



**FALL 2017** 

## **Insight to complaints:**

### What is a Registrar's Inquiry?



Our complaints process is one of several ways the College protects the public and helps to ensure they receive safe, competent and ethical care from a naturopath. There are two ways in which the College can learn that a naturopath's behaviour or treatment of a patient cause concern.

The first is initiated through our <u>formal</u> <u>complaint process</u> when a person submits information to us in a recorded format such as

writing a letter or e-mail, or providing an audio recording, film or disk and indicating to us that they wish to file a complaint.

The second way happens when concerns about a Member's conduct, competence or capacity to practise come to our attention outside the formal complaint process. For

We will always take immediate steps when a situation poses a clear and significant risk to the public.

instance, information could come to us from a mandatory report made by another naturopath or other health care provider, or from other sources such as a criminal investigation, a news story, or a report from an employer.

Regardless of how a concern comes to our attention, we will always take immediate steps when a situation poses a clear and significant risk to the public. An example of this would be when a member is practising Intravenous Infusion Therapy (IVIT) without having met the Standard of Practice for Prescribing and for IVIT.

When issues are brought to our attention, there are two ways the College responds. When

a formal complaint is received, the <u>Inquiries</u>, <u>Complaints and Reports Committee</u> (ICRC) will review the complaint and ask the Registrar to appoint an investigator.

Outside of the formal complaint process, if we do not see a significant risk to the public that would require immediate action, I will review the information and circumstances to see if we have reasonable and probable grounds to investigate further. If I determine that there may be a legitimate concern, I may ask the ICRC to allow me to appoint an investigator to obtain more information. The ICRC has the authority to approve or deny my request depending on whether they believe there are reasonable and probable grounds for my request. Reasonable and probable grounds is more than a mere suspicion but rather, some evidence collected that indicates further information is required.

If the ICRC approves the appointment of an investigator, I proceed to make the appointment. The Member is notified of the appointment, an investigation is done and a report, called a Registrar's Report, is provided to the ICRC and to the Member. The Member is invited to provide a written response to the Registrar's Report. This process is similar to the process when a formal complaint is received by the College.

After considering the results of the investigation (the Registrar's Report) and submissions of the Member, as well as all records and documents relevant to the investigation, a panel appointed by the ICRC will review the materials. They may take several different actions. A written decision and the reasons will be provided to the Member, except where the matter has been referred to the Discipline Committee or to another panel of the ICRC to conduct health inquires.

The goal of this article was to shine light on one aspect of the College's complaints process. For more information, please visit Complaints and Reports.

Andrew Parr, CAE Registrar & CEO



### Special focus on advertising

Advertising is an important aspect of marketing a business. It also tops the list of complaints received by the College.

Advertising in health care is different from advertising in a business or commercial context. Regulated health professions are held to specific standards outlined by their College to protect the public and help them make informed choices about their health care.

In response to complaints submitted to the College, including concerns from the public and profession, we recently reviewed Member websites for alignment with the <u>Standard of Practice for Advertising</u>. Members whose sites do not meet the Standard will receive an email from the College in the coming weeks identifying the issues and giving them time to make changes. In the rare instance where a Member refuses to comply with the Standard or is offering a service which could pose a significant risk to the public, we may initiate a formal investigation.

To support Members and build awareness, this issue of iNformeD contains several articles that relate to advertising. It also includes a handy visual guide that gives examples of what Members can and cannot do when it comes to advertising and website content. We encourage Members to keep the guide for future use and to provide copies to copywriters, designers and others who are involved in creating or maintaining their website.



# What is and is not OK to include in Member advertising

This article highlights the top "do's and don'ts" for advertising a naturopathic practice and writing a bio that aligns with the <u>Standard of Practice</u> and <u>Guideline for Advertising</u>. See the next two pages for full-sized versions.

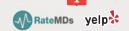
### THIS IS NOT OK



### THIS IS OK



### XYZ NATUROPATH











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Home

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We offer state of the art laboratory testing, including the following best in class tests:

### **Telomere Genetic testing**

We offer the highest quality professional brand products including Acme Vitamins and XYZ Herbal Formulas.

LEARN MORE

**Naturopathic Fees** 

Take advantage of our **XYZ Appointment Bundle!** 

Includes 4 visits for \$600

Refer a Friend

Refer a friend and receive a free visit.

- 6 We treat many conditions including cancer.
- Our services include mesotherapy.
- All NDs are board licensed with the BDDT-N.

TESTIMONIALS

"I am pain free, have very little discomfort, and have lost weight since seeing Dr. A."

J. Smith

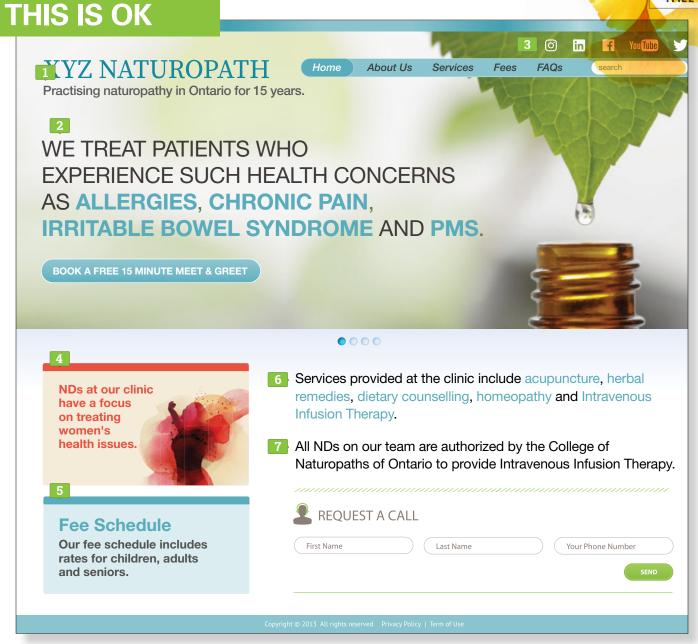
Adapted with permission from the College of Physiotherapists of Ontario

