides benefit. In this instance, it is CANRA and through CANRA the individual regulatory authorities who would have access to a sound examination and not be required to deliver their own.

EDIB – The Council and the College have made a commitment to equity, diversity, inclusion and belonging generally and to ensuring that its policies and programs do not include any elements of racism and promote EDIB principles. With respect to this matter, since the question today is about financially supporting CANRA's initiative, EDIB is not particularly relevant although it will become highly relevant in the development of standards and examination questions and processes. CANRA, and the consultants that have been retained are very much aware of this issue.

RECOMMENDATIONS

It is recommended that the Council authorizes the Council Chair and Deputy Chief Executive Officer to sign the loan agreement with CANRA.

Jeremy Quesnelle

Deputy Chief Executive Officer
November 2023

LOAN AGREEMENT

This loan agreement (the "**Agreement**") is dated this 2nd day of December 2023 and is:

BETWEEN

Canadian Alliance of Naturopathic Regulatory Authorities,
an Alberta corporation, having an address at:
Box 12083
Sylvan Lake, AB T4S 2K9
(hereinafter the "**Borrower**");

AND

College of Naturopaths of Ontario,
an Ontario corporation, having an address at:
10 King Street East, Suite 1001
Toronto, ON M5C 1C3
(hereinafter the "**Lender**"),

(each of them a "**Party**", and collectively, the "**Parties**").

WHEREAS the borrower wishes to borrow a certain amount of money, with interest on the unpaid loan, from the lender;

AND WHEREAS the lender agrees to loan monies to the borrower, and the parties wish to specify the terms and conditions of such a loan;

NOW THEREFORE, in consideration of the promises and the mutual covenants contained herein, and for other valuable consideration (the receipt and adequacy of which is hereby acknowledged), the Parties hereto agree as follows:

1. Definitions

In this agreement the following terms are defined as follows:

"Business Day"	means a day that is not a Saturday, Sunday, public holiday or bank holiday in the nation, province, or territory.
"Commencement Date"	means the date that the loan principal is advanced to the borrower.
"Interest Rate"	means 4.50% (four-point five percent) per annum.
"Loan Principal"	means the amount provided by the lender at the direction of the borrower.
"Material Adverse Change"	means any change in circumstances of the borrower the party knows, or should know, that will materially affect its capacity to perform its obligations under this agreement.

- "Outstanding Amount"** means the total of the loan principal together with any interest accrued, costs, and any other amounts owing to the lender under this agreement.
- "Repayment Date"** means the date on which the last instalment falls due for payment being a date falling 60 calendar months after the commencement date of this agreement or such other date as the lender and borrower agree in writing.
- "Repayment Start Date"** means the date on which the first instalment falls due for payment, which is defined as July 1, 2024.

2. The Loan

The lender hereby agrees to advance **\$175,000.00 (One Hundred Seventy-five Thousand) Canadian dollars** to the borrower as part of this agreement.

3. Interest and Repayment

- a) Interest will be payable by the borrower on the loan principal, at the rate of **4.50% per annum** (based on a 365-day year) starting on the date the loan principal is received.
- b) The borrower shall make payment of fixed monthly instalments, starting on July 1, 2024 (Repayment Start Date) each calendar month for a period of sixty (60) months.
- c) Each instalment payment will be in the amount of **\$3,262.53** as per the Payment Calculator outlined on Schedule "A".
- d) The borrower may repay the whole of the loan balance then outstanding at any time upon providing notice of its intention to do so to the other parties and receiving the consent of the lender to such early repayment.
- e) The lender will accept the following forms of payment: Electronic Funds transfer

4. Borrower Undertakings

The borrower provides the following undertakings to the lender:

- a) that the loan principal shall be applied solely to the following purpose, referred to hereinafter as the "Approved Purpose", which is to *support the development of an entry-to-practice clinical practical examination*.
- b) to make no counterclaim or set-off against any payment due under this agreement and make such payments on or before the date they fall due for payment without any deductions whatsoever; and
- c) to provide notice to the lender of any event of default or material adverse change.

