



PRESIDENT'S MESSAGE



It is my pleasure to inform the membership about a couple of recent, positive successes at the College.

The first is the announcement of the completion of the long outstanding goal of approval of the Drug Regulation Amendment. This Drug Regulation has been before the Ministry of Health (MOH) since 2014. With the pending June provincial election, the College was advised by the MOH that, as per standard practice, all legislation had to be brought before the Legislative Branch of the government by February 18 if it was to have any chance of being approved before the government ceased all legislative activity, going into what is termed as the "Caretaker Mode". With this hard deadline set, the Standing Drug Committee and Registrar worked fervently to satisfy the Ministry representatives that the drug category requests on behalf of the membership were justified, necessary and in the public interest. Suffice it to say that this achievement came to fruition because of the earnest good intentions and hard work of our College's representatives, along with those of the Ministry representatives. The implementation date presented to the MOH by the College is January 1, 2023. This will allow adequate time for the College to perform an assessment of the prescribing competencies of the membership commensurate with best practices and protection of the public as the fundamental guiding principle. In keeping with the above referenced government's timeline, the Drug Regulation is now being re-drafted by legal counsel so that it can be presented to Council for consideration, and hopefully approval, in the very near future at a Special Meeting called expressly for that purpose. I wish to convey once again my heartfelt thanks to my fellow committee members of the Standing Drug Committee and the Registrar for all their efforts in getting this task across the finish line. Lastly, I wish to also take this opportunity to thank the Ministry representatives for their cooperation and assistance in completing this endeavour.

The second achievement pertains to the establishment of a profound Vision and Mission statement for our College that clearly sets out as an objective the pursuit of a full-scope Podiatry Model of foot care delivery for Ontario. Consistent with the College's historically adopted position, this pursuit seeks to obtain for the benefit of the citizens of Ontario, a model of foot care scope of practice no less than the highest standard available elsewhere in Canada. It would permit our members to better serve citizens through both an expanded anatomic scope and also through an expanded diagnostic and treatment scope of practice. These competencies would ideally be achieved through an accredited, Ontario based post-graduate university that also houses a Faculty of Medicine. This elevated educational program would train graduates to the desired entry level to practice of DPM-equivalency. This podiatry program would, by necessity, include many diverse and robust externship placements across the spectrum of disciplines of medicine, as well as post graduate residency requirements to obtain the appropriate competencies required for the full-scope podiatry practice. The credentials of these graduates would be recognized and accepted nationally and internationally. I wish to clarify at this juncture that the expanded scope of these podiatrists is not one purely with a surgical focus. Rather it is a quantum



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progression in education as it pertains to the pre-requisite medical skills and training as required to be able to derive the appropriate diagnoses before formulating treatment plan options for a given patient's lower extremity concerns. Given that the training would be acquired here in Ontario, alongside that of medical doctors, it would be a natural point of access of these podiatrist graduates into our province's health care delivery paradigm. It would confer to these graduates' privileges such as the ability to requisition all necessary tests and studies, as well as to be able to refer directly to other medical specialists in an expeditious and cost-effective manner. As podiatrists do in other jurisdictions, these podiatrists could be employed in hospitals as part of limb salvage teams. They could serve to take emergency calls at local hospital ERs or because of their unique training and skill set, they could be mobilized to serve regularly in remote corners of our province attending to the urgent, yet longstanding, needs of at-risk populations in those settings. What I speak of here is not pie-in-the-sky dreaming. Admittedly, it is a quantum leap forward in evolution from the foot-care services the citizens of this province have experienced to date, but this type of podiatry is in the best interests of the public and assures the greatest degree of public protection. Importantly, what I have described above capably, and cost effectively has served and continues to serve citizens in other jurisdictions. We are limited only by our own personal inability to envision what is possible. Furthermore, we must be selfless in pursuing this objective for those who are suffering and in great need; those who expect the best from us in doing all that we can to bring them a measure of comfort in pursuit of an improved quality of life.

Respectfully,

Peter Stavropoulos, DPM
President