- 1. Naturopaths are responsible for any advertisement on their behalf, regardless of whether they created it. For all advertising, including social media where testimonials are included about the Member, the Member is expected to request that changes be made to the content when it does not meet the College's advertising requirements.
- 2. Advertising must accurately reflect the specified tests that the profession is authorized to order. Telomere and genetic testing are currently not allowed.
- 3. Endorsements of any kind, including products, are not allowed. Also, advertisements must not state or imply that a certain brand or product is better than others.

- 4. Ads can include fees charged, which must be in compliance with those allowed in the Standard of Practice for Fees and Billing. Block fees, such as bundles, are not allowed.
- 5. Advertising such a benefit to a patient, as well as the practice of this, is a conflict of interest. A naturopath is in a conflict of interest when they or anyone connected to them offers, requests or accepts any benefit for a referral.
- 6. Advertisements must be accurate. Treating cancer is outside the scope of practice of naturopaths in Ontario.

Members are, however, allowed to provide adjunctive care to address cancer symptoms and to alleviate the impact of cancer treatments on the body. Advertising this type of naturopathic care should be clear and not misleading to the public.

- 7. Advertisements must only reflect treatments that are within the Member's scope of practice. Mesotherapy is not included, as per the General Regulation.
- 8. This statement is no longer accurate as all Members are registered with the College of Naturopaths of Ontario. It is advisable to review all advertisements, including pamphlets and websites, on a regular basis to ensure they are current and accurate.
- 9. Advertisements may not contain testimonials, including content listed as reviews, patient experiences or patient feedback. Advertisements must be accurate and verifiable. Testimonials by their subjective nature cannot be verified and, depending on the circumstances under which they are made, may not be entirely accurate.



Adapted with permission from the College of Physiotherapists of Ontario

- 1. Advertisements must be verifiable. true and accurate. The College's Public Register allows anyone to check how long a Member has been practising in Ontario.
- 2. Members' advertisements must only contain information about conditions that are within the scope of practice of the profession and that the Member has the knowledge, skill and judgment to treat safely, competently and ethically.
- 3. Providing links to practice-related social media sites are okay provided there are no testimonials or other content that is not allowed in the Standard of Practice for Advertising.
- 4. Advertising cannot refer to a specialization. There are no specialties in naturopathy recognized by the College. However, a particular area of interest or focus can be included.
- Fees can be included, along with such information as the full fee schedule, methods of payment accepted and charges for missed appointments.

- 6. Ads can include all naturopathic services provided by a clinic as long as they are permitted within the scope of practice of the profession in Ontario.
- 7. Stating specifically which controlled acts the Member is authorized by the College to perform may be included. The authority to prescribe or perform IVIT can be verified through the Public Register.



### Do's and Don'ts for Bios

### THIS IS NOT OK

Meet the Doctors at ABC Natural Health Centre
Dr. A is a naturopathic physician who specializes in Functional Medicine.  She has been in naturopathic practice for 7 years after graduating from the Canadian College of Naturopathic Medicine with a doctorate in naturopathic medicine. Having completed additional training Dr. A is a North American expert in anti-aging, metabolism and hormone imbalances.
Professional affiliations:
OATO Ontario Association of Naturopathic Doctors  LEADING • ADVANCING • PROMOTING  CAND  College of Naturopaths of Ontario
Dr. B, ND has been a practising Naturopathic Doctor in Ontario since 2005.  Her areas of clinical focus include functional medicine, hormonal imbalances and naturopathic psychiatry.
Dr. C, ND (candidate) recently graduated with his 4-year medical degree from the Canadian College of Naturopathic Medicine. Dr. C currently works in the clinic under the licence of Dr. A until he successfully completes his licensing exams with the College of Naturopaths of Ontario. Book your appointment with Dr. C today.

- 1. "Physician" is a protected title not authorized for use by NDs in Ontario.
- Members do not have the authority to specialize and cannot use a term that implies a specialization.
- Graduates of CCNM do not have a doctorate. Use of this term in this context is inaccurate as well as misleading as it is commonly used for a graduate with a PhD.
- Members may not use terms such as "expert" as it implies they provide superior quality of care over other members.

- The College's <u>Website Policy</u> states that the College's logo is the property of the College. As such, the College's logo may not be used on a Member's website.
  - In its responsibility to ensure public protection and guard against possible misrepresentation of the College to the public through inappropriate use of the logo, the logo may not be used by any other organization or individual.
- Members may only practise within the scope of practice of the profession. Psychiatry is a specialization and outside of the scope of the profession.

