

SPRING 2019

# INFORMED

NEWSLETTER OF THE COLLEGE OF NATUROPATHS OF ONTARIO

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About  
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# Renew your registration today

*Only 3 weeks until the deadline!*

## TWO PARTS TO RENEWAL

Renewing your registration takes about an hour and consists of:

1. Paying the annual fee
2. Completing the online Information Return

Both are due by March 31, 2019 at 11:59 pm EST. The College must receive both the renewal fee payment (unless enrolled in the College's payment plan) and the completed Information Return form in order for your registration to be successfully renewed.

[Visit our website](#) to access the renewal portal and to view the full schedule of important dates and deadlines.

## FEES & PAYMENT OPTIONS

2019 registration fees (inc. HST)

Class	Fee
General	\$1,784.27
Inactive	\$894.96



## LATE FEES

Any Member who misses the renewal deadline will be charged a late fee of \$316.40 and a registration reinstatement fee of \$273.46. These fees apply to both the General and Inactive classes.

## HOW TO PAY

### Online

Members can pay their 2019 registration fees online before or after submitting their Information Return, or at any time by clicking on the cart on their account page.

### Cheque or money order

Members who are not paying online must ensure their cheque, money order or bank draft is received by the College by 5 p.m. on March 29.

## REGISTRATION RENEWAL

### Fee Payment Plan Program

The College is again offering a registration fee Payment Plan Program on a trial basis for 2019 for Members who prefer to pay in installments rather than one lump sum. [Access program details and enrolment forms](#) on our website.

**IMPORTANT NOTE:** If you want to enrol in the Payment Plan Program, you must do so **no later than March 22, 2019** by 5:00 pm EST and **must not** pay any renewal fees through the College's online portal prior to enrolment.

### THE INFORMATION RETURN

The College also collects certain information from its Members as required under the Registration Regulation and to meet the reporting requirements of HealthForceOntario. Details such as a Members' practice hours are asked annually. Certain other previously-collected information may be used to pre-populate the online Return each year.



### HELP IS A CLICK AWAY!

Visit our website for

- Information about late fees and other amounts that may apply if you are late to renew or submit information incorrectly
- [Information Return Guides](#) – General Class and Inactive Class
- [Short informative videos](#) to walk you through completing each section of your Information Return form
- [Registration Renewal FAQs](#)
- Payment Plan Program Handbook and enrolment forms



### Before you begin: check your web browser!

The online renewal portal and the Information Return form are not fully supported by all web browsers, and in particular are not compatible with Internet Explorer. The College recommends using Google Chrome or Firefox to access the form and the website. If you have ongoing difficulties, please contact us at (416) 583-6002 or [members@collegeofnaturopaths.on.ca](mailto:members@collegeofnaturopaths.on.ca).



## Discipline Outcomes

In May of 2018, the Discipline Committee held its first contested discipline hearing where a naturopath denied allegations against them. A panel of the Discipline Committee heard the matter of the College versus Dr. “John Doe”, ND<sup>1</sup>. At the outcome of the hearing, the panel made no findings of professional misconduct against the Member. As a result, the referral of the matter to the Discipline Committee was removed from the Member’s profile on the Public Register and the name of the Member remains confidential.

### The Allegations

Dr. John Doe, ND was alleged to have committed professional misconduct by having committed sexual abuse against a patient, breaching standards of practice of the profession, and failing to have obtained informed consent for the treatment of a patient.

The allegations of sexual abuse related to the Member allegedly having a) made remarks of a sexual nature to the patient; and b) engaged in behaviour of a sexual nature by exposing the breasts of a patient.

The allegations included the ND’s failure to obtain informed consent because the Member did not tell the patient that she could withdraw her consent for treatment at any time during a

treatment, or that she could have worn a gown or loose clothing during the treatment.

The allegations of breaching the standards of practise of the profession related to the Member failing to have averted his eyes when the patient turned over to a supine position while covering herself with a towel.

The Member denied all of the allegations.

### Burden of Proof

During a discipline hearing, the burden of proof rests on the College. Based on the evidence presented, the College must demonstrate that, on a balance of probabilities, the acts of professional misconduct likely occurred. Unlike in the criminal courts, the burden of proof is not beyond a reasonable doubt.

<sup>1</sup> The names have been redacted to protect the identity of the Member



## DISCIPLINE OUTCOMES

### The Hearing

The hearing was held over four days, during which both the College and legal counsel for Dr. Doe, ND, presented witness and expert testimony. After the hearing ended, the Discipline Panel received final written submissions of all relevant documents from witnesses and experts. A fifth hearing day was scheduled to allow for the presentation and discussion of those written submissions.

### The Outcome

As noted above, the outcome of this hearing was that the panel of the Discipline Committee found that the College had not met its burden of proof requirements. In particular, the Discipline Committee did not find that the witness testimony, namely that of the patient, was credible. As a result, no findings of professional misconduct were made against the Member.

### What can be learned from this case?

There are a lot of interesting learning opportunities from this case.

**Did the College “lose”?** – There are some who would say that the College “lost” this case because after presenting all of the available evidence, there was no finding of professional misconduct against the Member. This is an important issue. The College does not win or lose cases that it takes before a

panel of the Discipline Committee. Where there is a finding of professional misconduct or incompetence, the College neither feels vindicated nor pleased with the result. Discipline cases are about the College presenting the facts to the best of its ability before a panel of naturopaths and members of the public, and allowing the panel to make a determination.

**Why have a hearing at all?** – Some people would naturally assume that since there was no finding of professional misconduct, the hearing was a waste of time, resources and money. Of course, no one can know for certain what the outcome of a hearing will be. For the hearing discussed in this article, the College’s Registrar and prosecuting counsel were of the view that the witness was credible. However, the panel of the Discipline Committee did not see it the same way and, because they are the decision-makers, it is their view that ultimately matters.

### Why was it referred to the Discipline Committee?

– It might be fair to wonder why the matter would have been referred to the Discipline Committee at all if there was not enough evidence to result in a finding against the Member. The steps in the complaints process require the Inquiries, Complaints and Reports Committee (ICRC) to receive and review the complaint, as well as investigation reports, the Member’s response to the allegations, and the patient’s response to the Member’s response. The ICRC does not,

## DISCIPLINE OUTCOMES

however, hold a hearing, nor do they meet the Member, the patient, or other witnesses. In fact, the ICRC cannot determine the credibility of the Member, the patient or witnesses. The ICRC considers the seriousness of the allegations and weighs the available evidence to determine whether there is reasonable probability of a finding of professional misconduct.

**Sexual abuse allegations are serious** – As many Members know, not every case that is referred by the ICRC to the Discipline Committee will result in a contested hearing where the naturopath denies the allegations.

