

INFORMED

NEWSLETTER OF THE COLLEGE OF NATUROPATHS OF ONTARIO



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**Focus on
Informed Consent**



Mark Your Calendars!

Registration renewal opens February 14, 2019

Renewing your registration to practise as a naturopath represents much more than just completing a form and paying a fee. In addition to allowing you to use a restricted professional title, your registration also reflects

- your education,
- the fact that you have met specific requirements to be admitted to the profession,
- your adherence to the legal framework that applies to NDs as self-regulated professionals, and
- your ongoing commitment to quality assurance and ongoing learning to provide your patients with safe, ethical and competent care.

March 31, 2019 is the deadline for all Members to complete their registration renewal.

Members for whom we have a current email contact will be sent a renewal link in February, so we encourage you to [make sure your Member account is up-to-date](#).

Renewal is a two-step process that includes completing the Information Return form and paying your annual fee. You must do both or your renewal will be incomplete and you could incur an administrative fee as a result.

REGISTRATION RENEWAL

Things to do now

- ❑ **Insurance** – Make sure your professional liability insurance is always up-to-date to avoid being unnecessarily suspended and having to pay a reinstatement fee.
- ❑ **Name change** – If you have changed your name since you renewed in 2018, we encourage you to [submit the Name Change Form](#) now (under “Membership Forms”) to avoid potential delays later.
- ❑ **Class change** – changing your registration class needs to be completed before you can renew and this takes time for the College to process. [Complete the Change of Class Form](#) (under “Membership Forms”) as soon as you are confident that is what you want to do.
- ❑ **Other changes** – if you’ve moved, changed practice locations, emails, or any other contact details, you are responsible for logging in to your Member account and updating your profile within 30 days of making any change. College staff cannot do this for you because it is a Member’s responsibility.

Pilot Payment Plan Program

The College is currently reviewing the results of the Payment Plan Program that it ran last year as a test pilot. We will update Members once a decision has been reached about whether it will be available for the 2019 renewal period.

Renewal exit survey

Thank you to the Members who completed last year’s satisfaction survey after submitting their renewal. Your feedback helps us make continuous improvements to the process. Where possible, we will be incorporating your suggestions into Renewal 2019.

REGISTRAR'S MESSAGE



“I apologize “

Two very simple words that carry more baggage than an Airbus 380! If I apologize, does that mean that I have done something wrong? If I apologize, can that be used against me later on in a court or even before the College of Naturopaths of Ontario? What will my insurance do if they find out I have apologized to a patient who felt hurt by my actions?

In an increasingly litigious society, i.e., one where everyone wants to sue everyone else, it is natural that we would default to a position that an apology is dangerous and may come back later to cause us grief. Yet, sometimes, those two simple words can mean the difference between people moving on and those who wish to take action against someone else.

Naturopathic doctors are human too! That means that they will make mistakes. Accepting the mistake as part of who you are, learning from it and, yes, saying those two words can make a huge difference in your life and the lives of your patients.

Did you know that Ontario has the *Apology Act, 2009*? Perhaps it's a sad statement on our society that we need to have legislation

governing one's ability to say "I'm sorry", but nonetheless, the legislation is in place. It's a short [piece of legislation](#) and perhaps well worth the few minutes it would take to read it. These are the highlights.

- An apology is an expression of sympathy or regret, for words or actions, indicating contrition or commiseration.
- An apology does not, in law, constitute an express or implied admission of fault or liability. It does not, despite any wording to the contrary in an insurance policy, void, impair or otherwise affect insurance or indemnity coverage. It cannot be taken into consideration in any determination of fault or liability.
- Evidence of an apology is not admissible in any civil proceeding, administrative proceeding or arbitration as evidence of the fault or liability of any other person, except

REGISTRAR'S MESSAGE

and only when given as part of testifying at a civil or administrative proceeding or arbitration.

This includes matters that might be brought before the College's system. An apology to a patient cannot be used in a proceeding before the College unless you apologize when testifying during a hearing.

The health regulatory Colleges collectively have seen a number of instances where a patient brings a matter to the attention of the College simply because all they wanted was their health care provider to say that they were sorry. It is doubtful that most patients want an admission of guilt or liability, they simply want to know that the practitioner understands that they made a mistake of some kind and that the practitioner acknowledges that there was an impact on their patient. Mistakes are made and often times even with the best of intent.

So, next time a patient becomes upset with something that you have done or not done, or something that didn't go as planned, two sincere words will make all the difference in the world... I apologize.

In fact, I apologize that the College might have been too aggressive immediately following proclamation of the *Naturopathy Act, 2007* and that might have negatively impacted your lives. We've grown, we've learned and we've adapted.