- Graduates from CCNM do not receive a medical degree. This statement is misleading and inaccurate.
- 8. The idea that a graduate can work under a Member's "licence" is incorrect because naturopaths do not have a "licence." They receive a certificate of registration. An ND does not have the unilateral ability to allow a graduate to work "under" them. There are regulatory and legal requirements that must be met before an ND can work with another person. The Spring edition of iNformeD contains more information about this topic.
- 9. A graduate who is working in a clinic may not take on patients.



### Do's and Don'ts for Bios

The following example of a naturopathic doctor's bio complies with the College's regulations and standards of practice.

### THIS IS OK

Dr. A, ND graduated from the Canadian College of Naturopathic Medicine in 2010 and soon after passed all the required examinations to be authorized to practice in Ontario. She is currently a member in good standing with the College of Naturopaths of Ontario. Dr. A has an area of focus in her practice in women's health. Dr. A has also completed the required additional training and examinations to allow her to provide Intravenous Infusion Therapy to her patients.

Membership in professional associations include:





#### **Resources:**

Advertising Guideline
Standard of Practice for Advertising
Advisory: Member Website Content



For additional guidance, contact our Regulatory Education Specialist Dr. Mary-Ellen McKenna, ND (Inactive) maryellen.mckenna@collegeofnaturopaths.on.ca or 416-583-6020.



# New entry-to-practise exams: reflecting ND practice in Ontario



Just as the regulation of naturopathy has evolved, so has the College's need for entry-to-practise examinations that reflect current practice and the laws that govern it in Ontario. As a result, the College is developing its own entry-to-practise examinations that will eventually replace the use of the NPLEX exams in the province beginning in 2019.

"Council made this business decision because we need exams that align with – and reflect – the requirements of regulating naturopathy in our province today," said College President Dr. Tara Gignac, ND. Dr. Gignac, ND expanded on the factors underlying Council's decision, including the need to:

- meet legal requirements to offer entry-topractise and substantial equivalency exams in English, as well as in French – which we are currently unable to do and which would cost us considerable unrecoverable funds to develop via our current provider and would not entitle us to full ownership of the exam;
- offer exams that align with Canadian standards and with accessibility laws for people with disabilities;
- better align with the College's exam regulations and policies, including a requirement to allow only three exam retakes with remediation after the second failure:



- ensure the long-term availability of the examinations as part of the Prior Learning Assessment and Recognition (PLAR) program; and
- maintain the continued confidence of government and the public in self-regulation by guaranteeing our ability to offer exams for all individuals wishing to enter into the practise of naturopathy in Ontario.

The new examinations will offer many benefits, including giving the College and other stakeholders concrete, verifiable and accurate data about exam performance and candidates' achievement based on the latest examination science and rigour.

This is important because it ensures:

- the process is fair and transparent;
- that the competencies being tested reflect those being taught in Canadian naturopathic programs and those of the current healthcare landscape in Ontario; and
- that the public is protected by confirming that those registered to practise have the knowledge, skill and judgement to provide safe, competent and ethical care.

Existing Members will not need to take the entry-to-practise exams as they are already registered with the College.

Using computer-based testing in invigilated sessions, the new exams will be offered more frequently in more locations across the province and candidate marks will be available

# CREATING A NEW EXAM: PRACTICE IN ACTION

Developing a new entry-to-practise exam is no small feat. In addition to ensuring an exam does its fundamental job of ensuring applicants are safe and ready to practise, it is important that it reflect the realities of current practice. In addition, the examination process and exam itself must adhere to specific legal requirements. In Ontario, this includes adhering to French language requirements, to laws that improve accessibility in the areas that impact the daily lives of people with disabilities, and to the legislation that governs the profession of naturopathy.

To learn more about how the College is creating the new exams, we spoke with a former member of our Exam Development Steering Committee and former Associate Professor and Associate Dean at the Canadian College of Naturopathic Medicine\*, Dr. Shehab El-Hashemy, ND.

Dr. El-Hashemy, ND explained that the collaborative process started with a thorough job task analysis based on the core competencies of the profession, including comprehensive input from naturopaths about practice in action with respect to:

- · assessment and diagnosis,
- patient care and treatment modalities, and
- critical care and public health components.

This information was used as the basis for creating an examination blueprint that identifies the competencies and conditions that are to be tested for, as well as the percentage weighting given to each.

"We wanted to confirm the conditions and situations that NDs will have a strong probability of encountering on a regular basis," added Dr. El-Hashemy, ND.



"The new exams will give us concrete, verifiable and accurate data about exam performance and candidates' achievement."

more quickly. The creation of a French exam will allow candidates to toggle back and forth between both languages. The new exams are being developed on a cost-recovery basis.

"Our existing examinations will continue to be used until the new ones are launched," says College Registrar and CEO Andrew Parr. "We anticipate that the graduating class of 2019 will sit the new exams. We expect the fee to apply to take the new examinations will remain the same."

The College will be communicating regularly with schools, students and other stakeholders to ensure a smooth transition to the use of the new exams.

The new exams will not affect labour mobility for NDs who are registered with our College and seek registration to practise in another Canadian regulated jurisdiction in the future. It may, however, affect NDs who seek registration to practise in the US as they may need to take additional exams required by local jurisdictions; it is their responsibility to contact the appropriate regulatory body in jurisdictions outside Canada to determine local entry-to-practice requirements.

"We created a very robust list that is a holistic reflection of what is taught and being practised in Ontario today. For example, NDs are heavily involved in recognizing and managing chronic conditions like nutritional deficiencies and Irritable Bowel Syndrome. While it is essential to test for it, we noted much less emphasis in practice on treating critical and rare conditions."