5. Events of Default

- a) Each of the following events will constitute an event of default:
 - i. failure by the borrower to comply with any of the covenants or obligations expressed or implied in this agreement;
 - ii. failure by the borrower in punctual payment of any monies under this Agreement;
 - iii. the borrower, being a trustee at the commencement date of this Agreement, ceases to be the trustee;
 - iv. the borrower being a corporation at the commencement date of this Agreement goes into liquidation or experiences a material adverse change;
 - v. the borrower breaches any law regulation, judgment, or administrative decision or decree, in circumstances where the lender reasonably believes that breach will have

an adverse effect on the borrower's ability to meet its obligations under this agreement;

- b) In the event that any one or more events of default shall occur, the lender may, by notice in writing, require the borrower to immediately repay the loan and any accrued interest.

6. Cost and Expenses

Each party is responsible for all costs and expenses (including legal fees) that it incurs in connection with the preparation, negotiation, execution, and delivery of this agreement and any other document entered into or delivered under this agreement.

7. Notices and Communication

- a) Any notice or communication to be made in relation to this agreement must be in writing and delivered to the address specified by one of the following methods:
 - i. by personal delivery;
 - ii. by ordinary or registered post.
- b) The service of any notice or communication shall be taken as effective:
 - i. in the case of personal delivery, upon the relevant party's receipt of it; or
 - ii. in the case of delivery by ordinary or registered post, the earlier of the relevant party's receipt of it and the third business day after mailing it;
- c) notice in writing from the lender and signed by an authorized representative shall constitute prima facie proof of the outstanding amount, interest owing and any other costs or fees payable by the borrower.

8. Waiver

The exercise of any right or power under this agreement may be exercised at the discretion of the party to which the benefit of that right or power accrues. The failure to exercise or delay in exercising any right or remedy shall not prevent its exercise. Nor shall a partial exercise of any right or power prevent a further exercise of that right or power.

9. Amendments

No amendment to this document shall be valid unless in writing and validly executed by the parties.

10. No Assignment

This agreement will be binding upon the parties' respective successors and lawful assigns, provided that a party may only assign its rights or obligations under this agreement with the written consent of the other party.

11. Agency

Nothing in this agreement shall be read as constituting or creating any partnership, joint venture or similar relationship between the parties.

12. Severability

In the event any provision of this agreement is held to be invalid, illegal, or unenforceable for any reason, the parties agree that such provision shall be deemed to be struck and the remainder of the agreement shall be enforced as if the provisions were never included in the agreement.

13. Counterparts

This agreement may be executed in counterparts, each of which so executed will be deemed to be an original, and such counterparts together constitute one and the same instrument. Delivery by facsimile or by electronic transmission in portable document format (PDF) of an executed counterpart of this agreement is as effective as delivery of an originally executed counterpart of this agreement.

14. Applicable laws

This agreement shall be governed by and construed exclusively in accordance with the laws of the province of Alberta, and the laws of Canada in effect in Alberta. For litigation arising from this agreement, the parties submit to the exclusive jurisdiction of the courts of Alberta, and to any other court having jurisdiction over the party solely to enforce a judgment of a court of Alberta. Neither party shall seek to enforce an order that has its origin in any court other than the courts of Alberta.

15. Language

The parties declare that they have requested and do hereby confirm their request that this agreement, and related documents, be in English.

16. Entire Agreement

This agreement constitutes the entire understanding between the parties with respect to the subject matter of this agreement and supersedes all other agreements, whether written or oral, between the parties.

17. Signatures

Parties signing this agreement are authorized to do so on behalf of the individual party.

