

Bulletin



SUMMER 2005

Volume 18 Issue 1

Message from Bruce Ramsden, President

I am honoured to have been voted in as President of the College of Chiropractors of Ontario. Serving on our College Council over the past three years, I have witnessed a growth of the College into a more stable environment due mainly to the strength and experience of our current Registrar, Felecia Smith, and the leadership of our immediate past-President, Laura Lee Kozody. I intend to continue this leadership and focus my energies on a successful outcome for our Drug Regulation Submission, moving forward to create a Podiatry profession, and through the processes of the Internal Trade Agreement and the creation of a mechanism for our Podiatry/Chiropractic class members, to move freely across Canada.

The College wishes to acknowledge and thank both associations for their tireless efforts and hard work in creating a platform for this dream to become a reality.

More recently, the College has been working hard to facilitate changes to the *Red Tape Reduction Act* which will enable our College to function more efficiently and adapt to current changes and needs of the College. This legislation allows the College to revoke certain regulations governing administrative processes and replace them with by-laws. These necessary steps will provide our College with greater autonomy and efficiency and the ability to better serve and protect the needs of the public.

The AIT process is gaining new life after a year-and-a-half hiatus and the infusion of new Federal government funding. The process is set to begin in the new year and it is our goal to ensure some reasonable measure of mobility for our Podiatry/Chiropractic class members to move across this country while ensuring that only competent practitioners are allowed to serve the Canadian public.

We have all been given the awesome responsibility of caring for the best interests of the health of the Ontario public who depend on us to improve the quality of their lives. Working together will ultimately serve our common goals.

The Memorandum of Understanding which was signed by our two recognized Associations, the Ontario Society of Chiropractors and the Ontario Podiatric Medical Association, will be used as a guide as the College moves forward to serve the best interests of the public.

Communication with our registrants is of primary importance to us. Please save these bulletins and use the information contained in them as a resource and a guide in managing your practice. Please visit regularly the newly enhanced College website at www.cocoo.on.ca for more current and timely information.

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PODIATRY MODEL OF PRACTICE

Important Information

At its May 27, 2005 meeting, Council unanimously approved the following motion:

We agree to one title podiatrist, with terms, limitations and conditions, where applicable, with academic courses in place to upgrade to the DPM level or equivalent and the removal of the podiatric cap.

The terms, limitations and conditions refer to a member's licence to practice. The current implementation team consists of members of Council. The team will explore all of the issues that need to be reviewed in bringing this motion to a reality. The process undertaken will include a thorough, transparent, logical and well-thought out approach. Our members and stakeholder groups will all be consulted when the Council has approved a plan and worked out implementation issues.

This most recent motion followed from the meeting of October 1, 2004, wherein Council had agreed:

1. THAT the College of Chiropractors of Ontario agrees to move the direction of foot care in Ontario towards a podiatry model of practice.
2. THAT representatives of the College, as determined by the Executive Committee, be directed to meet with representatives of the Ministry to explore the feasibility of this change; and
3. An implementation team (ad hoc committee) be composed (by the Executive Committee) to investigate and report to Council on the implementation issues that would need to be addressed, along with its recommendations for making the broad-based principles a reality.

In April 2005, the implementation team [as it then was] held a meeting facilitated by a third party facilitator. The purpose of the meeting was to create a 'next steps' plan and to discuss the issues surrounding this potential change including obstacles and desirable outcomes. We will keep you informed as matters progress.

DRUG REGULATION

UPDATE

The College continues to work with the Ministry of Health and Long-Term Care in moving forward with the drug regulation. There are many required steps in the approval process. The College is continuing its dialogue with the Ministry in terms of discussing the schedules of drugs that forms part of the regulation and their direct link to the scope of practice and authorized Acts found in the *Chiropody Act*, 1991. At the Council meeting in May 2005, a motion was passed to circulate the revised drug regulation. Each member of the College will soon receive a copy of the regulation and will be asked to comment on its content.

If you have any questions concerning the drug regulation, please contact the college.

Michener Chiropody Program

In March 2005, the College was informed by the Michener Institute for Applied Health Sciences, that it “has made the difficult decision to suspend the Chiropody diploma program for fall 2005. The one-year suspension is to enable the Michener to work with the stakeholder communities to ensure that the curriculum reflects the competency profile for the practice of Chiropractors in Ontario.”