Similar to the realities of practice, Dr. El-Hashemy, ND said the new exams will include an emphasis on evaluating application of knowledge and critical thinking versus memorization. "By studying for this exam, candidates will be preparing for practice."

The development process is far reaching and has involved many volunteers. The Steering Committee is comprised of Members of the profession who represent a wide range of backgrounds, years in practice, perspectives, and practice styles and settings, including both francophone and anglophone members. For the new clinical exam, 20 additional volunteers contributed as question writers and five more as reviewers. The exam is also undergoing extensive usability testing with potential candidates before being finalized.

A leading developer of licensure examinations is also working alongside the Steering Committee. A team of psychometric experts from Yardstick Inc. is overseeing the process to ensure the exams are defensible and that the methodology used meets established testing standards. Yardstick Inc. will also administer the exams using computer-based testing that will be offered on a regular basis in invigilated settings across the province.

This same process is being used for the development of both the clinical and biomedical examinations.

<sup>\*</sup> Dean and Associate Professor at National University of Natural Medicine as of September 1, 2017.



# The *Protecting Patients Act* and NDs in practice

The practise of naturopathy in Ontario is governed by a number of provincial and federal laws, including the <u>Regulated Health Professions Act (RHPA)</u>. An Act amending the RHPA and five other health-related Acts, called the <u>Protecting Patients Act, 2017</u> (the Act), was passed by the government in May 2017. The Act addresses a number of recommendations made by the Task Force of the Minister of Health and Long-Term Care on the <u>Prevention of Sexual Abuse of Patients and the RHPA</u>, 1991.

This article highlights the changes made to the RHPA by the *Protecting Patients Act* that may impact your practice and obligations as a naturopath. The changes are discussed below in two groups: those provisions that are currently in effect and those that have not yet come into force.

# PROVISIONS CURRENTLY IN EFFECT

- Increased information on the Public Register;
- Interim suspensions;
- Expanded list of acts constituting sexual abuse and other conduct that may result in mandatory revocation;
- Mandatory suspensions as a new minimum penalty for sexual abuse;
- Elimination of gender-based restrictions;
- Increased fines for failure to report sexual abuse.

# PROVISIONS NOT YET IN FORCE

- Expanded powers of the Minister to make regulations;
- Definition of patient;
- Expanded duty to report.



## PROVISIONS CURRENTLY IN EFFECT

#### INCREASED INFORMATION ON THE COLLEGE'S PUBLIC REGISTER

Each College currently maintains an online register about its Members and former Members. The Act requires that the following additional information be available on the <u>Public Register</u> of each regulatory College:

- The name of a deceased Member, and when known, the date of death;
- A notation and summary of any Acknowledgements and Undertakings provided to the College in relation to professional misconduct or incompetence before the Inquiries, Complaints and Reports Committee (ICRC) or Discipline Committee that are in effect;
- A notation of every caution ordered by the ICRC requiring a Member to appear before a Panel of the ICRC;

- A notation of every Specified Continuing Education or Remediation Program (SCERP) ordered by the ICRC;
- A copy of the specified allegation for every matter referred to the Discipline Committee and that has not been completed.

The RHPA requires that the results of every Discipline or Incapacity hearing be available on the public register. If no finding is made, the public register is now to include a notation to that effect and the reason. Cautions, SCERPs and other information added to the register must now remain there indefinitely.

As a result of the College's transparency initiative, we had already identified and implemented the Public Register changes now in effect under the *Protecting Patients Act, 2017*.

#### 2 INTERIM SUSPENSIONS

The ICRC now has the power to make an interim order to suspend or impose Terms, Conditions or Limitations (TCL) on a Member's certificate of registration at any time following the receipt of a complaint or following the appointment of an investigator, or once a panel of the ICRC has been established to inquire into whether a Member is incapacitated. The ICRC can make such an order if it believes the conduct of the Member exposes, or is likely to expose, patients to harm or injury.



#### PROVISIONS CURRENTLY IN EFFECT

#### **STANDED LIST OF ACTS THAT RESULT IN MANDATORY REVOCATION**

Prior to the new requirements, the Code included a list of frank acts of sexual abuse that would require revocation of a Member's registration if a panel of the Discipline Committee found that a Member had engaged in them. These acts included:

- Sexual intercourse;
- Genital to genital, genital to anal, oral to genital, or oral to anal contact;
- Masturbation of the Member by, or in the presence of, the patient;
- Masturbation of the patient by the Member;
- Encouragement of the patient by the Member to masturbate in the presence of the Member.

The list of frank acts of sexual abuse that would result in mandatory revocation has been expanded to include:

- Touching of a sexual nature of the patient's genitals, anus, breasts or buttocks:
- Other conduct of a sexual nature prescribed in regulations made by the Minister.

The Act also adds other conduct that will result in mandatory revocation, including:

- If a Member is found guilty of an offence relevant to suitability to practise and the offence is prescribed in a Minister's regulation;
- If a Member is found guilty of professional misconduct by another health regulatory College in Ontario or a health regulatory College in another jurisdiction and the conduct includes any of the frank acts of sexual abuse (as expanded by the Act).

# 4 MANDATORY SUSPENSION AS A NEW MINIMUM PENALTY FOR SEXUAL ABUSE

Where a panel of the Discipline Committee makes a finding of sexual abuse that does not include one or more of the above frank acts, the panel must now at a minimum suspend a Member's certificate of registration. There is no minimum length of time set out in the Act for the suspension.