Many cases are settled based on an agreement between the College (prosecution) and the Member. In these instances, the two parties are able to agree to the facts of the case and, more often than not, the proposed penalty. Both of these agreements have to be to the satisfaction of the Discipline panel, which has the final say. These agreements are usually predicated on an agreement that there are findings of professional misconduct. However, the penalty for a finding of professional misconduct due to sexual abuse carries very stiff penalties. In cases of sexual abuse allegations, most Members are unlikely to agree to a finding of professional misconduct. The College is equally as unlikely to remove those allegations from consideration because our mandate is to protect the public and not the profession.

The details of this case tell us that there are a number of things that Members can do to help protect themselves in the event of a complaint or investigation. Some examples are listed below.

- ☒ Documenting patient consent is critical, as is the ability to demonstrate that the Member explained the treatment, reviewed other possible treatments, ensured the patient was comfortable proceeding, and ensured that the patient was very much aware that they can say stop at any time. This is always important, and doubly so when treatment involves touching any part of the body.
- ☒ Remember that as a knowledgeable and experienced health care professional you hold all of the power in the relationship. Give the power back to the patient by allowing them to choose their treatment and determine how they want to receive it - especially when it comes to what they are to be wearing during the treatment. Take the extra time to make sure your patient is comfortable throughout the treatment or consultation. Read their body language. A person who is no longer comfortable may not say it in words but their body language or little jokes like “this is awkward” are tip-offs that something may be causing discomfort.

## DISCIPLINE OUTCOMES

- ✓ Record keeping is critical to help the ICRC understand the circumstances behind a complaint and is your first line of defense. In particular, notes made at the time of the treatment (or immediately after) about what was discussed and what occurred are essential. Next to consent, record keeping is one of the biggest problem areas seen by the College. Many Members need to improve skills in this area. Good record keeping skills and practices are more likely than anything to protect you in the long run if a complaint is made against you.
- ✓ Treatments must relate to the patient's condition and diagnosis - particularly when treating sensitive body areas. For example, performing an internal examination on a patient that presents with neck pain may be difficult to defend unless you can satisfy your ND peers that the procedure related directly to the condition.
- ✓ Stay current on the standards and requirements of the profession. If your treatments are based on protocols or standards developed decades ago, they may be more challenging to defend in the event of a complaint today. It is the job of every health professional to know the requirements and standards of the day – including how these change over time.

If there is a single takeaway from this and similar cases, it would be this.

Every health care professional, including NDs, needs to keep in mind that they could become a patient at any moment. If you were a patient, how would you want to be treated? I think that each and every one of us wants to be treated with respect and dignity, as a partner in health care decision-making, and as masters of our own bodies. No one wants to be taken for granted or made to feel too dumb to understand what is needed; nor would anyone want to be sexualized by a person whom they have to trust, often times with their lives. Too often, health care professionals forget what it feels like to be the patient.

# Regulatory Guidance



Our easy-to-read series of Do's and Don'ts articles highlight key things NDs need to know about a number of topics. Our newest infographic summarizes important [Do's and Don'ts for Informed Consent](#) – one of the top issues we see when reviewing patient files, whether due to a complaint, a Peer and Practice Assessment, or an inspection.

If you have not already seen them, other Do's and Don'ts include [what is allowed on websites and in advertising](#), as well as in professional biographies for promotional use. Members are encouraged to download these visual guides for easy reference when preparing advertising, web copy and other marketing materials.



## Consultation: Scheduled Substances & Labs Review

The College is conducting a 60-day consultation about proposed changes to the drugs/substances and laboratory tests that naturopaths may access through regulations and legislation that govern the profession.

This particular consultation builds on a previous consultation about this topic and is intended to solicit feedback about the College Council's approval of proposed amendments to [Ontario Regulation 168/15](#) and to the [Laboratory and Specimen Collection Centre Licensing Act](#).

We invite the profession, public and stakeholder organizations to share their feedback. The consultation closes on April 7, 2019.

**PARTICIPATE IN THE CONSULTATION**



INFORMATION FOR  
NATUROPATHS

# Sexual Abuse

Naturopathic doctors, along with all health care practitioners, are expected to ensure Ontarians receive health care in a safe and professional environment. Reflecting this expectation, all regulatory health colleges under the [\*Regulated Health Professions Act, 1991\*](#) (RHPA) have zero tolerance for client/patient abuse. The College of Naturopaths of Ontario, like all health Colleges, will investigate and take appropriate action when it receives a complaint or information where it appears that a Member may have engaged in this type of behaviour.

Incidents of patient sexual abuse by health care practitioners do occur and the *RHPA* mandates severe sanctions against College Members who are found guilty of professional misconduct in connection with sexually abusing patients. The law recognizes the significant harm that results from the sexual abuse of a patient by a health care professional.

It is important to remember that while the patient-practitioner relationship is based on mutual trust and respect, there is also an inherent power imbalance in favour of the naturopath. As such it is a Member's responsibility to establish and maintain appropriate professional boundaries with patients. This includes refraining from any conduct that is or could be perceived as sexual abuse.

The College has developed a number of standards and guidelines that set out its expectations of Members. The standards and guidelines are also intended to help Members provide their services in ways that foster patient feelings of trust and safety, that are completely professional, and that place the best interests of their patients as their primary concern.

## LEGISLATION AND DEFINITION OF SEXUAL ABUSE

Sexual abuse of patients is defined in the *Health Professions Procedural Code* (Schedule 2 of the RHPA), or the *Code*, as it is generally known. It includes:

- sexual intercourse or other forms of physical relations between the Member and the patient;
- touching of a sexual nature of the patient by the Member; and
- behaviour or remarks of a sexual nature by the Member towards the patient.

“Sexual nature” does not include touching, behaviour, or remarks of a clinical nature appropriate to the service or treatment provided.

The *Protecting Patients Act, 2018* expanded the definition of who is a patient, for the purposes of sexual abuse, to also include any of the following:

- a person who received health care services from a Member and payment is charged or received;
- an entry is made by a Member to the health record of the person;
- the person has provided consent to a health care service recommended by the Member; and/or

- the Member prescribed a drug for the person.

For the purposes of sexual abuse, a person is considered a patient where any of the above have occurred. In addition, the definition of a patient has been expanded to extend their status as a patient to one year after the person ceased to be a patient (this means the patient – naturopath relationship ended, as opposed to it having been a year since the ND has had contact with the patient). As such, it may be considered sexual abuse if a Member, within one year of ending the professional relationship, enters into a sexual relationship (even if consensual) with a former patient.

As required by the *Code*, if a panel of the College’s Discipline Committee finds a Member has committed an act of professional misconduct by sexually abusing a patient, it may:

- reprimand the Member, or
- revoke the Member’s certificate of registration for a minimum of five years if the sexual abuse consisted of, or included any of the following:
  - sexual intercourse;
  - genital to genital, genital to anal, oral to genital, or oral to anal contacts;
  - 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; and/or
- touching of a sexual nature of the patient's genitals, anus, breasts or buttocks.