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

Informed consent do's and don'ts

Informed consent is one of the top issues we see when reviewing patient files, whether due to a complaint, a Peer and Practice Assessment, or an inspection. Although NDs may be having conversations with patients before obtaining consent, there is often no documentation that these conversations occurred. Documenting all relevant patient discussions and information is a hallmark of providing safe and competent naturopathic care.

Here are some do's and don'ts that align with the College's requirements.



1 Let the patient review the consent form and your privacy policy before their first visit. Let them know they will be asked to sign the form if they are comfortable once the visit has taken place and all their questions have been answered.



- Have the patient sign a consent form before the first appointment and patient intake have taken place.
- Assume that because a form was signed, informed consent was given.

2 Allow enough time to have a complete discussion with ample opportunity for the patient to ask questions. In order to give informed consent, a patient needs to understand and appreciate the reasonable foreseeable consequences of their decision about whether to consent to the proposed treatment. This can sometimes take time. When obtaining informed consent make sure you talk about:

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

Rush the conversation when obtaining informed consent or, even worse, skip the conversation altogether.

Informed consent is an ongoing conversation, not a one-time event.

3 Be sure to include information specific to the risks and benefits of a proposed treatment based on the patient's individual health history and their presenting signs and symptoms. Naturopathic care provides individualized treatment plans to address each patient's unique situation, including changes over time.

Have a one-size fits all consent form for certain treatment plans such as IVIT.



REGULATORY GUIDANCE

DO 

Always obtain informed consent when you take a patient's health history, perform an assessment such as a physical exam, order tests, collect their personal health information, advise them of the costs for your services, and discuss a treatment plan.

Check in with your patient at the beginning of each visit to ensure they are okay going ahead with that day's treatment. Let your patient voice any concerns they have on that day and withdraw consent for treatment if they feel they want to. A patient may feel obligated to go through with a series of treatments they agreed to at the beginning, even though they may have concerns later that they are hesitant to bring up with their ND.

Treat consent as an ongoing process, not a singular event. Many things can change in the course of providing naturopathic care. A patient may present differently from visit to visit, which could require treatment adjustments or additional assessments and testing. Any new assessment or adjustment to treatment that is significantly different from that which the patient had previously consented to should be discussed and documented.

Make sure the patient file shows that informed consent was obtained. Documentation can include a signed consent form as well as a notation in the "SOAP" notes for each visit. You can note such things as the date consent was given, who was involved in the discussion, the information relayed to the patient or decision-maker, and the questions asked and answered.

DON'T 

Only get informed consent for proposed treatments.

Assume that when you have planned a course of treatment over several weeks or months, such as a series of acupuncture treatments or IVIT, and obtained informed consent for the initial treatment, that the patient is consenting every time they come for their visit.

Have your patients sign a consent form at the end of the initial visit and assume that consent has been given for all subsequent treatments and assessments.

Have a discussion and obtain informed consent from your patient without documenting it.



REGULATORY GUIDANCE

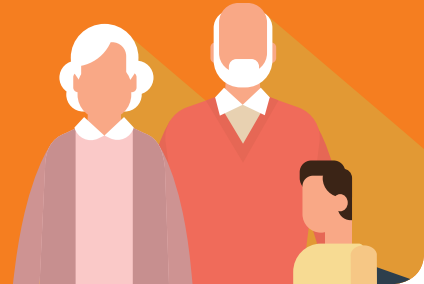


Understand that certain factors may indicate that a patient is incapable of providing consent but that age, except for the very young, is not one of those factors. The *Health Care Consent Act, 1996* states that a person is capable of consenting to treatment if they are able to understand the information that is relevant to making a decision about the treatment, and are able to appreciate the reasonable and foreseeable consequences of a decision or lack of a decision.

Keep in mind that a patient may be capable of consenting to some aspects of their care, but not to others. For example, a patient may be able to consent to an initial assessment, but may not be able to consent to a treatment plan because they cannot understand complex information related to the treatment. Always clearly and fully document who provides consent if someone other than the patient is involved.



Assume that a patient is incapable of providing consent because of their age (either young or old).



Leave the patient out of the process when a substitute-decision maker is providing consent.



Read our ***Informed Consent Guideline*** for more details and full requirements.

See other articles about informed consent on pages 9 and 11.



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

ND perspective on informed consent

We spoke with Dr. Erin Psota, ND about why informed consent is important and asked her for practical tips to obtain it. In addition to her private naturopathy practice and other professional activities, Erin is chair of the College's Inquiries, Complaints and Reports Committee (ICRC). In this role, she has seen first-hand how failure to obtain informed consent can lead to a patient complaint.

From a patient care perspective, why is informed consent important?

Informed consent really helps to avoid the idea of "buyer's remorse" from a complaint perspective. We sometimes see complaints that could have likely been avoided if the patient had been better informed by their ND. Sometimes it's clear when patients feel taken advantage of, in terms of costs, or when they've not been informed of all the risks involved.