#### PROVISIONS CURRENTLY IN EFFECT

#### ELIMINATION OF GENDER-BASED RESTRICTIONS

As a result of the Act, the ICRC and panels of the Discipline Committee are no longer able to make interim orders that impose gender-based Terms, Conditions or Limitations on any matters being considered, not just those related to sexual abuse.

#### 6 INCREASED FINES FOR FAILURE TO REPORT SEXUAL ABUSE

The Health Professions Procedural Code (the Code) of the RHPA currently requires a Member to file a report with the Registrar of the College if they have reasonable grounds, obtained in the course of practice, to believe that another Member of the College or any other health regulatory College has sexually abused a patient. The Code also requires a person who operates a facility to file a similar report if the person has reasonable grounds to believe that a regulated health professional who practises at that facility has sexually abused a patient.

As a result of the changes to the Act, the fine for failure of a Member to report sexual abuse has doubled from \$25,000 to \$50,000. In the case of a person who operates a facility, the fine for failure to report sexual abuse has increased from \$50,000 to \$200,000 in the case of a corporation.

The RHPA provides protection to a person who files a report of sexual abuse in good faith from actions or other proceedings taken against them.



## PROVISIONS NOT YET IN FORCE

#### EXPANDED POWERS OF THE MINISTER TO MAKE REGULATIONS

The Act expands the Minister's authority to make regulations. The most significant change relates to the governance of the committees and includes the Executive, Registration; Inquiries, Complaints and Reports; Discipline; Fitness to Practise; Quality Assurance; and Patient Relations Committees, as well as panels of those

committees. Once the relevant provisions of the Act are in force, the Minister will have the power to determine the composition of panels of the Registration, ICRC, Discipline and Fitness to Practise Committees and the quorum for panels of those committees.

#### DEFINITION OF PATIENT

"Sexual abuse" of a patient is currently defined in the Code, however, the term "patient" is not. Once the relevant provisions of the Act are in force, the definition of "patient" will be expanded for sexual abuse purposes by setting out a minimum period of one year before a naturopath can have a sexual relationship with such individuals. Health Regulatory Colleges will be authorized to make the period longer than one year. In addition,

the Minister will have the power to make a regulation to establish criteria that would be used to determine whether an individual was a Member's patient in relation to any allegation of sexual abuse. These amendments are intended to provide a time period during which sexual contact between a regulated health professional and a former patient would constitute sexual abuse.



# PROVISIONS NOT YET IN FORCE

#### **3** EXPANDED DUTY TO REPORT

The Act will require Members to report to the Registrar if they have been charged with an offence. The report must include all bail conditions and other restrictions imposed on, or agreed to. Members will also be required to notify the Registrar of the College if they are a Member of another regulated profession either in or outside of Ontario and if they have been found guilty of professional misconduct or incompetence by the other regulatory body.

### Conclusion

This article is not a complete list of the amendments made to the RHPA by the Act nor an exhaustive description of each amendment, but rather a summary of some of the major changes that are currently in effect and those that are yet to come into force. We will communicate with Members and the public when the additional changes are enacted.

In this edition of the newsletter, we will present and analyze a scenario based on a Registrar's Report that will illustrate an impact of misleading advertising on the Member's practice and the profession as a whole, and will help Members identify areas of potential concerns with their advertising. By law, cases under investigation are confidential; therefore, details of the case below have been altered to respect confidentiality.



#### **SUMMARY OF THE REPORT**

The College of Naturopaths of Ontario received information suggesting that a Member of the College was advertising medical services that the Member was not authorized to perform, including minor surgeries, cancer treatments, aesthetic medical treatment, cosmetic surgeries, and administering intravenous and/or intramuscular injections prior to having met the <u>Standards of Practice</u> for Prescribing and Intravenous Infusion Therapy. As a result of concerns surrounding the nature of services advertised on the Member's website, and considering the high level of risk

#### **ICRC CORNER**

to the public, the Registrar, with the approval of the Inquiries, Complaints and Reports Committee (ICRC), appointed an investigator to ascertain whether the Member may have committed acts of professional misconduct with respect to:

- 1. Performing controlled acts that the Member is not authorized to perform, including administering a substance by injection or inhalation and putting an instrument, hand, or finger into an artificial opening into the body;
- Providing services that are beyond the scope of practice for naturopaths in Ontario, including cancer treatments, aesthetic medical treatments, minor surgeries, and platelet rich plasma treatment;
- 3. Performing Intravenous Infusion Therapy (IVIT) prior to having met the Standard of Practice for IVIT and the Standard of Practice for Prescribing of the College;
- 4. Administering a substance by injection prior to having met the Standard of Practice for Prescribing of the College;
- 5. Administering by injection substances that are not listed in Table 2 of the <u>General Regulation</u> made under the <u>Naturopathy Act</u>, 2007;
- 6. Contravening the <u>Standard of Practice</u> <u>for Advertising</u>, including but not limited to referencing the cure of symptoms or diseases, appealing to the public's fears

- and advertising services beyond the scope of practice for naturopaths in Ontario;
- 7. Inappropriately using a term, title or designation indicating or implying a specialization in the profession.