In addition to the above penalties, the panel may,

- require the Member to pay a fine of up to \$35,000 to the Minister of Finance of Ontario,
- require the Member to pay all or part of the College's legal costs and expenses, the College's costs and expenses incurred in investigating the matter, and the College's costs and expenses incurred in conducting the hearing, and/or
- require the Member to reimburse the College for funding provided for therapy and counselling for patients who were sexually abused by the Member.

## TREATING A SPOUSE

The definition of sexual abuse in the RHPA includes the treatment of spouses, even if there was a pre-existing spousal relationship prior to naturopathic treatment.

*The Code* defines spouse as a:

- person who is the Member's spouse as defined in section 1 of the *Family Law Act*, or

- person who has lived with the Member in a conjugal relationship outside of marriage continuously for a period of not less than three years.

Even though the spouse may have consented to be a patient and receive treatment it is always the responsibility of the Member to be aware of the applicable laws. In this case, according to the definition in the legislation, providing naturopathic care to a spouse is considered sexual abuse.

However, Members may treat a spouse in emergency situations when there is no one else available who is qualified to provide the necessary care. The College considers this acceptable because the benefits of providing the required care in emergency situations outweigh the challenges posed by the personal relationship.

As a reminder, these requirements apply to all regulated health professionals in Ontario, not just naturopaths.

## PREVENTING SEXUAL ABUSE

Along with holding Members who commit acts of sexual abuse accountable, the College also provides Members with resources intended to prevent the sexual abuse of patients. Members are encouraged to review the College's [\*Guideline for the Prevention of Sexual Abuse\*](#).

Preventing sexual abuse includes establishing appropriate professional boundaries with patients, including boundaries that respect a person's personal physical space, and that also take verbal, emotional and cultural matters into account.

Members should be very aware of how they communicate to patients by paying attention to the ways information is conveyed and the words selected. They must be compassionate listeners and sensitive to the concerns and needs of patients. Being aware of language or cultural and physical barriers that may interfere with clear communications can help Members practice in a responsive and responsible manner. The naturopath's responsibility is always to act in the patient's best interest and to manage the boundaries within the therapeutic relationship. When managing the boundaries of the therapeutic relationship, the ND should:

- Recognize that each patient's boundaries will be unique to their own experiences, including their culture, age, values, or experiences of trauma.
- Be sensitive to the practice setting, especially when providing care in an informal environment, such as a patient's home.
- Respond appropriately when a professional boundary may have been breached. This involves identifying the breach, correcting the behaviour, and documenting the actions taken in the patient's record.

Patients may feel particularly vulnerable in a health care setting and may not always express their concerns. Therefore, use your professional judgment to determine the patient's comfort level and whether the presence of an additional person is advisable in certain circumstances.

## INFORMED CONSENT

Informed consent from a patient is more than just having a patient sign their name to a form. It is an ongoing conversation that must take place throughout the patient – ND relationship. Naturopaths must ensure their patients understand what they are agreeing to in terms of assessments and treatments. This consent should be obtained at every appointment, even if the patient previously agreed at another appointment to a procedure or treatment.

When obtaining informed consent, make sure you talk about:

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



Ongoing dialogue and open communication between the patient and ND are essential for obtaining informed consent. During discussions about the patient's condition and treatment, Members should provide opportunities for the patient to ask questions. Members should make detailed notes in the patient's record about the nature and content of discussions around consent.

If touching is required during examination or treatment, explain what is involved and what the patient can expect beforehand in order to avoid any misinterpretation or misunderstanding. Follow the principles of informed consent at all times. When touching a sensitive area such as a patient's genitals, anus, breasts or buttocks, upper inner thigh, chest wall muscles, Members may wish to ask for specific consent using a document specific to the procedure. One example is the [form that is currently used by the College of Massage Therapists of Ontario](#). This is not required by the College of Naturopaths of Ontario but is provided here as a resource.

## WORDS MATTER

Remarks of a sexual nature make up a large portion of sexual abuse complaints from patients. Therefore, great attention should be paid to the ways information is conveyed and the words you choose when speaking to patients. Because how we say what we say is as important as the choice of vocabulary, NDs should:

- Use tact and consideration to explain assessment and treatment/procedures to patients in order to avoid causing anxiety.
- Use the anatomically correct vocabulary for body parts. Avoid the use of jargon.
- Not talk about themselves or their problems to patients.
- Avoid providing examples of other sensitive area treatments or how frequently you provide the treatment of sensitive areas to other patients.
- Be particularly sensitive to words which could cause misunderstanding.
- Be honest and straightforward in their manner to demonstrate respect.
- Legitimize patient's fear and embarrassment when discussing sensitive areas and other parts of the body.
- Reassure patients to demonstrate respect and empathy.
- Provide the patient with ample and frequent opportunities to ask questions.

Additional resources:

- [Informed Consent Guideline](#)
- [Informed Consent Do's and Don'ts](#)

# Do's and don'ts for naturopaths

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## Do:

- ✓ Be aware of what constitutes appropriate and inappropriate conduct.
- ✓ Be aware that people have ethnic, cultural, religious, sexual orientation, gender and socioeconomic differences and ensure you maintain a high level of professionalism in being sensitive to these.
- ✓ Ensure that any and all conversations would not be found offensive by a patient.
- ✓ Use appropriate draping practices that respect a patient's privacy.
- ✓ Document on the patient chart anything unusual or out of the ordinary in the patient-practitioner interaction.
- ✓ Document the consent discussion in the patient chart, including that the conversation occurred and what was discussed.
- ✓ Consider using a separate consent approach when touching sensitive areas is involved.
- ✓ Ensure that the patient (or their authorized representative or substitute decision maker) clearly understands the purpose of any procedures, especially ones that require removal of clothing or physical contact.
- ✓ Provide ample opportunity for patients to ask questions.
- ✓ Encourage patients to take an active role in their treatment.
- ✓ Be sensitive to a patient's discomfort which may be expressed using words or in their behaviour, and change your approach if necessary.
- ✓ Be aware if a patient seems uneasy with your physical proximity to them and react appropriately.
- ✓ Maintain patient confidentiality.
- ✓ Use gloves when appropriate.
- ✓ Obtain consent before touching.