In May 2005, the Michener arranged for a consultation meeting with stakeholders.

Dr. Gamble, President & CEO of the Michener, was present to provide a full explanation for the rationale for suspending the program. He explained that one of the major reasons for suspension of the program was the discontinuation of available financial funding at the chiropody clinical teaching sites. Dr. Gamble indicated that the Michener must make a final decision about the future of the program by December 2005. The work of the stakeholder group must be completed in advance of this time period.

The immediate next step that was agreed to at the meeting was that the Michener would conduct a needs analysis study for foot care in Ontario. Key stakeholder groups would provide their input.

Closing of Chiropody Clinics in Hospitals

On November 24, 2004, Bruce Ramsden, President, sent the following letter on behalf of the College to the Honourable George Smitherman, Minister of Health and Long-Term Care, relating to the closing of hospital chiropody services:

Dear Minister Smitherman:

Closing of Hospital Chiropody Services

Over the last several months there have been a significant number of hospitals that have closed their chiropody clinics. These have included the Trillium Health Centre, Scarborough General Hospital, Centenary Hospital (October 2004), St. Joseph Hospital, Peterborough. The College has received a multitude of calls from members of the public who have been directly affected by these closings and are very concerned about their access to future foot care. The callers have unequivocally supported the high standard of care they have received from the chiropodists and podiatrists who have cared for them at the clinics. High risk patients rely on these hospital clinics for their foot care. Many are seniors on fixed incomes who are unable to pay for private services. Most often they are diabetics, which greatly increase the magnitude and severity of their problems. These people are in desperate need of assistance and have nowhere to go to receive proper health care for their feet because there are no publicly funded clinics within their geographical location.

The College is willing to assist members of our community on fixed incomes who rely on chiropodists and podiatrists for their regular foot care to readily access these services. We are hopeful that a plan will be forthcoming to help deal with and alleviate the medical problems members of our Ontario community are experiencing as a result of these clinic closings.

We would be pleased to discuss the matter further. I can be reached through the College.

Extracorporeal Shock Wave Therapy

Guideline for the Profession

On October 1, 2004, Council approved the following guideline dealing with extracorporeal shock wave therapy. This guideline was created in response from a number of inquiries from our members and third-party providers:

The Policy

The Regulated Health Professions Act, 1991

The College has received several inquiries from insurance companies about whether members are allowed to use extracorporeal shock wave therapy in their practice.

Members are referred to section 27 of the *Regulated Health Professions Act, 1991*. Paragraph 7 of section 27(2) deals with the controlled act of “applying or ordering the application of a form of energy prescribed by the regulations under this Act.” Unless a person is a member authorized by a health profession Act to perform a particular controlled act, or a member who is authorized to perform the controlled act has delegated the performance of the controlled act to the person, it cannot be done. The only exemption for members of this College is the application of electricity for electrocoagulation or fulguration.

Regulation 107/96 of the *Regulated Health Professions Act, 1991* section 1 states that:

The following forms of energy are prescribed for the purpose of paragraph 7 of subsection 27(2) of the Act:

1. Electricity for,
 - i. aversive conditioning
 - ii. cardiac pacemaker therapy
 - iii. cardioversion
 - iv. defibrillation
 - v. electrocoagulation
 - vi. electroconvulsive shock therapy

- vii. electromyography
- viii. fulguration
- ix. nerve conduction studies, or
- x. transcutaneous cardiac pacing.

2. Electromagnetism for magnetic resonance imaging.
3. Soundwaves for,
 - i. diagnostic ultrasound, or
 - ii. lithotripsy.

Members are therefore not allowed to use diagnostic ultrasound or lithotripsy equipment. Members must ensure that any equipment used for the treatment of patients in their office does not contravene the Act and Regulations.

Red Tape Reduction Act

The purpose of the *Red Tape Reduction Act, 1998* was to allow Colleges to move certain existing regulations into by-law. The regulations related to such matters as the election of Council members, Committee Composition and fees. Once in a by-law, College Council could make amendments without the approval of government. This streamlined the process and made it easier for Colleges to deal with many administrative matters. This College had not previously dealt with the required legislative amendments under the *Red Tape Reduction Act, 1998*. However, at their January 28, 2005 meeting, Council passed the necessary motions to allow the revocation and amendments to current regulations and the subsequent approval of the by-laws. This material has been forwarded to the Ministry of Health and Long-Term Care so that legislative approval may be given to the proposed changes.