#### **OUTCOME**

Upon completion of its investigation into these matters, the Panel found no evidence to support that the Member performed controlled acts that they were not authorized to perform as described in allegations 1-5 referenced earlier. It was discovered that:

- The Member was a director of a multidisciplinary clinic providing a variety of services of various healthcare professionals, including registered naturopathic doctors, medical doctors, massage therapists, nurse practitioners, cosmeticians, and laser technicians;
- The Member's own practice was limited to services that they were authorized to provide in accordance with the *Naturopathy Act, 2007*, Regulations made under the Act and Standards of Practice of the Profession.

The Panel, however, had serious concerns with respect to the extent of the Member's apparent failure to meet the Advertising Standard of Practice. Taking into consideration that the Member immediately took down the clinic's website and acknowledged that the manner in which the clinic's services were advertised



#### **ICRC CORNER**

on the website might have been confusing to the public, the Panel decided to issue a Letter of Caution to the Member outlining the areas of concern and considerations to be taken to ensure that the College's Standards and Guidelines are adhered to.

#### **ANALYSIS**

The Member's website listed various treatments and services available at the clinic, including naturopathic medicine, IV therapy, chelation therapy, B12 injections, homeopathic medicine combined with nutrition and micro-immunotherapy for the treatment of special conditions such as cancer, leukemia, lupus, etc., alternative medicine and treatments, including acupuncture, aesthetic medicine including botox treatments, mesotherapy rejuvenation, ultherapy, laser treatments, and hair removal, etc. The availability of initial and follow up visits with the Member was noted in the clinic's timetable.

In the response to the Report, the Member explained to the Panel that their role at the clinic was only to co-ordinate these services and assist the other practitioners to develop their practices, and that they only practiced naturopathic medicine, despite a variety of services offered at the clinic by other health professionals.

The content and format for presentation of the information on the website evidently resulted in a disconnect between what was being implied and what services and treatments the Member was actually providing as a naturopathic doctor and Clinical Director at the clinic. As this was initially unclear to the College, it would no doubt be confusing and misleading to the public who may have viewed the website to determine what services and treatments were available and who would provide them.

#### Contravening the Advertising Standard

In its examination of the clinic's website, the Panel found several instances where the advertising of the Member's practice and related involvement with the clinic may not have met the requirements of the Standard of Practice, including the following:

- The website referred to several cases where the cure of symptoms or diseases was stated or implied, such as:
  - After a year of naturopathic treatment, the patient was free from any symptoms.
  - The patient's tumour was 40% smaller after she took immunotherapy for 5 months.
  - Complete cure with elimination of the tumour and no side effects or metastasis for 5 years following the treatment.



#### **ICRC CORNER**

The College's Standard of Practice for Advertising states that any reference to the cure of symptoms or diseases does not meet the Standard. The related <u>Guideline for Advertising</u> states that any claims, statements, or implications that a treatment is infallible, miraculous, or a certain guaranteed remedy; statements that create or are likely to create unwarranted and unrealistic expectations about the effectiveness of the services advertised, are unacceptable.

 The Member's website included several references to treatments and services that would be beyond the scope of practice for naturopaths in Ontario, including minor surgeries, treatment of cancer, leukemia, lymphomas, etc., IV stem cell therapy; Botox treatments and mesotherapy rejuvenation.

The College's Advertising Standard states that professional services offered by a Member advertising in their capacity as a naturopathic doctor must be within the scope of practice of Naturopathic Medicine. The *Guideline for Advertising* states that advertising information must relate to the scope of naturopathic practice.

- The Member's website included statements that could be promoting a demand for unnecessary services, such as:
  - No contraindications. Good for all ages (newborns, children, adults, seniors), conditions, and diseases. Effective and quick response. Prevention of diseases.

The College's Standard of Practice for Advertising states that advertisements must not include anything that could be interpreted as intending to promote a demand for unnecessary services. The Advertising Guideline states that advertising should focus solely on providing truthful information and should not stimulate a demand for unnecessary healthcare services.

• The Member's website included references to claims of the Member's specialization in the profession. The Member was described as highly specialized in homeopathic medicine, and as a registered naturopathic doctor specializing in anti-aging therapies and facial surgeries.

The College's <u>Standard for Restricted Titles</u> states that members may not use a term, title, or designation indicating or implying a specialization in an area of practice of the profession except in accordance with any formal specialist recognition program of the College. The College Guideline for Advertising states that no specialty class exists within the College's <u>Registration Regulation</u>.



#### **BOTTOM LINE**

The Member's failure to familiarize themself with the College's Standards of Practice and, thus, publishing misleading information on the clinic's website for the public's consumption, resulted in the following actions on behalf of the College and the Member:

- The Registrar and staff of the College, upon receipt of the information about the Member's advertising, reviewed the content of the website and brought it to the attention of the ICRC, who approved the appointment of an investigator;
- The investigator attended the Member's clinic, collected and made copies of the patient files, interviewed the Member and staff of the clinic, and made appointments with and interviewed some of the Member's patients;
- Having collected all the information relevant to the investigation, the investigator drafted a report. The completed Registrar's Report (that included the investigation report) was filed with the ICRC and the Member;
- The Member, with the help of legal counsel, reviewed the report and provided comments to it;

- The Member also had to report this investigation to another regulatory college upon renewal of their membership with that college;
- A panel of the ICRC reviewed all of the information relevant to this Report, including all of the patient files collected by the investigator, and issued a decision in this matter.

The total cost of the investigation to the College was \$4,991, which was, in essence, paid for by the membership of the College.