## Don't:

- ✗ Enter into an intimate relationship with a patient. Even relations where you have or think you have the patient's consent are strictly prohibited by the RHPA until at least a year has passed since the therapeutic relationship between the patient and ND has formally ended.
- ✗ Hug or kiss patients.
- ✗ Use gestures, tone of voice, or expressions, or engage in any other behaviour that may be interpreted as seductive, sexually demeaning, or as sexual abuse.
- ✗ Minimize statements made by patients that may represent their discomfort e.g., "this is awkward".
- ✗ Place instruments or supplies on a patient's chest, abdomen, lap or shoulder/neck area.
- ✗ Tell jokes or make comments of a sexual nature.
- ✗ Make comments about a person's body or clothing that could be interpreted as sexual in nature.
- ✗ Touch patients excessively or unnecessarily.
- ✗ Comment, inquire or speculate about a patient's sexual life, practices, or orientation unless clinically relevant.
- ✗ Initiate conversations with patients about sexual preferences or fantasies, and do not participate in sexually-related conversations initiated by patients. Document in the chart if such discussions are initiated by a patient.
- ✗ Display any material, such as jokes, posters, or pictures, that have a sexual connotation or that may be offensive to patients.

INFORMATION FOR  
PATIENTS

# Sexual Abuse

The relationship between a patient and a naturopathic doctor is a professional one, based on trust. Patients should expect that a naturopath will always respect their needs and act in a caring, respectful, and professional manner. The College has a zero tolerance policy towards any form of sexual abuse or sexual boundary crossing.

This article provides information for patients about sexual abuse, including how to recognize it, what to do if they believe they have been abused, and their rights as patients.

## WHAT IS SEXUAL ABUSE?

In Ontario, naturopaths and many other health professionals are regulated by the provincial government. The legislation that governs them is called the [\*Regulated Health Professions Act\*](#) (RHPA). The RHPA defines sexual abuse as sexual intercourse with a patient and outlines that sexual abuse also includes touching or making comments of a sexual nature towards a patient.

This means a naturopath is not allowed to:

- have sex of any form with a patient;
- touch a patient in a sexual way;

- make comments of a sexual nature or behave in a sexual way towards a patient; or
- have an intimate personal relationship with a patient.

## HOW TO RECOGNIZE SEXUAL ABUSE

Because of how sexual abuse of a patient is defined in the law, it is hard to describe exactly the kinds of actions that might be seen as sexual abuse of a patient.

The list below includes some examples of actions or behaviours that are likely not okay on the part of the naturopath. These behaviours can be obvious or subtle, and words can be as damaging as actions.

Contact the College if you experience any of the following with your naturopath:

- Any unwanted sexual attention or behaviour, for example kissing or hugging in a sexual way.
- Sexual touching, for example touching your buttocks, breasts, genitals or any other part of your body in a way that is not needed for assessment or treatment.
- Sexually suggestive or seductive remarks, for example, comments about your sexual relationships or sexual orientation, or inappropriate sexual remarks or questions about your appearance or clothing.
- Sexually insulting or offensive comments or jokes.
- Not asking for permission before touching you.

### WHAT IS OKAY TOUCHING?

Naturopaths may use their hands to touch parts of the body to learn more about your health condition or problem and to treat you. The College has rules that describe how naturopaths are expected to act in your best interest. When touching is part of your assessment or treatment you can expect that:

- The naturopath will tell you what they are going to do before touching you.
- The naturopath will ask your permission to touch you.

- You will be allowed to ask questions or talk about any concerns.
- You will feel respected.
- The touching will be needed for your treatment.
- You can tell the naturopath to stop the activity at any time if you feel uneasy.
- You can withdraw your consent or change your mind about the activity or treatment at any time.

What can you do if you feel uneasy during an appointment?

1. Tell the naturopath to stop.
2. Ask the naturopath to explain what they are doing and why they are doing it.
3. Refuse to continue with the session if you still feel uneasy or uncomfortable in any way.

### BOUNDARIES TO PREVENT SEXUAL ABUSE

The relationship between a patient and a health practitioner is a professional one. It is about a patient getting the care they need. This is called a therapeutic relationship. Patients trust their care to a naturopath because of their unique knowledge and skills. Patients should expect that the naturopath will respect their needs and act in a caring, respectful and professional manner.



**If a therapeutic relationship exists, naturopaths are not allowed to have an intimate personal relationship with a patient.** A naturopath should be friendly and polite, but should not develop an intimate personal relationship with you in or out of the clinic or practice setting, while you are a patient. This is considered sexual abuse, even if you agree to the relationship. The naturopath is the one responsible for creating boundaries with a patient. In fact, naturopaths cannot date or have an intimate relationship with anyone who is or has been a patient until at least a year has passed since that person stopped being a patient of the naturopath.

## WHAT TO DO IF YOU SUSPECT SEXUAL ABUSE

If you think you or someone you know has been sexually abused by a naturopath, please [email](#) or call the College at 416-583-6018 to talk about the options. Don't assume that someone else will report the naturopath. It is important for the College to investigate these situations to help protect the public. Accusations or complaints can be uncomfortable, but the College's role is to hold naturopaths accountable for their behaviour and its impact on patients.

## WHAT THE COLLEGE DOES

Every complaint we receive is fully investigated. This can be a difficult time and the College is committed to helping every patient navigate the situation as smoothly as possible. Please note that if you decide to file a formal complaint with us, you will need to give us your name. This is because we ask the naturopath to give us their side of the story, which we will then ask you to comment on once they have given it to us. This exchange of information is confidential and is handled by the College. You will not be expected to speak or have contact with the naturopath. Our website includes [more information about our complaints process](#) and what to expect.

Patients in Ontario are eligible for funding for therapy or counselling when it is alleged, in a complaint to the College or through a Registrar's investigation<sup>1</sup>, that they were sexually abused by a naturopath while they were the patient of one.

<sup>1</sup> A Registrar's investigation can happen when the College starts its own investigation when we learn about an issue or concern about a naturopath's behaviour or practice outside the formal complaint process. For example, concerns may come to our attention because of a criminal investigation, a report by another health care provider, or a story in the news.

# The College's funding program for sexual abuse

All health regulatory Colleges in Ontario are required to have a program in place that provides funding for therapy or counselling for people alleged to have been sexually abused by a Member of a regulated health profession while they were a patient of that practitioner. This applies to all members of Ontario's 26 regulated health professions, including naturopaths.

The parameters of the Funding for Therapy/Counselling Program are outlined in the *Health Professions Procedural Code*<sup>1</sup> as part of the comprehensive set of rules that all health Colleges must follow to ensure that their Members provide services in a safe, professional and ethical manner.

## About the funding program

The College's Program is administered by the Patient Relations Committee. The Committee reviews and approves applications for funding based on the following criteria:

- Is there an allegation of sexual abuse in a complaint or report with the College against a Member?
- Was the applicant for funding a patient of the Member?
- Was the naturopath in question a Member of the College at the time of the alleged abuse?

If these criteria are met, the Patient Relations Committee approves the funding request.

The maximum funding available is the equivalent to the amount that OHIP would pay for 200 half-hour sessions of individual outpatient psychotherapy, which amounts to approximately \$16,000. The funding is available for five years from the date on which the person first received therapy or counselling that was funded by the College. It is paid directly to the therapist or counsellor.