If patients understand what treatment plan they're embarking on, including not only the benefits, but the risks, costs and alternatives, they can be more confident in their decision and in the ND for having outlined what to expect.



(STOCK PHOTO)

I think that it's easy for NDs to forget that there's a power dynamic inherent to patient relationships. Informed consent is there to remind both the ND and the patient that it's the patient who gets the final say in their care. Patients are trusting us to make the best possible recommendations and this is just another way to be accountable to that.

What practical tips do you have for NDs about obtaining and documenting informed consent?

Practically speaking, it comes with practice. The more you make it a part of each and every patient visit, the easier and more routine it becomes. I also make it a point to walk patients through my logic when I'm recommending something that might interact with their medication, or something that they might later Google! And then I'll ask if that sounds reasonable to them, and whether they have any

ND PERSPECTIVES

concerns about it. I've definitely gotten post-visit emails over the years that have made it clear that I didn't explain things as well as I thought.

As a practising ND, what are some of the challenges you face in getting informed consent, and how do you approach these?

I think it's easy as an ND to go through and assess the risks and benefits in your head when making recommendations and then patients don't necessarily know that you've done this. In a visit with a patient that you've been seeing for a long time, informed consent is often assumed. For me, I try to wrap up each visit with "any questions or concerns about what we've talked about today?" as a check-in and reminder to myself regarding consent.

What are some of the most common pitfalls that come to the ICRC's attention where informed consent is part of a complaint to the College?

Hands down, the most common problem is that there's no documentation that a conversation ever took place, which potentially means that it never happened. And I think that many of us are guilty of assuming that a signed consent form on an initial visit is enough to

cover that patient in perpetuity. It's not. It's a conversation that should happen with every visit, even briefly.

Are there any examples where the ICRC has seen exemplary cases of informed consent and what are the positive elements that stood out?

The one example that stands out actually came about because of a complaint. Because of the complaint process and the resulting oral caution, the ICRC panel felt very confident that the ND really understood the intricacies of what informed consent really means and has since implemented changes to their practice. Those changes will not only prevent future complaints of a similar nature, but will truly strengthen the ND-patient relationship. I can't always say that the ICRC is a particularly "feel-good" committee, but that situation in particular really felt like it was a win for everyone - ICRC, the ND, and patients!

Complaints and informed consent

Informed consent is an essential and vital component of quality naturopathic care. In this edition of *iNformeD*, we present and analyze a scenario based on a complaint about a Member's failure to respond appropriately to a patient's concerns and to provide sufficient information about the recommended treatment.



COMPLAINT SUMMARY

The College received a complaint from a patient who had one appointment with a naturopath to address anxiety. The patient was concerned that the Member neglected to consider medication prescribed by another health care provider when recommending the initial course of treatment.

According to the patient file obtained during the investigation, the patient was taking Gabapentin for anxiety/depression. This information was recorded on the intake form, and, as per the Member's clinical notes, was further discussed during the appointment.

Having considered, among other things, the patient's medication history, the Member recommended a GABA supplement to address their main concern of anxiety.

Following the appointment, the patient researched the recommended supplement and found that Gabapentin and GABA were analogues. The patient emailed the Member and expressed their concerns regarding taking analogue products. In response, the Member acknowledged by email that the patient was right and,

ICRC CORNER

without providing any further information, recommended an alternative course of treatment.

The Member's response to the complaint conveyed that the decision to recommend GABA was based on the Member's research confirming that, according to the Natural Medicines database, there was no direct interaction between GABA and Gabapentin. The Member acknowledged that the email response to the patient could have been formulated differently and should have included the Member's own research on the subject.

OUTCOME

Based on the results of the investigation into this matter, the Inquiries, Complaints and Reports Committee (ICRC) noted that the Member had in fact considered the medication taken by the patient. However, the ICRC had concerns about the Member's apparent failure to appropriately respond to the patient's questions about the recommended course of treatment. The Committee issued a Letter of Counsel to the Member in order to clarify and reinforce the importance of providing the patient with the information they needed to make informed decisions about their care, and taking the time to respond fully and satisfactorily to concerns raised by patients.

ANALYSIS

Recommending Non-scheduled Substances

The [*Standard of Practice for Recommending Non-scheduled Substances*](#) outlines the following expectations:

- the Member who recommends non-scheduled substances provides relevant information, including but not limited to risks, contraindications, and proper usage, to the patient;
- before recommending a non-scheduled substance, the Member reviews the patient's available medication history; and
- when preparing a recommendation for a non-scheduled substance, the Member includes the following:
 - name of substance/product, strength, dose and quantity to be dispensed, and
 - directions for use including the administration route, frequency, duration and any special instructions.