When advertising their services and engaging in use of public media, Members of the College are expected to be fully knowledgeable of, and comply with, the existing professional expectations, including those set out in the <u>Regulated Health Professions Act</u>, Naturopathy Act and all College Regulations and Standards of Practice. Publishing ambiguous or misleading information in the public domain may result in disciplinary actions against the Member.





### Discipline decision

Discipline is a critical aspect of self-regulation and maintaining the public trust. The College has the responsibility and the authority to investigate breach of a regulation or a professional standard by a naturopath, take action and assess a range of appropriate penalties. Any decisions are made in the best interests of the public. Publishing summaries of the decisions in this newsletter is part of the transparency of the discipline process, and is intended to assist members of the College in understanding what may constitute professional misconduct.



#### Member: Dr. Karen Barnes, ND, registration #0880

At an uncontested hearing on June 21, 2017, a Panel of the Discipline Committee of the College of Naturopaths of Ontario (the College) made findings of professional misconduct against Dr. Karen Barnes, ND (the Member) with respect to the following:

- contravening, by act or omission, a provision of the <u>Naturopathy Act, 2007</u>, the <u>Regulated</u> <u>Health Professions Act, 1991</u> or the regulations under either of those Acts;
- contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession;
- failing to comply with an order of a panel of the College; and/or
- engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as dishonourable or unprofessional.

In particular, the Member was found guilty for the following conduct:

- failure to comply with an order of the Inquiries, Complaints and Reports Committee (ICRC) to successfully complete a Specified Continuing Education or Remediation Program (SCERP) no later than May 5, 2016, and
- failure to cooperate with a College-appointed investigator.

The Member admitted the allegations set out in the Notice of Hearing, save for those the College sought to withdraw. The Discipline Panel conducted an oral plea inquiry and was satisfied that the Member's admission was voluntary, informed and unequivocal. The Panel noted that the Member attended and unconditionally passed the SCERP on March 24-26, 2017, and that the Member advised the Registrar of the College that as a result of completing the SCERP she:

- had identified areas in which she can improve her practice;
- b. was better equipped to put the patient "first";
- c. understood the role of the College and that it was mandated to serve and protect the public; and
- d. appreciated that her actions reflected the profession as a whole.

A Joint Submission as to Penalty and Costs had been agreed upon prior to the hearing. The Discipline Panel accepted the Joint Submission and imposed an order:

- 1. Requiring the Member to appear before the Panel to be reprimanded immediately following the hearing.
- 2. Directing the Registrar to suspend the Member's certificate of registration for a period of three (3) months, on a schedule to be set by the Registrar, two (2) months of which shall be remitted if the Member complies with the provisions of paragraph 3 below by no later than August 31, 2017.

- Directing the Registrar to impose the following specified terms, conditions and limitations on the Member's certificate of registration:
  - a. the Member shall write an essay between a 500-1000 words, and provide it to the Registrar, no later than September 30, 2017, that shall be published by the College at a time and in a format determined by the Registrar, on the following issues:
    - i. the lessons the Member learned at the SCERP ordered by the Inquiries, Complaints and Reports Committee; and
    - ii. the importance of naturopaths cooperating with College investigators; and
  - b. the Member shall provide the Registrar with a letter of apology to the public and the profession, no later than September 30, 2017, that shall be published by the College at a time and in a format as determined by the Registrar, on the following issues:
    - i. her failure to comply with an order of the Inquires, Complaints and Reports Committee of the College and her failure to cooperate with an investigation being conducted by the College; and
    - ii. the potential negative impact of her decisions.

- 4. For greater certainty, the Member's obligation to comply with the proposed terms, conditions and limitations on her certificate of registration contained in paragraph 3 is not relieved by serving the entire suspension referred to in paragraph 2 above.
- 5. Requiring the Member to pay the College's costs fixed in the amount of \$4,000 within four (4) years of the date of this order. A payment schedule of at least \$1,000 per year is included in this order.

The Panel concluded that the proposed penalty was reasonable and in the public interest, and that it satisfied the principle of public protection.

At the conclusion of the hearing, the Panel delivered its reprimand to the Member.
As a part of the reprimand the Panel outlined the following:

The Panel was profoundly concerned with the Member's conduct, they noted that the Member brought discredit to the entire profession and to herself. Public confidence in this profession's ability to self-regulate was put at risk. The result of the Member's misconduct was that she let down the public, the profession, and herself.

The Panel emphasized that the Member's conduct was totally unacceptable to the profession and to the public. Of special concern to the Panel was the fact that the

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professional misconduct in which she engaged involved failing to abide by an order of a Committee of the College, which was made to address serious concerns regarding the Member's professional boundaries in choosing to express her personal views and opinions during an appointment with a paediatric patient, particularly where her opinions may have been contrary or offensive to the patient.

Further, the Panel noted that the Member's decision to ignore the ICRC order had come at a great financial cost to the College. The Member's conduct necessitated an investigation, a referral and a hearing.

The Panel clarified that though the penalty that it had imposed was fair, a more significant penalty would be imposed in the event that the Member was found to have engaged in professional misconduct again.

Copies of the full discipline decisions are available on the Public Register in the Members' profiles. Decisions can also be reviewed in the <u>Resources</u> section of our website.