Between May 1, 2018 and February 1, 2019 the Patient Relations Committee has received and approved 4 applications for funding and a total of \$5,264 has been accessed.

<sup>1</sup> Schedule 2 of the *Regulated Health Professions Act, 1991* (RHPA)

## THE COLLEGE'S FUNDING PROGRAM FOR SEXUAL ABUSE

On May 1, 2018 the *Protecting Patients Act* came into effect. This Act made amendments to the *Regulated Health Professions Act, 1991* (RHPA) in a number of ways, one of which being that it amended the eligibility for funding for therapy or counselling when a person **alleges** to have been sexually abused by a Member of the profession.

Before implementation of the *Protecting Patients Act*, a person was only eligible for funding after a panel of the Discipline Committee found that a person, while a patient, was sexually abused by a Member. Now, individuals can access funding for therapy as soon as a complaint or report is made alleging that they were sexually abused by a Member while a patient. Approval of funding in no way implies a finding against the health professional about whom the allegations are made.

### Applying for funding

[Our website includes an application for funding](#) as well as other details for patients and the public about the Program.

### Who pays for the funding?

Like all activities undertaken by the College, funding for the Therapy/counselling Program is paid for by Member fees. Section 85.7 (12) of the Code outlines that the College is entitled

to recover monies paid in accordance with the program from the Member involved in a specific case. However, in order to recover those funds, the Member must have been found to have committed an act of sexual abuse by a panel of the Discipline Committee and as outlined in the Discipline Summary/Registrar's Letter. Due to a variety of legal circumstances, it is not always possible for the College to recover these funds.

Some College Members have expressed curiosity about why their fees would go toward paying for a fund that covers behaviour they would never engage in. The nature of professional self-regulation requires that all members of a profession hold collective responsibility for the conduct and behaviour of their colleagues.

We recognize that most naturopaths in Ontario will likely never be alleged to have committed sexual abuse. However, overall responsibility for the profession is part of the social contract that a self-regulated profession enters into with society to ensure it protects the public's interest over that of the profession. Member fees support the entire regulatory framework and functions that make this public protection possible.

## THE COLLEGE'S FUNDING PROGRAM FOR SEXUAL ABUSE

### Cessation of funding

The Code outlines that once funding has been granted, it can only be stopped if any of the following occurrences are met:

1. the maximum amount of funding (which amounts to approximately \$16,000) has been provided, or
2. five years have passed from the first date on which the person received therapy or counselling that was funded by the College.

At its January 2019 meeting, the College Council approved a draft regulation put forward by the Patient Relations Committee for submission to the Ministry of Health and Long-Term Care which would provide for additional situations where funding may be stopped.

The Draft Cessation of Funding Regulation includes two main provisions:

1. The first provision outlines three situations where funding for therapy/counselling may be ceased. These include:
  - a. Where a panel of the Inquiries, Complaints and Reports Committee (ICRC) makes a decision, other than a referral to a disciplinary hearing, with regards to allegations of sexual abuse. (This could occur when there are allegations of sexual abuse, but the ICRC does not refer the matter to the Discipline Committee, typically due to a lack of evidence to support the allegations.)
  - b. Where a panel of the Inquiries, Complaints and Reports Committee makes a decision to refer a matter to a disciplinary hearing but the allegations of sexual abuse are withdrawn.
  - c. Where a panel of the Discipline Committee hears a matter and does not make a finding of sexual abuse.

In all three situations, the information would be provided to the Patient Relations Committee, which may cease funding or decide that there are circumstances where funding should be continued.

2. The second provision outlines that the above three situations will apply to any funding applications that have been received by the College as of May 1, 2018.





# Moving Between Regulated Provinces

The College often receives questions about moving between provinces where naturopaths are regulated. This article provides an overview of how it works.

Key points to remember:

- The *Canadian Free Trade Agreement* (CFTA) promotes labour mobility between provinces and territories.
- In the context of naturopaths, it applies only to individuals who are already registered/licensed by a Canadian naturopathic regulatory authority.
- It only applies to a certificate of registration and does not necessarily apply to post-registration certifications.
- It is not a transfer but an application for registration using the CFTA mobility provisions.
- It does not apply to anyone who is not already registered, i.e., naturopathic students or graduates.

## LABOUR MOBILITY

Labour mobility means “the ability of certified workers to practise their regulated occupation, throughout Canada, wherever opportunities to work in that occupation exist”<sup>1</sup>. The CFTA includes the same labour mobility provisions and requirements that were set out in the original agreement, the 1995 *Agreement on Internal Trade*.

The CFTA requires that certified workers must be recognized to work in another province or territory that regulates that profession without having to go through significant additional training, work experience, examination or assessment unless an “exception” has been filed.

At the time the original agreement was created, all professions were required to compare entry-to-practise requirements

## MOVING BETWEEN REGULATED PROVINCES

between the provinces. Those professions where there were seen to be significant differences, were required to register an exception under the *Agreement on Internal Trade*. No exceptions were registered for the naturopathic profession.

This means that naturopaths registered in one jurisdiction must be recognized in another jurisdiction without significant “barriers.”

### REQUIREMENTS THAT CAN BE APPLIED

Since no formal exception between entry-to-practise requirements for naturopaths has been filed, the entry-to-practise requirements are deemed to be essentially the same. However, provinces and territories are permitted to evaluate an application for such things as good character requirements and to require additional training in areas such as jurisprudence.

### THE PROCESS IN ONTARIO

Naturopaths seeking to move between provinces where the profession is regulated must make an application to the new jurisdiction. In Ontario, the application process asks an applicant whether they are applying under the provisions of the CFTA. If they are, the non-exemptible application requirements, such as educational and examination requirements, are deemed to be met.

Applicants must complete the full application and answer questions and make declarations surrounding their character. They are also required to complete the Jurisprudence

exam, which is an on-line learning module that ensures an understanding of the rules governing the profession in Ontario.

An application from an individual who is already registered in another jurisdiction can be processed very quickly by the College of Naturopaths of Ontario. That said, when the application provides information that may suggest concerns about the ability of the naturopath to practice safely and ethically, the Registrar may refer the applicant to the Registration Committee for further consideration.

For example, an applicant who discloses that they were found guilty of a criminal offence while they were registered in their original jurisdiction may be referred to the Registration Committee for review. The Registration Committee will review information provided by the applicant and determine whether they believe the offence is an indication that they will not practice safely and ethically. The Registration Committee then directs the Registrar to either not register the applicant; register the applicant with certain terms, conditions or limitations (TCLs) on their certificate; register the applicant after additional education or training relating to the concern identified during the review; or they direct the Registrar to issue a certificate of registration.