There was no evidence before the ICRC that the Member failed to consider the medication being taken by the patient before recommending GABA. The product that the Member recommended appeared to be a reasonable approach to treating the patient's health concerns. The ICRC, however, was alarmed that the patient did not receive full information disclosure about the recommended supplement, including any risks, side effects,

ICRC CORNER

interactions with other medication and any available alternatives. Failure to provide this information to the patient deprives them of their right to make an informed decision about the care they receive.

Informed Consent

The [Health Care Consent Act, 1996](#), (HCCA), defines informed consent as consent that is based on information which a reasonable person in the same circumstances as the patient would require in order to make a decision about the treatment. The HCCA specifies that the following matters must be discussed in order for the patient to provide informed consent.

1. The nature of the treatment.
2. The expected benefits of the treatment.
3. The material risks of the treatment.
4. The material side effects of the treatment.
5. Alternative courses of action.
6. The likely consequences of not having the treatment.

The [Standard of Practice for Consent](#) states that the Member is required to discuss the following with the patient or substitute decision-maker as appropriate:

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

The Member is expected to provide an opportunity for the patient or substitute decision maker to ask questions and respond to them in a manner that the patient or substitute decision-maker understand.

The ICRC noted in their Decision and Reasons that ongoing dialogue and open communication between the patient and the practitioner are essential for obtaining informed consent. During discussions about the patient's condition and treatment options, the Member should provide opportunities for the patient to ask questions. The Member should seek to answer any questions when asked, if possible, or as soon as possible thereafter.

The ICRC indicated that the patient may have benefitted from additional information, including scientific research, about the recommended supplement and its interaction with other medications. They also noted that a more informative response to the patient's email may have prevented this complaint from being initiated.

ICRC CORNER

Ethics

The ICRC also considered the manner in which the Member responded to the patient's email, which may have been perceived by the patient as dismissive. Members of the College are required to treat each patient with dignity and respect, be considerate of the patient's concerns, respect the patient's request for an alternate opinion, and recognize the patient's right to question and accept or reject any health care recommended by a naturopath.

BOTTOM LINE

As outlined in the College's [*Guideline for Informed Consent*](#), the ability to direct one's own health care needs and treatment is vital to an individual's personal dignity and autonomy. Choice is a key component of dignity and autonomy. Regulated health professionals hold a position of trust and power with respect to their patients and can often exercise influence over a patient. However, decision making power must always rest with the patient, or in case of incapacity, the patient's substitute decision-maker. It is the right of every patient to receive full and frank information on their condition, the options available, and to provide free and informed consent to any matters relating to their health.

Providing patients with sufficient information to make an informed decision about their treatments and addressing any questions or concerns raised by patients is of paramount importance for every health professional.



Important Reminder:

professional liability insurance

Every month the College reviews Member insurance information based on the date the Member advised us that the policy will expire. We do this to remind those Members of the need to have professional liability insurance (PLI) and to update their College record. In the last three months, five Members were suspended for failing to comply with the College's insurance requirements.

The *Registration Regulation* and the College by-laws establish the kind and amount of insurance that NDs must carry. This ensures that patients who suffer lost wages or other financial loss due to treatments or services performed by an ND have access to financial compensation.

The by-laws of the College describe the requirements for professional liability insurance as outlined below.

- It must be on a claims-made form.
- Must cover the full scope of practice, including the controlled acts authorized to the profession, as set out in sections 3 and 4 of the *Naturopathy Act, 2007*.
- Must have a deductible of \$1,000 or less.
- Must be from an insurer licensed by the Financial Services Commissioner of Ontario or through membership in a protective association.
- Must be in the amounts stipulated.

All NDs who hold a General Class certificate of registration must carry both a minimum of \$2 million per claim and a minimum of \$2 million aggregate.

All NDs who have met the *Standard of Practice for Intravenous Infusion Therapy (IVIT)* must carry an additional amount of \$3

million per claim and \$3 million aggregate. This means that the total amount required is \$5 million per claim and \$5 million aggregate.

All NDs who hold an Inactive Class certificate of registration must carry "enduring" or "tail" insurance at the levels noted above for a minimum of five (5) years after they move into the Inactive Class.

In order to avoid being unnecessarily suspended and having to pay a reinstatement fee, **Members are asked to ensure that their insurance policy is always in place and that the information held by the College is always up-to-date and accurate. This includes updating your policy expiry date information *before* your policy expires.**

Please [email us](#) if you have questions about updating your professional liability insurance information. You can find your insurance information on your Member account page accessible through our website.

Do your website, advertising and social media posts meet the Standard?