Ontario's New Privacy Legislation

Personal Health Information Protection Act (PHIPA)

Here's what health professionals are asking about Ontario's new health privacy legislation

(By Ann Cavoukian, Ph.D., Information and Privacy Commissioner/Ontario)

Since the *Personal Health Information Protection Act (PHIPA)*, came into effect on November 1, 2004, my office has received more than 3,000 calls and e-mails from professionals in the health sector with questions regarding the implications and implementation of *PHIPA*.

One of the most common questions over the past few months has been: “***Why is PHIPA necessary when we already have the federal Personal Information Protection and Electronic Documents Act (PIPEDA)?***”

While the federal *Act* was designed to regulate the collection, use and disclosure of personal information within the commercial sector, *PHIPA* establishes a comprehensive set of rules about the manner in which personal health information may be collected, used, or disclosed across Ontario's health care system. *PIPEDA* was never designed to address the intricacies of personal health information.

In the near future, I anticipate seeing a final exemption order recognizing the substantial similarity of Ontario's *PHIPA* to the federal *PIPEDA*, so that health information custodians covered by *PHIPA* will **not** also be subject to *PIPEDA*.

We have received queries that cover a wide range of scenarios under *PHIPA* – issues that range from the extent of patient information being shared between *health information custodians* to whether a parent can obtain information about what prescriptions his/her daughter is obtaining from a pharmacy. Here is a short sampling of the questions we have received since *PHIPA* came into effect.

One caller was a physiotherapist who works at a health club and who shares patient information with non-regulated health professionals. He wanted to know if staff, such as personal trainers and fitness instructors, would be considered *health information custodians* and if he would need to get written consent from patients to share their information with such staff members.

Our response was that, generally, the non-medical staff of a health club would not be considered to be *health information custodians*. The *Act* requires that consent to the disclosure of personal information by a *health information custodian* to a *non-custodian* must be express, and not implied. The physiotherapist would need express consent to pass on personal health information to staff such as personal trainers and fitness instructors. (As well, a *non-custodian* who receives personal health information from a *custodian* may, in general, only use that information for the purpose for which the *custodian* was authorized to disclose the information). Obtaining consent at the beginning of the process would enable the physiotherapist to share information as needed with his co-workers.

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The manager of a long-term health care facility wrote us to ask if physicians who have admission privileges and are contracted for medical services – but who are not staff – should be asked to sign confidentiality agreements the same as staff, volunteers and other agents.


While *PHIPA* does not contain any provisions that relate specifically to a requirement to sign confidentiality agreements, it does state that *health information custodians* are required to take steps that are reasonable to protect the personal health information in their custody. Additionally, *PHIPA* also states that a *custodian* is required to handle records in a secure manner, so having confidentiality agreements in place is just one of the steps that *custodians* could take to help protect the information in their custody.

In this specific instance, the physicians that are contracted to provide services in the facility would likely be considered agents of the facility. Under *PHIPA*, the *custodian's* contact person is required to ensure that all agents of the *custodian* are appropriately informed of their duties under the law, which may include the signing of confidentiality forms.

One of the more challenging questions was from a pharmacist who wanted to know what his responsibilities were in a case where the cardholder of a prescription drug plan wanted to know the details of drug usage by a family member covered under the drug plan. Would the family member need to give permission or sign a consent form?

This would be a case of disclosure of personal health information by a *health information custodian* to a *non-health information custodian*, which, generally, can only be done on the basis of express consent. Accordingly, a best practice would be to seek consent from the other family member or members who are covered under the cardholder's health plan. This is definitely the case if the information to be disclosed is that of an adult, such as a spouse, or children 16 or older. In the case of children under 16, information may be released without consent to the custodial parent, with *certain exceptions*. For example, if the child is capable and disagrees, then the child's decision prevails.

If you, or your office, have a question regarding the *Personal Health Information Protection Act, 2004*, please do not hesitate to contact us at info@ipc.on.ca. You can also find many useful publications about *PHIPA* on our website, www.ipc.on.ca.



Don't forget to vote!