### WHERE TCLs CAN AND CANNOT BE APPLIED

Although the profession is substantially the same across Canada, there are some

## MOVING BETWEEN REGULATED PROVINCES

differences. For example, a naturopath originally registered in BC may not have been educated and tested in acupuncture. Under the CFTA, Ontario is not permitted to place a limitation on the applicant's certificate of registration prohibiting the performance of acupuncture. We do, however, caution the applicant that they will need additional education and training before actually practising acupuncture to ensure they have the knowledge, skill, and judgement to practise this controlled act safely and competently.

On the other hand, if the naturopath had a term, condition or limitation on their certificate of registration in the original jurisdiction, that same TCL can be applied in the new jurisdiction. For example, a naturopath in Alberta who is not permitted to perform internal examinations would, upon registration in Ontario, have the same limitation placed on their certificate here.

### POST-REGISTRATION CERTIFICATIONS

The CFTA obligations apply only to the original certificate of registration. They do not apply to any certifications obtained after initial registration. For example, the certification of a naturopath in Ontario who has met the IVIT standard of practice (certification) may not be recognized by another regulated province in Canada. That is at the discretion of each jurisdiction.

In Ontario, the College recognizes prescribing authority. A naturopath from another Canadian province (naturopathy is not currently

regulated in any territories, although that may be changing in the near future) who has successfully completed the BC Therapeutic Prescribing Course and Examination may have that certification recognized in Ontario, depending on the timing. However, the College does require that the new applicant complete the Ontario Jurisdiction module within our therapeutic prescribing course. No further examination is required.

### FINAL THOUGHTS

Labour mobility seems to be a fairly straightforward and simple concept. Having read this article, you may agree that it is anything but simple and straightforward. Not surprising when we are considering legal aspects of an agreement that are embedded in different pieces of legislation across Canada.

To reassure all naturopaths in Ontario and across Canada, we can say with certainty that very few applications for registration get sent to the Registration Committee for review based on good character concerns. When you consider the small number of applications coming under the CFTA, that number is virtually zero. Most naturopaths are of good character and practise ethically and safely. For that reason, the likelihood of an application not being accepted under the CFTA in Ontario is very, very small. We believe that the same is absolutely true in the other regulated jurisdictions in Canada.

<sup>1</sup> <https://www.cfta-alec.ca/labour-mobility/>

# Mandatory Reporting Requirements



Patients trust their health care provider to protect their interests and provide safe, competent care. This expectation is supported by requirements for mandatory reporting, which is one of the ways Ontario's health regulatory Colleges achieve their mandate to protect the welfare and safety of the public. It is also a legal obligation that all regulated health professionals in the province must adhere to.

**This article is a comprehensive resource that outlines mandatory reporting requirements for naturopaths, along with resources and instructions on how to report.**



## MANDATORY REPORTING REQUIREMENTS

The legislated obligations\* of a Member to report include:

- sexual abuse of a patient by any regulated health care practitioner (not just an ND),
- unsafe practice by any regulated health care practitioner,
- child and elder abuse or neglect,
- privacy breaches of a patient's personal health information,
- findings or charges against a Member,
- IVIT-related Type 1 and Type 2 occurrences,
- changes to a Member's personal and practice contact information, and
- changes in professional liability insurance information.

Once a College or other applicable organization becomes aware of an issue, it can investigate the matter and determine the most appropriate course of action to protect the public. Making a report is not to "get a member in trouble", but rather is a way of helping to ensure that all regulated health professionals are accountable for their conduct and for providing safe, competent and ethical care to their patients.

Because mandatory reporting is a vital component of protecting the public, it is considered professional misconduct if a Member fails to comply with any of their reporting obligations. If a College becomes aware of such a failure, it can investigate the matter. Failure to make a mandatory report is an offence outlined in section 93 of the Health Professions Procedural Code, punishable with a fine of up to \$25,000 for a first offence. We say this not to create fear but to reinforce the seriousness with which the government, regulators, and their professional members view this responsibility.

The following table summarizes Members' obligations for mandatory reporting. If you are not sure if you are required to report information that is not included below, please check with the appropriate organization. Members are strongly encouraged to access all the available resources to be fully aware of their duty to report.

\* As outlined in the *Regulated Health Professions Act, 1991* (RHPA) and the *Personal Health Information Protection Act, 2004*, as well as in the College's Bylaws and regulations.



# Mandatory Reporting Requirements

SELF-REPORTING TO CONO			
WHAT TO REPORT	WHEN TO REPORT	HOW TO REPORT	RESOURCES
<p>You are authorized to practice another regulated profession in addition to naturopathy.</p>	<p>As soon as reasonably possible but no longer than 30 days from the date of the occurrence</p>	<p>Submit the <a href="#">Self-Reporting form</a> to the College (instructions are on the form)</p>	<p><a href="#">Mandatory Reporting Guidelines</a></p> <p><a href="#">Regulated Health Professions Act, 1991</a></p> <p>College <a href="#">By-laws</a></p>
<p>You are registered with any other naturopathic regulatory body in any jurisdiction outside Ontario.</p>			
<p>There has been a finding of professional misconduct or incompetence made against you by another regulatory body in any jurisdiction.</p>			
<p>You have been given a caution or specified continuing education or remediation program (SCERP) by a body that governs a profession inside or outside Ontario.</p>			
<p>You have been charged with an offence. This includes receiving speeding or parking tickets even if they have not yet been paid.</p>			
<p>There are findings of guilt, professional negligence or malpractice against you.</p>			
<p>There are bail or release restrictions currently in place.</p>			
PROFESSIONAL LIABILITY INSURANCE			
<p>You become aware that you do not have the required professional liability insurance.</p>	<p>Within 2 days of becoming aware of the lapse</p>	<p>Sign in to the College’s website and update your profile</p>	<p><a href="#">Registration Regulation</a></p> <p>College <a href="#">By-laws</a></p>
<p>The date of expiration of your professional liability insurance policy</p>	<p>Within 30 days of the effective date of the change</p>	<p>Sign in to the College’s website and update your profile</p>	