There have been several news stories in the last six months about what NDs and other health professionals are advertising and promoting on their websites and social media channels. To ensure the public has access to information that is true, accurate, verifiable, realistic and professionally appropriate, we encourage Members who have not recently done so to review the [Standard of Practice for Advertising](#) and the [Guideline](#), as well as the [Advertising and Bio Do's and Don'ts](#) infographics. We recommend you share these with anyone who creates marketing strategies and content on your behalf. The principles apply to all forms of advertising and promotion, including social media posts, websites, ads, blog posts and journal articles. Remember that reviews and testimonials are not allowed.



New entry-to-practise exams for Ontario

You have likely heard a lot about the College's new entry-to-practise exams over the past few months.

In brief, applicants for registration to practise naturopathy in Ontario after April 1, 2019, who are not transferring their ND registration from another regulated Canadian jurisdiction, will need to successfully complete the College's Ontario Clinical Sciences exam (replacing NPLEX II). This exam tests a candidate's knowledge of necessary naturopathic competencies for the treatment of patients. Applicants will still be required to also complete the NPLEX I exam until November 15, 2020, when it will be replaced by the new Ontario Biomedical Exam.

In both cases, applicants must also complete the existing Ontario Clinical Exams (practical) in Manipulation, Acupuncture and Physical Examination/instrumentation and the Ontario Jurisprudence exam in order to qualify for registration with the College.

Applicants who are uncertain about where they want to practise may choose to sit both NPLEX I and II, as well as CONO's new exams, which would give them the greatest flexibility in terms of applying for registration in North America.

Note this is not a recommendation from the College. It is intended as information only.

The Ontario Clinical Sciences exam is a mix of case-based and stand-alone questions, which test for clinical readiness and emphasize a candidate's ability to apply their knowledge and critical thinking.

We anticipate that the fees for the new exams will be similar to those for NPLEX. That said, in order to establish fees, the College is required to consult with the public, its Members, and stakeholders for 60 days. This consultation is now active and we [encourage you to participate](#) by reviewing the proposed fees and sending us your feedback by January 16, 2019.

The College's governing Council will consider all of the feedback received and the determined fees will be posted on our website in early February as well as shared with relevant stakeholders.

See pages 18 and 19 for our easy-to-reference chart *Which ETP exams do I take?* Visit our [website](#) for more information about the new exams, including the Clinical Sciences exam blueprint, and the new exams fee consultation.

STUDENTS' CORNER

Which entry-to-practise exams do I take?

CCNM students

CONO = College of Naturopaths of Ontario

GRADUATION YEAR	TO PRACTISE IN ONTARIO	TO PRACTISE IN ANOTHER REGULATED CANADIAN PROVINCE/ TERRITORY	TO PRACTISE IN THE US	TO PRACTISE OUTSIDE OF NORTH AMERICA	UNDECIDED PRACTISE LOCATION AND/OR DUAL US-CANADIAN REGISTRATION
After April 1, 2019	<ul style="list-style-type: none"> • NPLEX 1 • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Clinical (practical) - Jurisprudence 	May be required to take other exams specific to that province/territory, e.g., jurisprudence. Contact regulator for details.	Contact the regulator or relevant body for the state in which you want to practise.	Contact the regulator or relevant body for the country in which you want to practise.	For maximum flexibility in North America*, consider <ul style="list-style-type: none"> • NPLEX 1 & 2 + <ul style="list-style-type: none"> • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Clinical (practical) - Jurisprudence
After Nov. 15, 2020	<ul style="list-style-type: none"> • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Biomedical Sciences - Clinical (practical) - Jurisprudence 	Same as above	Same as above	Same as above	Same as above
2021 & beyond	<ul style="list-style-type: none"> • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Biomedical Sciences - Clinical (practical) - Jurisprudence 	Same as above	Same as above	Same as above	For maximum flexibility in North America*, consider <ul style="list-style-type: none"> • NPLEX 1 & 2 + <ul style="list-style-type: none"> • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Biomedical Sciences - Clinical (practical) - Jurisprudence

* There is a two-year time limit during which an applicant must have completed their entry-to-practise exams to be eligible for registration with the College of Naturopaths of Ontario. After two-years, an applicant may be sent for an assessment to CONO's Registration Committee to determine their currency of knowledge and skills, along with a need for additional training, education, or exams based on identified areas of atrophy. This requirement may also exist in other provinces, states or territories. Therefore, if you are highly unlikely to practise outside Ontario/Canada within two years, you may choose to only complete the CONO exams.