BORROWER

Canadian Alliance of Naturopathic
Regulatory Authorities

LENDER

College of Naturopaths of Ontario

Andrew Parr
Chair

Dr. Jordan Sokoloski, ND
Council Chair

Christy Duban
Executive Director

Jeremy Quesnelle
Deputy Chief Executive Officer

Schedule “A” - Payment Calculator

Pmt no.	Payment date	Beginning balance	Payment	Principal	Interest	Ending balance
1	2024-07-01	\$175,000.00	\$3,262.53	\$2,606.28	\$656.25	\$172,393.72
2	2024-08-01	\$172,393.72	\$3,262.53	\$2,616.05	\$646.48	\$169,777.67
3	2024-09-01	\$169,777.67	\$3,262.53	\$2,625.86	\$636.67	\$167,151.81
4	2024-10-01	\$167,151.81	\$3,262.53	\$2,635.71	\$626.82	\$164,516.10
5	2024-11-01	\$164,516.10	\$3,262.53	\$2,645.59	\$616.94	\$161,870.51
6	2024-12-01	\$161,870.51	\$3,262.53	\$2,655.51	\$607.01	\$159,214.99
7	2025-01-01	\$159,214.99	\$3,262.53	\$2,665.47	\$597.06	\$156,549.52
8	2025-02-01	\$156,549.52	\$3,262.53	\$2,675.47	\$587.06	\$153,874.05
9	2025-03-01	\$153,874.05	\$3,262.53	\$2,685.50	\$577.03	\$151,188.55
10	2025-04-01	\$151,188.55	\$3,262.53	\$2,695.57	\$566.96	\$148,492.98
11	2025-05-01	\$148,492.98	\$3,262.53	\$2,705.68	\$556.85	\$145,787.30
12	2025-06-01	\$145,787.30	\$3,262.53	\$2,715.83	\$546.70	\$143,071.47
13	2025-07-01	\$143,071.47	\$3,262.53	\$2,726.01	\$536.52	\$140,345.46
14	2025-08-01	\$140,345.46	\$3,262.53	\$2,736.23	\$526.30	\$137,609.23
15	2025-09-01	\$137,609.23	\$3,262.53	\$2,746.49	\$516.03	\$134,862.74
16	2025-10-01	\$134,862.74	\$3,262.53	\$2,756.79	\$505.74	\$132,105.94
17	2025-11-01	\$132,105.94	\$3,262.53	\$2,767.13	\$495.40	\$129,338.81
18	2025-12-01	\$129,338.81	\$3,262.53	\$2,777.51	\$485.02	\$126,561.31
19	2026-01-01	\$126,561.31	\$3,262.53	\$2,787.92	\$474.60	\$123,773.38
20	2026-02-01	\$123,773.38	\$3,262.53	\$2,798.38	\$464.15	\$120,975.00
21	2026-03-01	\$120,975.00	\$3,262.53	\$2,808.87	\$453.66	\$118,166.13
22	2026-04-01	\$118,166.13	\$3,262.53	\$2,819.41	\$443.12	\$115,346.73
23	2026-05-01	\$115,346.73	\$3,262.53	\$2,829.98	\$432.55	\$112,516.75
24	2026-06-01	\$112,516.75	\$3,262.53	\$2,840.59	\$421.94	\$109,676.16
25	2026-07-01	\$109,676.16	\$3,262.53	\$2,851.24	\$411.29	\$106,824.91
26	2026-08-01	\$106,824.91	\$3,262.53	\$2,861.93	\$400.59	\$103,962.98
27	2026-09-01	\$103,962.98	\$3,262.53	\$2,872.67	\$389.86	\$101,090.31
28	2026-10-01	\$101,090.31	\$3,262.53	\$2,883.44	\$379.09	\$98,206.87
29	2026-11-01	\$98,206.87	\$3,262.53	\$2,894.25	\$368.28	\$95,312.62
30	2026-12-01	\$95,312.62	\$3,262.53	\$2,905.11	\$357.42	\$92,407.51