# Mandatory Reporting Requirements



College of Naturopaths of Ontario

REPORTING THE CONDUCT OF OTHERS			
WHAT TO REPORT	WHEN TO REPORT	HOW TO REPORT	RESOURCES
Sexual abuse - if you have reasonable grounds, obtained in the course of practising the profession, to believe that a member of any regulated health profession has sexually abused a patient.	Within 30 days, or immediately if the Member has reasonable grounds to believe that the member in question is an ongoing threat to patients	A report is submitted to the Registrar of the College of the member alleged to have committed sexual abuse	<a href="#">Mandatory Reporting Guidelines</a> <a href="#">Regulated Health Professions Act, 1991</a> <a href="#">Mandatory Reports</a>
Incompetence or incapacity - if you have reasonable grounds to believe that a member of a regulated health profession is incompetent or incapacitated.	Within 30 days, or immediately if the member has reasonable grounds to believe that the member in question is likely to expose a patient to harm or injury and there is urgent need for intervention	A report is submitted to the Registrar of the College of the member alleged to be incompetent or incapacitated	<a href="#">Mandatory Reporting Guidelines</a> <a href="#">Regulated Health Professions Act, 1991</a>
Unsafe practice - if you become aware of an incident of unsafe practice by a CONO Member.	Immediately	A report is submitted to the Registrar of the College of Naturopaths of Ontario	<a href="#">CONO – How to File a Complaint</a> <a href="#">Professional Misconduct Regulation</a>
Child abuse or neglect – if you have reasonable grounds to believe a child is being abused or neglected and is in need of protection.	Immediately	Contact your local <a href="#">Children's Aid Society</a>	<a href="#">How to Report Abuse</a> <a href="#">Ontario Association of Children's Aid Societies</a>
Elder abuse – if you have reasonable grounds to believe a resident of a long-term care home or a retirement home has been or might be harmed.	Immediately	Make a report to the Retirement Home Regulatory Authority	<a href="#">Elder Abuse Ontario</a>
REPORTING PRIVACY BREACHES			
If you are aware of the loss, theft or unauthorized use or disclosure of personal information.	<p>Inform the patient and the Privacy Commissioner at the first reasonable opportunity</p> <p>Report annually to the Privacy Commissioner beginning March 1, 2019 for breaches that occurred in 2018.</p>	<p>Notify the patient(s) whose information has been breached</p> <p>Submit the <a href="#">Privacy Breach Report form</a> to the Information and Privacy Commissioner of Ontario</p> <p>Submit annually on March 1st via the <a href="#">Online Statistics Submission Website</a></p>	<a href="#">Personal Health Information Protection Act, 2004</a> <a href="#">Reporting a Privacy Breach to the Commissioner</a> <a href="#">Privacy Breach Protocol</a> <a href="#">Annual Reporting of Privacy Breach Statistics to the Commissioner</a>



# Mandatory Reporting Requirements

IVIT TYPE 1 AND TYPE 2 OCCURRENCES			
WHAT TO REPORT	WHEN TO REPORT	HOW TO REPORT	RESOURCES
Type 1 Occurrence as listed in the General Regulation (e.g., referral of a patient to emergency services with 5 days of receiving IVIT)	All Members who become aware of an occurrence are required to make a report within 24 hours of learning of the occurrence	Submit the Type 1 Occurrence Report form to the College by mail, email or fax	<a href="#">General Regulation</a> <a href="#">Type 1 Occurrence Report form</a> <a href="#">Inspection Program Handbook</a>
Type 2 Occurrences as listed in the General Regulation (e.g., adverse drug reactions occurring in a patient after receiving IVIT)	The designated member for every IVIT premises must submit by May 1st for the reporting period from March 2 of the previous year to March 1 of the current year	Submit the Type 2 Occurrence Annual Report form to the College by mail, email or fax	<a href="#">General Regulation</a> <a href="#">Type 2 Occurrence Annual Report Form</a> <a href="#">Inspection Program Handbook</a>
PERSONAL INFORMATION			
Changes to your personal and practice location and contact information.	Within 30 days of the effective date of the change	Sign in to the College's website and update your profile	College <a href="#">By-laws</a>

# Workplace Sexual Harassment



This article focuses on a complaint related to workplace sexual harassment and will assist Members in recognizing their responsibility in understanding how their behaviour may be perceived by others, especially those in their professional and practice-related relationships where there is an inherent power differential due to the Member's role as a naturopathic doctor or an employer.

By law, cases under investigation are confidential; therefore, details of the case below have been altered to respect confidentiality.

## SUMMARY OF THE COMPLAINT

The College of Naturopaths of Ontario received a complaint alleging that a Member sexually harassed their employee (the Complainant), a registered practical nurse, while they were employed by the Member's clinic. When the Complainant asked the Member to stop the harassment, they were fired.

Prior to filing the complaint with the College, the Complainant had filed a complaint with the Human Rights Tribunal of Ontario (HRTTO). The HRTTO found the Member to have breached the Complainant's right to employment that was free from discrimination and harassment contrary to the [\*Human Rights Code\*](#).



## ICRC CORNER

Further, it was found that once the Complainant indicated they would no longer tolerate the Member's sexual behaviours, the Member deliberately set out to create a record of errors in the Complainant's performance, and then without further notice of any errors terminated the Complainant.

The Complainant also alleged that the Member improperly delegated the act of Intravenous Infusion Therapy (IVIT) prior to July 1, 2015. During that period, registrants of the Board of Directors of Drugless Therapy – Naturopathy (our predecessor organization) were not authorized to delegate a controlled act. However, the Member allegedly told the Complainant that they were protected from liability under their license.

The allegation related to delegating a controlled act to a nurse will be analyzed in the next issue of *iNformeD*.

## OUTCOME

The Inquiries, Complaints and Reports Committee (ICRC) believed that the issue of sexual harassment and wrongful dismissal was serious enough to refer to the Discipline Committee. Nevertheless, the Panel decided that it would be in the best interest of the public to order an immediate and efficacious remedial program and oral caution. The ICRC required the Member, at their own expense, to successfully complete the following Specified

Continuing Education and Remediation Program (SCERP):

1. Successfully and unconditionally complete "Probe: Ethics and Boundaries Program – Canada".
2. Complete a written report of 1,000 words minimum on the regulations regarding delegating controlled acts as well as the requirements of a medical directive. The report must include a description of the concerning conduct and how the Member will change their conduct moving forward.
3. To demonstrate competency, the Member shall undergo an inspection of 10-15 patient records.

Additionally, the Member shall appear before a panel of the ICRC for an Oral Caution.

## ANALYSIS

The [\*Occupational Health and Safety Act\*](#) defines workplace sexual harassment as:

- (a) engaging in a course of vexatious comment or conduct against a worker in a workplace because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or

## ICRC CORNER

(b) making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement to the worker and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

Workplace sexual harassment encompasses a wide range of unwelcome conduct of a sexual or gender-related nature including, but not limited to:

- verbal comments,
- unreasonable solicitations, and
- gestures or physical conduct.

Employees who are subject to sexual harassment have a variety of options available to them, including a human rights claim, a lawsuit, or statutory complaints to professional regulators.

The College considers allegations of workplace sexual harassment to be very serious. The [Professional Misconduct Regulation](#) made under the [Naturopathy Act, 2007](#) states that the following are acts of professional misconduct for naturopaths in Ontario:

- Contravening, by act or omission, a law, including the [Occupational Health and Safety Act](#) and the [Human Rights Code](#), if the contravention is relevant to the member's suitability to practise;

- 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 disgraceful, dishonourable or unprofessional;
- Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession.