STUDENTS' CORNER

Other applicants

TIMING	TO TRANSFER AN EXISTING, ACTIVE CATEGORY REGISTRATION TO ONTARIO FROM ANOTHER REGULATED CANADIAN JURISDICTION	TO APPLY FROM A US JURISDICTION, HAVING GRADUATED FROM A CNME-ACCREDITED PROGRAM	TO APPLY TO REGISTER IN ONTARIO FROM AN INTERNATIONAL JURISDICTION OR NON-ACCREDITED PROGRAM	TO REGISTER IN ONTARIO, HAVING FINISHED CNME-ACCREDITED EDUCATION OVER 2 YEARS AGO & NOT REGISTERED OR ACTIVELY PRACTISING IN ANOTHER REGULATED CANADIAN JURISDICTION	TO RE-APPLY FOR REGISTRATION 2 YEARS OR MORE AFTER RESIGNING ONTARIO REGISTRATION.
After April 1, 2019	Ontario Jurisprudence exam	<ul style="list-style-type: none"> • NPLEX 1 (or recognition of previous completion) • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Clinical (practical) - Jurisprudence 	<ul style="list-style-type: none"> • PLARNEX 1 • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Clinical (practical) - Jurisprudence 	<ul style="list-style-type: none"> • NPLEX 1 (or recognition of previous completion) • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Clinical (practical) - Jurisprudence 	<ul style="list-style-type: none"> • NPLEX 1 (or recognition of previous completion) • CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Clinical (practical) - Jurisprudence
After Nov. 15, 2020 & beyond	Ontario Jurisprudence exam	CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Biomedical Sciences - Clinical (practical) - Jurisprudence 	CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Biomedical Sciences - Clinical (practical) - Jurisprudence 	CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Biomedical Sciences - Clinical (practical) - Jurisprudence 	CONO exams <ul style="list-style-type: none"> - Clinical Sciences - Biomedical Sciences - Clinical (practical) - Jurisprudence

Following are brief descriptions of the entry-to-practise exams discussed in the two charts about the exams:

NPLEX - the Naturopathic Physicians Licensing Examination as developed by NPLEX Inc., and delivered by the North American Board of Naturopathic Examiners. NPLEX includes two parts, NPLEX Stage 1 (Biomedical exam) and the NPLEX Stage II (Clinical Sciences exam and clinical elective in Acupuncture exam).

CONO Biomedical Sciences Exam - a registration examination in the biomedical sciences which tests candidate knowledge of body systems and their interactions, body functions, dysfunctions, and disease states.

CONO Clinical Sciences Exam – a registration examination in the clinical sciences which tests a candidate’s knowledge of necessary naturopathic competencies for the treatment of patients, required to be eligible for registration with the College to practise naturopathy in the province of Ontario.

CONO Clinical (practical) Exams - a practical examination in Physical Examination/Instrumentation, Acupuncture, and Manipulation, required to be eligible for registration.

CONO Jurisprudence Exam – an online, open-book exam that tests candidate knowledge and understanding of the laws, regulations, College by-laws, and practice standards and guidelines that govern the naturopathy profession in Ontario.



Give back. Get involved. Volunteer!

Join more than 80 Members of the profession who volunteer with the College. We currently have a number of opportunities available. They are outlined on the following pages.

About the application process

The volunteer application process will include a brief screening interview to ensure the placement is the right one for both the ND and the College. Members can earn up to 18 Category B CE credits over their three-year reporting period for time spent volunteering. Volunteers also receive \$150 per day for the work they do on the College's behalf.

We appreciate interest from all applicants and will keep information on file in the event we receive more applications than the number of positions available.

COMMITTEE MEMBERS (Statutory and Non-statutory Committees)

We are seeking non-Council member NDs to fill positions on our statutory and non-statutory committees*.

This is a great opportunity to

- contribute to the regulation of the profession,
- learn about how the College works,
- build new relationships,
- enhance your leadership skills, and more.

Our committees support public safety by helping the College carry out its regulatory responsibilities to support the delivery of safe, competent and ethical naturopathic care. Committees are made up of NDs elected to Council, public appointees, and NDs appointed from the profession by Council. Appointed committee members draw on their professional knowledge and judgment to help develop regulations, programs and policies. They participate as full voting members of the committees on which they serve.

About the committees:

1. Statutory – established under the *Health Professions Act* and required of every health regulatory college in Ontario.
 - Discipline Committee
 - Executive Committee (elected by Council)
 - Fitness to Practise Committee

- Inquiry, Complaints and Reports Committee
- Patient Relations Committee
- Quality Assurance Committee
- Registration Committee

2. Non-Statutory – appointed by the College Council and established under either the *Naturopathy Act* or the College by-laws.

- Audit Committee
- Examination Appeals Committee
- Inspection Committee
- Nominations and Elections Committee
- Scheduled Substances Review Committee

You can learn more about both kinds of committees, including their terms of reference, on our website.

Time commitment: The number of hours and days varies according to the frequency of meetings and the agenda. Attending committee meetings and fulfilling committee responsibilities are important. Before applying for an appointment, it is recommended that you discuss the time commitment with people in your personal and/or professional life who might be affected.

One-year term: Beginning April 25, 2019 with the option of renewal.