ELECTION REMINDER NOTICE

On September 2, 2005, an election will be held in Districts 3 and 4. Ballots will be mailed on July 29, 2005. Please refer to the College website at www.cocoo.on.ca for more detailed information on the election process.

Green Shield's Preferred Provider Agreement

The College sought and obtained a legal opinion regarding the Green Shield's Preferred Provider Agreement. The opinion specifically dealt with the question whether the agreement contravened the *Competition Act*. The Act provides a number of administrative remedies aimed at insuring compliance with the Act. These remedies can be obtained by the Commissioner of Competition upon an application to the Competition Tribunal, the Federal Court (Trial Division) or the Superior Court of a province. The Commissioner may obtain a "cease and desist" order ordering the person not to engage in such conduct, requiring the person to publish or otherwise disseminate a notice in regard to the reviewable conduct or requiring payment of an administrative monetary penalty in the amount of \$50,000.00 for an individual and \$100,000.00 for a corporation.

The legal opinion concluded that the effect of limiting reimbursement in the Preferred Provider Agreement is to unduly lessen competition amongst providers who could service the interests of the public in the area of orthotic foot care. There was a strong recommendation that the College consider filing a complaint with the Competition Tribunal advising that the provisions of the Act have been contravened by the benefit provider. It would be up to the Competition Tribunal to conduct an investigation. A prohibition order could ensue preventing Green Shield from limiting remuneration/reimbursement from Green Shield beneficiaries over and above reimbursable amounts in the plan.

The College has shared the legal opinion with the Ontario Society of Chiropractors and the Ontario Podiatric Medical Association. The Associations will need to determine whether they will pursue this matter. At this point in time, the College will not be proceeding further.

Meeting with Manulife Financial Services

On February 28, 2005, representatives from the College, OSC, OPMA, CPMA, CFPM and representatives for chiropractors, pedorthists, physiotherapists and orthotists met at Manulife's offices in Kitchener. Manulife had requested these parties to attend to discuss orthotics and orthopaedic shoes and to help determine which profession was the most appropriate to prescribe, dispense and manufacture. The meeting was interesting and informative and representatives from the company asked very pointed questions about over utilization of orthotics and the use of incentives. Manulife was very clear that there were very serious concerns about the possible prevalence of over prescribing/utilization of orthotics, the forbidden use of incentives and fraudulent billings. Although not specifically stated, the continuation of current insurance coverage for orthotics, orthopaedic shoes etc. could be in jeopardy. The meeting provided a forum for an open and interesting discussion and an opportunity to hear from other service providers.

In May, as a follow-up to the meeting, Manulife sent a survey to all participants that included 88 questions requiring detailed information about custom made orthotics, orthopaedic shoes and off-the-shelf or stock orthopaedic shoes.

Manulife has not informed the College of any decisions with respect to who they believe should be able to prescribe, dispense and manufacture the products listed above.

Canadian Diabetes Educator Certification Program

This Canadian Diabetes Educator Certification Board is responsible for the development and administration of the certification examination for Certified Diabetes Educators in Canada. The mission of the Board is listed as: “To provide a process whereby eligible health professionals in Canada can become certified, maintain certification, and be recognized as diabetes education specialists promoting the national standards of care for individuals affected by diabetes.” A number of our member’s expressed a strong interest in becoming certified as a diabetes educator.

The first step in the process before individual members are able to write the certification exam is that the member must be registered with an ‘eligible professional regulatory body.’ Therefore, the regulatory body, or this College, must be first recognized and approved by the Board prior to the individual applying to be registered. In May 2005, a committee of interested professional members put together a submission asking that the College be recognized as a regulatory body whose members are eligible to write the certification exam. The College was thereafter advised by the Board that it plans to conduct an overall review of its eligibility requirements before making a determination with respect to the College’s application. The Registrar wrote to the Board asking that it deal with the College’s application even though there is a planned review.

Federation of Health Regulatory Colleges of Ontario Communications Strategies and Advertising Campaign

As a member of the Federation of Health Colleges, this College contributed financially to the advertising and communications initiatives undertaken by the Federation. You may have recently heard on the radio the advertisement about the 21 health regulatory Colleges in Ontario... information about this campaign is on the College’s website.

For more information on the workshop you may go to www.mediatedsolutions.ca and click the link on Courses and Workshops.