31	2027-01-01	\$92,407.51	\$3,262.53	\$2,916.00	\$346.53	\$89,491.51
32	2027-02-01	\$89,491.51	\$3,262.53	\$2,926.94	\$335.59	\$86,564.58
33	2027-03-01	\$86,564.58	\$3,262.53	\$2,937.91	\$324.62	\$83,626.67
34	2027-04-01	\$83,626.67	\$3,262.53	\$2,948.93	\$313.60	\$80,677.74
35	2027-05-01	\$80,677.74	\$3,262.53	\$2,959.99	\$302.54	\$77,717.75
36	2027-06-01	\$77,717.75	\$3,262.53	\$2,971.09	\$291.44	\$74,746.67
37	2027-07-01	\$74,746.67	\$3,262.53	\$2,982.23	\$280.30	\$71,764.44
38	2027-08-01	\$71,764.44	\$3,262.53	\$2,993.41	\$269.12	\$68,771.03
39	2027-09-01	\$68,771.03	\$3,262.53	\$3,004.64	\$257.89	\$65,766.39
40	2027-10-01	\$65,766.39	\$3,262.53	\$3,015.90	\$246.62	\$62,750.48
41	2027-11-01	\$62,750.48	\$3,262.53	\$3,027.21	\$235.31	\$59,723.27
42	2027-12-01	\$59,723.27	\$3,262.53	\$3,038.57	\$223.96	\$56,684.70
43	2028-01-01	\$56,684.70	\$3,262.53	\$3,049.96	\$212.57	\$53,634.74
44	2028-02-01	\$53,634.74	\$3,262.53	\$3,061.40	\$201.13	\$50,573.34
45	2028-03-01	\$50,573.34	\$3,262.53	\$3,072.88	\$189.65	\$47,500.47
46	2028-04-01	\$47,500.47	\$3,262.53	\$3,084.40	\$178.13	\$44,416.06
47	2028-05-01	\$44,416.06	\$3,262.53	\$3,095.97	\$166.56	\$41,320.10
48	2028-06-01	\$41,320.10	\$3,262.53	\$3,107.58	\$154.95	\$38,212.52
49	2028-07-01	\$38,212.52	\$3,262.53	\$3,119.23	\$143.30	\$35,093.29
50	2028-08-01	\$35,093.29	\$3,262.53	\$3,130.93	\$131.60	\$31,962.36
51	2028-09-01	\$31,962.36	\$3,262.53	\$3,142.67	\$119.86	\$28,819.69
52	2028-10-01	\$28,819.69	\$3,262.53	\$3,154.45	\$108.07	\$25,665.23
53	2028-11-01	\$25,665.23	\$3,262.53	\$3,166.28	\$96.24	\$22,498.95
54	2028-12-01	\$22,498.95	\$3,262.53	\$3,178.16	\$84.37	\$19,320.79
55	2029-01-01	\$19,320.79	\$3,262.53	\$3,190.08	\$72.45	\$16,130.72
56	2029-02-01	\$16,130.72	\$3,262.53	\$3,202.04	\$60.49	\$12,928.68
57	2029-03-01	\$12,928.68	\$3,262.53	\$3,214.05	\$48.48	\$9,714.63
58	2029-04-01	\$9,714.63	\$3,262.53	\$3,226.10	\$36.43	\$6,488.54
59	2029-05-01	\$6,488.54	\$3,262.53	\$3,238.20	\$24.33	\$3,250.34
60	2029-06-01	\$3,250.34	\$3,262.53	\$3,250.34	\$12.19	\$0.00



The College of Naturopaths of Ontario

MEMORANDUM

DATE: November 2, 2023

TO: Council members

FROM: Agnes Kupny
Director of Operations

RE: 2023 Conference Fees

The Council had a two day in-person meeting held on September 26-27, 2023. This was the first meeting held post COVID-19 and following our office re-location. This meeting took place in downtown Toronto, close to our new office location. For the purpose of planning in-person meetings, our new office location does not have the facilities available to support a meeting in excess of twelve people.

At the conclusion of the two-day meeting the feedback from the Council was positive and requested to have a follow-up discussion on future in-person meetings pending information on the actual costs of the meeting.

The breakdown of all fees is as follows:

Accommodations	Meals	Travel	Training	Room & Equip. Rental	Supplies	Per Diem	Legal
\$8,714.58	\$9,581.71	\$1,684.76	\$1,500	\$1490	\$50.09	\$1,925	\$2,900

Total= \$23,021.14

Total including per diems and legal costs = \$27,846.14

Excluded from this total are:

- **Per Diem** costs (these costs would have been the same if the meeting would have been held via Web-conference);
- **Legal costs** (these costs would have been the same if the meeting would have been held via Web-conference);
- HST; and
- Portions of the Public members accommodations paid by the HBS.