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Appointment criteria: NDs who apply for appointment must be committed to serving the public interest. They must also be Members in good standing as set out in the by-laws, including:

- They are not the subject of a Discipline proceeding of the College of Naturopaths of Ontario.
- They have not been found guilty of professional misconduct, incompetence or incapacity by the College within three (3) years prior to the appointment.
- They have not had their Certificate of Registration revoked or suspended in the preceding six (6) years for any reason other than non-payment of fees.
- They have agreed to, and do, resign from any position such as director, owner, board member or officer with an educational institution related to naturopathy.
- They are not subject to terms, conditions or limitations on their practice.
- They are not in default of payment of required fees.
- They are not in a conflict of interest.
- They have agreed to, and do, resign from any position such as director, owner, board member, officer or employee with a Professional Association relating to naturopathy.
- They are not a member of any Council of another College regulated under the RHPA.
- They are not an employee of the College.

Desired skills and other considerations:

The College will screen committee applicants for appointments for specific skills and other considerations, including:

Skills

- Demonstrated ability to be un-biased and avoid conflicts of interest.
- Ability to act independently from the profession and others.
- Ability to participate in a collaborative decision-making structure.
- Is current in clinical practice.
- Is analytical, rational, and objective.
- Demonstrates critical reasoning/decision-making skills.
- Has a high awareness of societal values, e.g., social justice and human rights knowledge.
- Behaves with integrity and transparency.
- Is open-minded and willing to learn.
- Recognizes their own limitations and capacity to meet the demands of the role.
- Is reflective and self-aware.
- Is respectful and personable.
- Is an effective communicator.
- Demonstrates initiative, diligence and preparedness in their work.
- Has technical knowledge of the *Regulated Health Professions Act, 1991*, the Health Professions Procedural Code, the *Naturopathy Act, 2007*, the regulations

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and standards of practice governing the profession and other health related legislation and regulations.

- Has a fundamental understanding of the public interest – “patients first”.
- Is highly computer literate, and
- Is highly participatory, comfortable offering informed opinions and hearing those from others.

Other considerations

- Has not declared bankruptcy within the past three (3) years.
- Is prepared to commit to the work required on committees and make themselves available to meet the work demands.
- Has no criminal charges or convictions that would bring the College or regulatory sector into disrepute.

- Has no identified social media profile that could bring the College or regulatory sector into disrepute, or would be considered inconsistent with College values/mandate.

Please apply by February 7, 2019 with:

- A letter of interest along with your resume and any other information you believe will be helpful to the Council in considering your appointment.
- The names of the committee(s) you are interested in.

If you have questions, please email us at info@collegeofnaturopaths.on.ca.

**excluding the Executive Committee which is elected by Council*

EXAMINERS FOR 2019

- Ontario Clinical (practical) examinations (acupuncture, manipulation and physical exam/instrumentation)
- Intravenous Infusion Therapy (IVIT) examination

Time commitment: A one-hour training session specific to the exam modality, 30 – 45 minutes of on-demand training in unconscious bias, and a full eight-hour day for the exam. (See exam dates in NEWS AND EVENTS on page 28.)

Skills and Qualifications:

- Capable of conducting unbiased, fair and objective assessments of candidate knowledge and skill.
- At least three years' experience as an ND. IVIT examiners must have met the *Standard of Practice for IVIT* and have had at least two years' of regular IVIT practise.
- Strong working knowledge of the examination topic area.

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- Registration in good standing with the College.
- Able to commit to at least two exam sessions per year.
- A strong commitment to the College's mandate of public protection.
- Must not be actively affiliated with a CNME-accredited naturopathic education program (clinic supervisors exempted).

We encourage applications from NDs with diverse backgrounds, work experience and areas of practice. Previous cultural competence training and/or experience working with internationally educated professionals are considered assets.

To apply: [Email us](#) by January 14, 2019 to confirm your interest and include a copy of your resume highlighting any relevant experience. Please indicate which modality you are interested in examining.

INVESTMENT ADVISORY COMMITTEE (IAC) MEMBERS

We are seeking members for this newly-created operational committee, established under the authority of the College Registrar and CEO. The Committee's role is to provide an external perspective in reviewing the College's investments and providing recommendations to the Registrar and CEO for consideration.

Operating within defined terms of reference, the IAC will undertake the activities listed below as well as other functions as may be assigned from time to time by the College.

- Review and recommend changes to the College's Investment Policy (established by the Senior Management Team).
- Review and recommend changes to the College's Asset Protection Policy (established by the Council).
- Review investment performance and report to the Registrar and CEO.
- Review and recommend changes to the structure of the College's investments and investment portfolio.
- Review and report to the Registrar and CEO on compliance of the investment of College assets in alignment with relevant Council policies.
- Report on and recommend any other matters affecting the investment assets of the College which the Committee determines should be brought to the attention of the Registrar and CEO.