#### **COLLEGE'S COSTS**

Section 53.1 of the Health Professions
Procedural Code provides that, in an
appropriate case, a discipline panel may
make an order requiring a member who
the panel finds has committed an act of
professional misconduct, to pay all or
part of the College's costs and expenses.
The panel awards costs on a case by
case basis.

The following costs and expenses were incurred by the College in regard to this matter:

• Legal costs and expenses: \$9,622

Investigation costs: \$1,096

Hearing costs: \$4,589

The Panel ordered the Member to pay the College's costs fixed in the amount of \$4,000, which amounted to 27 per cent of the College's costs.

Total cost to the College: \$11,307



### Standards, Guidelines and Policies:

# What's the difference and how do they fit together?

Standards, Guidelines and Policies are fundamental to the regulation of naturopathy and contain essential information about safe, competent and ethical practice. The College creates these documents to inform the public and naturopaths of its expectations of Members and to provide a benchmark against which the conduct of individual naturopaths is measured. The topics addressed focus on specific issues that are relevant to practice.

# Topics focus on specific issues that are relevant to practice.

Standards, Guidelines and Policies are reviewed regularly and may be updated over time. The College seeks input from the profession, public and other stakeholders when these documents are created and revised.

#### STANDARDS OF PRACTICE

Standards are used to direct a naturopath's practise. Each standard describes the expected level of performance for that topic and reflects the minimum standard of professional behaviour and ethical conduct required from the Member. Standards also reflect relevant legal requirements and are enforceable under the legislation that governs naturopaths in Ontario.

Standards of Practice are established as a consensus of the profession and are statements from naturopaths on how they practice. They are subsequently used by the profession to evaluate the performance of naturopaths by their peers in areas such as examinations, complaints and continuing competence.

As an example, the <u>Standard of Practice for</u> <u>Advertising</u> reflects the requirements of the <u>Professional Misconduct Regulation</u> under the <u>Naturopathy Act, 2007</u> and the <u>Regulated Health Professions Act, 1991</u>.



#### PRACTICE GUIDELINES

Guidelines elaborate on Standards of Practice. They provide recommendations on how naturopaths can deal with specific situations to comply with rules, regulations and standards. To complement higher-level descriptions found in other documents, guidelines offer further meaning, context and clarity. They may contain scenarios, checklists, and issues to consider.

Expanding on the Standard of Practice for Advertising as an example, the Advertising Guideline provides more direct guidance about what is and is not acceptable for a Member to include in an advertisement, where ads can be placed, and who is responsible for advertising. It also includes an advertising checklist to help Members adhere to the Standard of Practice.

#### **PROFESSIONAL POLICIES**

Professional policies are statements by the College of Naturopaths of Ontario about its expectations of how the profession will behave in certain circumstances. Where Standards of Practice are statements by the profession of how it will perform in certain circumstances, professional policies are rules set by the College that govern behviour of the profession.

The <u>Vaccination Policy</u>, for example, covers topics such as referral for vaccination to another health professional whose scope of practice includes it; preserving the patient's right to choose, including the importance



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**GUIDELINES** elaborate on Standards of Practice and provide further meaning, context and clarity.

**PROFESSIONAL POLICIES** are rules set by the College about its expectations of how the profession will behave in certain circumstances.

of neutrality in advising the patient; the implications of failure to comply with the policy; and more.

Naturopaths seeking clarification about these documents or other professional matters are encouraged to contact the College's Regulatory Education Specialist, Dr. Mary-Ellen McKenna, ND (Inactive) by <a href="mailto:emailt



### 1. IVIT Premises Register Now Online

Starting this fall, the <u>Public Register</u> on the College website includes a fourth section that identifies clinics where IVIT is compounded and delivered. All premises offering this treatment must be registered with the College and undergo an inspection, the results of which will be included in the Register.

#### 2. Call for Public Volunteers

Do you know someone who is passionate about patient-centric care and wants to help shape the evolution of health regulation? The College and eight other health regulators have partnered to develop a Citizen Advisory Group (CAG) to bring the patient's voice and perspective to our work. Click here to learn more.

#### 3. Check It Out: Registrar's Blog

Current topics in naturopathy and regulation are featured in Andrew's Corner – blog of College Registrar and CEO Andrew Parr. Recent posts include *DNM is not a naturopath* and *Can a vitamin be a drug?* Let us know what you think.

# 4. Reminder: CE Reporting Deadline – Group III

September 30, 2017. <u>Details here</u>.

# 5. Ontario Prescribing & Therapeutics Exam

Successful completion of this exam will deem a Member to have met the <u>Standard of Practice for Prescribing</u>, giving them the authority to access and use the drugs listed in the tables of the <u>General Regulation</u>.

Registration for the fall exam is open from September 11 – October 2, 2017, with the exam on October 22.

#### 6. Ontario IVIT Exam

Registration for the next Ontario Intravenous Infusion Therapy (IVIT) Examination runs from October 16 – November 23, with the exam on November 26. As specified in the <u>Standard of Practice for IVIT</u> this course is one of several requirements for Members who want to offer IVIT procedures.

# 7. Ontario Clinical Examinations for Entry-To-Practise

The next exam takes place September 24, 2017. Registration is now closed.

#### 8. Council Meeting

Our next regularly scheduled Council meeting will be held October 18, 2017 in the Council Chamber at the College. Observers are welcome. If you are interested in observing, please contact us at <a href="mailto:info@collegeofnaturopaths.on.ca">info@collegeofnaturopaths.on.ca</a> to register.