The College of Naturopaths of Ontario

**Council Meeting
November 29, 2023**

**Video Conference
APPROVED MINUTES**

Council		
Present		Regrets
Dr. Jonathan Beatty, ND (2:4)		Ms. Tiffany Lloyd (2:4)
Dr. Shelley Burns, ND (4:4)		Dr. Jordan Sokoloski (3:4)
Mr. Dean Catherwood (4:4)		
Dr. Amy Dobbie, ND (4:4)		
Mr. Brook Dyson (3:4)		
Ms. Lisa Fenton (4:4)		
Dr. Anna Graczyk, ND (4:4)		
Ms. Sarah Griffiths-Savolaine (3:4)		
Dr. Denis Marier, ND (4:4)		
Mr. Paul Phillion (3:4)		
Dr. Jacob Scheer, ND (4:4)		
Staff Support		
Mr. Andrew Parr, CAE, CEO		
Ms. Agnes Kupny, Director of Operations		
Mr. Jeremy Quesnelle, Deputy CEO		
Ms. Dilyara Madeira, Executive Liaison		
Guests		
Ms. Rebecca Durcan, Legal Counsel		
Dr. Brenda Lessard-Rhead, ND (Inactive), Chair, Governance Policy Review Committee		

1. Call to Order and Welcome

The Vice-Chair, Ms. Sarah Griffiths-Savolaine, called the meeting to order at 9:17 a.m. She welcomed everyone to the meeting.

The Vice-Chair 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 Vice-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:	Paul Phillion
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 Vice-Chair asked if there were any items to be added to the agenda.

MOTION:	To approve the Main Agenda as presented.
MOVED:	Denis Marier
SECOND:	Lisa Fenton
CARRIED.	

3.02 Declarations of Conflicts of Interest

The Vice-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 have been included in the Council package 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 Vice-Chair reviewed the report with Council. She welcomed and responded to questions from the Council.

MOTION:	To accept the Report of the Council Chair as presented.
MOVED:	Paul Phillion

SECOND:	Dean Catherwood
CARRIED.	

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

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

MOTION:	To accept the Report on Regulatory Operations from the CEO.
MOVED:	Denis Marier
SECOND:	Amy Dobbie
CARRIED.	

4.03 Report on Operations – Mid-Year Report

The Report on Operations – Mid Year-Report was circulated in advance of the meeting. Mr. Parr provided highlights of the report and responded to questions that arose during the discussion that followed.

MOTION:	To accept the Report on Operations – Mid-Year Report.
MOVED:	Shelley Burns
SECOND:	Jacob Scheer
CARRIED.	

4.04 Unaudited Financial Statements for Q2

A copy of the Unaudited Financial Statements and Variance Report at Q2, was circulated in advance of the meeting. Ms. Agnes Kupny, Director of Operations, reviewed the report with the Council members and responded to any questions that arose during the discussion.

MOTION:	To accept the Unaudited Financial Statements and Variance Report at the end of the second quarter as presented.
MOVED:	Jonathan Beatty
SECOND:	Paul Phillion
CARRIED.	

5. Council Governance Policy Confirmation

5.01 Review/Issues Arising

5.01(i) Executive Limitation 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(i) In-depth Review of Council-CEO Linkage Policies

Dr. Brenda Lessard-Rhead, ND (Inactive), Chair of the Governance Policy Review Committee presented the survey results that were circulated to Council prior to the meeting and reviewed the Council-CEO Linkage Policies in-depth. She responded to any questions that arose during the presentation.

5.02(ii) In-dept Review of Ends Policies

Dr. Lessard-Rhead, ND (Inactive), presented proposed changes to the Ends Priority Policy (E02.07) as requested by Council and responded to any questions that arose during the presentation.

5.03 Approval of the Revised Ends Priority Policy (E02.07)

MOTION:	To accept the changes made to the Ends Priority Policy by the Governance Policy Review Committee as presented.
MOVED:	Denis Marier
SECOND:	Dean Catherwood
CARRIED.	

6. Business

6.01 Proposed By-law Changes

Mr. Parr reviewed in detail the Proposed By-Law Changes distributed to Council in advance of the meeting. He responded to any questions or concerns that arose during the discussion that followed.