The ICRC noted that a finding of the HRTTO was not akin to a finding of guilt from a court of law. Nevertheless, the ICRC was cognizant that the HRTTO finding is publicly available, and that the Member was clearly identified as a naturopath in the decision. The ICRC noted that the public must have confidence that Members of this College do not engage in such behaviour.

In considering this matter, the ICRC was particularly concerned with the fact that the Member's actions appeared to be part of a pattern of conduct and not an isolated event, given that the harassment occurred over the course of almost a year.

The key issues identified by the ICRC among the alleged comments or behaviours by the Member that could be deemed as sexual harassment included:

- Telling the Complainant that they were attractive.
- Offering to take the Complainant out for lunch and drinks, while seemingly this was unlike the Member to treat an employee to lunch.

## ICRC CORNER

- Making unnecessary physical contact, including but not limited to hugging the Complainant or holding their arm during a conversation.
- Change of the Member's behaviour towards the Complainant, when the latter told the Member to stop touching them.

The ICRC did believe that the issues were serious enough to refer for a disciplinary hearing. However, the ICRC decided to take a remedial approach in the interest of the public and opted for the Member to receive a caution and undergo a vigorous and efficacious SCERP, which would directly address the issues under review.

### BOTTOM LINE

The College's [\*Code of Ethics\*](#) states that naturopathic doctors have an obligation to act in a manner that justifies public trust and confidence, that upholds and enhances the integrity of the profession, that serves the interests of society and above all, that safeguards the interests of individual patients. Every naturopath is required to behave in a manner that is beyond reproach and treat colleagues with dignity and respect.

When acting as clinic owners or employers, naturopaths have a legal duty to take steps to prevent and respond to sexual harassment. This can be done by educating staff on human rights issues and informing them about the steps in place to resolve any complaints related to sexual harassment. A sexual harassment policy should be developed in order to limit harm, promote equity of employment, and ensure that staff can perform their duties effectively and focus on efficient patient care.

The College's [\*Code of Ethics\*](#) states that naturopathic doctors have an obligation to act in a manner that justifies public trust and confidence, that upholds and enhances the integrity of the profession, that serves the interests of society and above all, that safeguards the interests of individual patients.

## STUDENTS' CORNER

## New Entry-to-Practise Exams FAQs

Following are answers to some of the questions we are asked about most often.



### 1. Do exam candidates need to pay a deposit to register for an exam?

The College does not require deposits for its examinations. The [Examinations Policy](#) outlines how the College handles examination fees, including when a student is unable to sit an exam for which they have already registered and paid.

### 2. Does the College give refunds when someone registers for an exam and does not take it?

In keeping with policies for all College exams, refunds are not provided. The College does, however, accept requests for deferral where a credit of the amount paid will be applied to the next regular sitting of the exam by a candidate. In the event that a candidate does not sit the next regularly scheduled sitting of an exam, the exam fee paid will be forfeited.

### 3. Do exam candidates need to provide the College with release forms similar to those required by NABNE?

No.

### 4. What kind of study materials and guides are available?

The College is finalizing a list of items which, when used in combination with the exam blueprint, will support students in studying for the exam.

We are also creating a more detailed exam handbook, which we anticipate will be available in the next few months. We remind students that – like NPLEX II - the new Clinical Sciences Exam tests the foundational entry-level competencies required of all naturopaths in Canada.

## STUDENTS' CORNER

### 5. Would the August exam date accept students finishing in August if all numbers were met (other than hours)?

Candidates must have met all requirements for graduation (or have been deemed substantially equivalent through PLAR) to be eligible to sit the exam.

### 6. How long after writing the exam can we expect results to be mailed?

Candidates are sent results four weeks from the date of the exam. Information on important dates for the new Clinical Sciences exam are available in the [online Exam Schedule](#).

### 7. Is there any consideration given to shift the timing of the exams to allow students with different schedules, such as part-time students, to be able to register with NPLEX I after April 1, 2019?

No. The College exists to protect the public. Having different exam completion deadlines for different scenarios and individual circumstances would have significantly delayed the launch of the new exams and would make it exceedingly difficult for the College to adhere to its legislative requirements.

Again, as part of its requirements, the College must ensure that both CNME-accredited candidates and PLAR applicants from other international jurisdictions have access to examinations that comply with the College's legislative requirements. Timelines were set to be fair both to those candidates mid-process but also to those wishing to sit the new examinations.

### 8. If a student was intending to do a residency through CCNM after they graduate but is from New Brunswick and looking to practice there afterwards, would she need to write CONO?

A post-graduate resident of Ontario must be registered with CONO in order to practise the profession in this province. In order to be eligible to practise in the province, a student would need to meet Ontario's entry-to-practise registration requirements, including the new exams (if after April 1, 2019).

We recommend that anyone interested in practising anywhere other than in Ontario contact the regulator (if applicable) in the other jurisdiction to determine their entry-to-practise requirements and associated costs.

### 9. Is there any way students who are completing second year can complete CONO biomedical sciences, or is it strictly prohibited until following graduation?

As outlined in the College's [Examination Transition Policy](#), both the Clinical Sciences and the Biomedical exams are post-graduation exams. This is specified in order to align with the two-year window that will allow students to apply for registration to practise in Ontario without having to be referred for assessment to the College's Registration Committee. Because the College's mandate is to protect the public, this helps to avoid any skill atrophy that may have occurred from the time the exam candidate learned a skill to when they took the exam.



## NEWS AND EVENTS

**New Entry-to-Practise Exam**

The first sitting of the new Ontario Clinical Sciences Exam will be June 27, 2019. [The link to access registration will be available on our website](#) when registration opens on May 13.

**Upcoming Exam Dates****May 5, 2019**[Ontario IVIT Exam](#)**June 23, 2019**[Ontario Prescribing and Therapeutics Exam](#)**Council meeting**

The next Council Meeting is scheduled for Wednesday, April 24, 2019 and is open to Members and the public.

Please phone 416 583-6010 or [email us](#) to register as an observer.

**Check out our recent blog posts**

[Andrew's Corner](#) is the blog of the College Registrar and CEO. Readers can participate by posting comments and sharing their thoughts. You can also [subscribe](#) to receive an e-mail when a new article is posted.

Read our latest posts below.

- [Naturopaths and Vaccinations](#)
- [Member Communications Survey Results](#)
- [Can a Member Offer Discounts to Patients?](#)
- [Who Files Complaints?](#)
- [Clarity on Cannabis](#)
- [You received a complaint - now what?](#)

**Volunteer**

Support the regulation of naturopaths in Ontario and volunteer! We are still looking for volunteers for a number of opportunities including various committee members and Examiners. [Read more](#) about each position and how to get involved.

**What do you think?**

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

TAKE SURVEY >