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Committee composition and appointment:

The IAC is appointed by the Registrar & CEO and will include at least three (3) and no more than nine individuals, including:

- up to two professional Member(s) of the Council;
- up to two public members of the Council;
- at least two, but not more than five, non-council professional Members; and
- the College's Investment Advisor appointed by the Royal Bank of Canada (ex-officio member)

The Chair will be appointed by the Registrar and CEO.

Time commitment: A minimum of two meetings per year plus preparatory reading. An additional 30 – 45 minutes of on-demand training in unconscious bias.

Skills and qualifications:

- Registration in good standing with the College.
- A minimum of three years in practice.
- Committed to procedural consistency and fairness.
- A strong commitment to the College's mandate of public protection.
- Not be in default of payment of any fees or costs to the College.
- Not be the subject of any disciplinary or incapacity proceeding.
- Not had a finding of professional misconduct, incompetence or incapacity in the preceding five years.
- Previous volunteer experience and/or investment expertise will be beneficial in this role.

To apply: [Email us](#) by January 18, 2019 to confirm your interest. Please include a copy of your resume, including any investment-related experience.

For postal submissions:

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

College consultations

We welcome your input on the following consultations. Comments received during a consultation process are reviewed by the appropriate College committee and by the Council as part of the decision making process. All feedback is carefully considered, even that which may not be reflected in the final regulation, policy, standard, etc.

The Public Register (by-laws)


Response deadline: December 16, 2018

[Access the consultation](#)

Entry-to-practise exam fees

Response deadline: January 16, 2019

[Access the consultation](#)



READER SURVEY

Take our 3-question reader survey about this issue of *iNformeD*. All responses are anonymous. Thank you!

TAKE SURVEY

NEWS AND EVENTS

New: Cannabis Guideline.

On October 17, 2018, the use of recreational cannabis was legalized in Canada. The College's *Guideline on Non-Medical (Recreational) Marijuana* interprets the *Cannabis Act, 2018* for Ontario's naturopathic profession in conjunction with the College's regulations and standards of practice. Note that medical cannabis continues to require a prescription from a Medical Doctor or Nurse Practitioner.

Read our Annual Report!

This year's report highlights our core program areas and discusses key trends, results and accomplishments from the past fiscal year. Our Annual Report is now available in French.

**Upcoming: Council elections.**

The call for nominations is now open! Elections will be held in Districts 1 (West), 3 (Toronto West), and 5 (South Central) in the new year. Find your district and access the Election Handbook and nomination forms [here](#).

Check out our recent blog posts.

The Registrar's blog is open to the public and Members to comment and participate in. Our most recent posts focus on informed consent and what to do if you're a Member who has received a complaint.

- [You Received a Complaint – now what?](#)
- [Informed Consent – Giving the power back to the patient](#)
- [Until Death Us Do Part](#)
- [The Role and Powers of Investigators Appointed by the Registrar](#)
- [Restricted Titles](#)

Council meeting.

The next meeting is scheduled for January 30, 2019 and is open to Members and the public. Please phone us at 416 583-6010 or [email us](#) to register as an observer.

Holiday Office Closure.

The College will be closed from the end of the business day on December 21 and will reopen on January 2.



NEWS AND EVENTS

Upcoming exam dates**Ontario Prescribing and Therapeutics Examination**

A post-registration exam for College Members seeking to meet the [Standard of Practice for Prescribing](#).

Exam Date	Registration Opens	Registration Closes*	Deadline for Exam Withdrawals and Exam Accommodation Requests	Timetable Notices Released	Exam Results Released
June 23, 2019	May 10, 2019	May 31, 2019	May 31, 2019	June 14, 2019	July 26, 2019
Oct 20, 2019	Sept 13, 2019	Oct 2, 2019	Oct 2, 2019	Oct 11, 2019	Nov 22, 2019

Ontario Intravenous Infusion Therapy (IVIT) Examination

A post-registration exam for College Members seeking to meet the [Standard of Practice for IVIT](#).

Exam Date	Registration Opens	Registration Closes**	Deadline for Exam Withdrawals and Exam Accommodation Requests	Timetable Notices Released	Exam Results Released
Dec 2, 2018	Oct 22, 2018	Nov 12, 2018	Nov 12, 2018	Nov 26, 2018	Jan 11, 2019
May 5, 2019	March 25, 2019	April 12, 2019	April 12, 2019	April 26, 2019	June 3, 2019
Dec 1, 2019	Oct 21, 2019	Nov 8, 2019	Nov 8, 2019	Nov 25, 2019	Jan 13, 2019

* Registration will close on this date OR once registration for the exam has hit capacity at 130 individuals.

** Registration will close on this date OR once registration for the exam has hit capacity at 42 individuals. Members must have successfully completed a College-approved IVIT training course to be eligible to sit this examination.