MOTION:	To accept the proposed By-Law Changes.
MOVED:	Paul Phillion
SECOND:	Denis Marier
CARRIED.	

6.02 Funding for Canadian Alliance of Naturopathic Regulatory Authorities (CANRA) National Practical Examination

Mr. Jeremy Quesnelle, Deputy CEO, reviewed in detail the work that is underway by CANRA to develop a national practical exam and the funding requirements to conduct this work. Mr. Quesnelle reviewed highlights of the Loan Agreement distributed to Council in advance of the meeting and then he responded to any questions or concerns that arose during the discussion that followed.

MOTION:	To approve the loan agreement with the Canadian Alliance of Naturopathic Regulatory Authorities.
MOVED:	Shelley Burns
SECOND:	Dean Catherwood
CARRIED.	

6.03 Appointment of CEO Review Panel

Ms. Kupny advised the Council members that according to GP19.03 – CEO Performance Review, each year the Council at its November meeting, needs to appoint members to the CEO Performance Review Panel (“Review Panel”) with a minimum of three and maximum of four members, that is comprised of the Council Chair and Council Vice-Chair and up to two Council members.

MOTION:	To approve the appointment of Dr. Jordan Sokoloski, ND, Council Chair, Sarah Griffiths-Savolaine, Council Vice-Chair, Dr. Denis Marier, ND, and Dean Catherwood to the CEO Review Panel.
MOVED:	Paul Phillion
SECOND:	Amy Dobbie
CARRIED.	

6.04 In-Person Meeting Cost

At the end of the September 2023 Council meeting, Council inquired about the cost of the two day in-person meeting. Ms. Kupny, reviewed in detail the In-Person meeting cost memorandum distributed to Council in advance of the meeting. She responded to questions that arose during the discussion that followed.

8. Other Business

8.01 Meeting Evaluation

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

8.02 Next Meeting

The Vice-Chair noted for the Council that the next regularly scheduled meeting is set for January 31, 2024. This meeting will be held virtually via video conference.

9. Adjournment

9.01 Motion to Adjourn

The Vice-Chair asked for a motion to adjourn the meeting. The meeting adjourned at 10:59 a.m.

MOTION:	To adjourn the meeting.
MOVED:	Dean Catherwood

SECOND:	Anna Graczyk
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Recorded by: Dilyara Madeira
Executive Liaison
November 29, 2023

Approved: January 31, 2024

Council Highlights
November 29, 2023 (Meeting #38¹)

The Council of the College of Naturopaths of Ontario met on Wednesday November 29, 2023, from 9:18 a.m. to 10:59 a.m.; six of the seven elected professional members and four of the six public members appointed by the Lieutenant Governor in Council were present. Also in attendance was General Legal Counsel, 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 November 22, 2023, and continue to be available there.

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

Q2 Unaudited Financial Statements– The Council reviewed and accepted the unaudited financial statements as presented for Q2.

CEO Review Panel Appointments – According to Governance Policy 19.04 – CEO Performance Review, each year the Council at its November meeting, needs to appoint members to the CEO Performance Review Panel (the Review Panel) with a minimum of three and up to a maximum of four members, that is comprised of the Council Chair, Council Vice-Chair and up to two Council members. This year, the Review Panel is comprised of Dr. Jordan Sokoloski, ND, Council Chair, Ms. Sarah Griffiths-Savolaine, Council Vice-Chair, Dean Catherwood, and Dr. Denis Marier, ND.

Proposed By-Law Changes – The Council reviewed and approved the proposed By-law changes which had been circulated to Registrants and stakeholders for feedback.

Council Education – As a part of the College's commitment to good governance, the Council members and College staff participated in two training sessions, the first presented by the College's Governance Policy Review Committee and the second conducted by the Canadian Centre for Diversity and Inclusion focused on managing microaggressions.

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

Andrew Parr, CAE
Chief Executive Officer
December 4, 2023

¹ This is the 38th meeting of the Council dating back to its first meeting held following proclamation of the *Naturopathy Act, 2007* on July 1, 2015.