A communications workshop entitled *Implementing Effective Communication Strategies A Workshop for Health Care Professionals*, is a resource to enhance the knowledge, skills and judgment of regulated health care practitioners in effective communication strategies when interacting with the patient/client, family member/caregivers, peers, colleagues and/or organizations. The course is offered in two convenient half-day modules by Mediated Solutions Incorporated. This course is suitable for various continuing education and Quality Assurance requirements and results in a certificate of completion. **The College will recognize this course as a ‘Category A’ course for purposes of continuing education credits.**

College Plaque Award	College Council has unanimously supported the idea of providing a plaque of recognition for the President of the College when their tenure is completed, and for members who have dedicated their time and effort towards the College. At the Council meeting in May 2005, Laura Lee Kozody was presented with a plaque honouring her service, hard work and dedication during her tenure as President from 2002-2004. Chance Ng, past member of the Quality Assurance Committee, and Kim Resmer, past Chair of the Complaints Committee and current member, were both honoured and recognized for their hard work and extraordinary commitment while serving on their respective committees. Laura Lee and Chance attended the meeting in person to accept their award. Each year the Executive Committee will review and assess whether there are potential candidates who meet the criteria for the award.
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Orthotics and Shoes

Over the past year, the complaints committee has received a growing number of complaints regarding the use of orthotic sandals and shoes.

The problem with orthotic sandals, centres around whether or not they are custom made, and what process is used in their fabrication.

The problem with shoes, centres on their use as incentives and discounts when orthotics are prescribed.

In all cases, the question arises whether proper records have ever been kept, proper biomedical assessments have been performed and if the orthotic devices are appropriate for the condition being treated.

The College is aware that the fabrication of orthotic devices is not a controlled act, meaning that anyone can make the devices. However, when a member of the College prescribes a device and then submits it to an insurance company for payment, a higher level of responsibility applies. When discount coupons for shoes are given or shoes are given out if orthotic devices are purchased, the situation must be examined using our existing guidelines regarding advertising or conflict of interest.

We urge our members to continue to use the highest level of scrutiny regarding orthotic sandals and shoes, and carefully review the existing regulations and guidelines. In addition, if shoes are dispensed, prescribed or recommended, be careful not to offer incentives or promotions that could be seen to encourage the utilization of orthotic devices. For insurance purposes, shoes should be billed as separate items, so as not to be confused with the device itself.

The College is in the process of more clearly defining the guidelines under which orthotic sandals and shoes are to be utilized. If anyone wishes to provide input on this matter, please e-mail or write to the College with your comments.

Selling Shoes

Amendment to s. 3(g) of the Conflict of Interest Policy

The College received many inquiries from members regarding the Conflict of Interest Policy in relation to selling shoes. Members strongly felt that in order to be able to better assist their patients, it was important to be able to sell or supply shoes when and if necessary. In reviewing the issue from a public protection perspective, the College believed that if a product was medically necessary and required for the prevention, treatment or management of a disease, disorder or dysfunction of the foot, then members should be able to sell or supply the product. Since our members are oftentimes more knowledgeable about these products, they are better qualified to assist and advise the public.

The changes to s. 3(g) allows members to sell or supply a product that is medically necessary and is required for the prevention, treatment or management of a disease, disorder or dysfunction of the foot. The restrictions with respect to making a profit, the availability of the product at a drugstore, shoe or other retail setting and the fee not being excessive have all been removed.

The actual wording of the policy now states:

A member shall be deemed to be practising the profession while the member is in a conflict of interest where a member, or a related person or related corporation, directly or indirectly,

- (g) sells or supplies a product to a patient *unless*, the product is medically necessary and required for the prevention, treatment or management of a disease, disorder or dysfunction of the foot.

The College reminds members that as primary health care practitioners, they must conduct the selling of shoes in a professional manner and as an adjunctive medical treatment for those patients who require the product.

New Standard of Practice on Orthotics and Revised Standard of Practice on Infection Control

As posted on the College's website, in June 2004, Council approved a new Standard of Practice for Orthotics and updated and amended the Standard on Infection Control. If you have not already done so, you should review these two Standards of Practice at www.cocoo.on.ca.

two further audits may take place at the College's discretion over a further 12-month period. The costs of the audits will be born by Mr. Allison up to a maximum of \$400.00 per audit;

3. Mr. Allison's certificate of registration be suspended for a period of four months, with two months of the four months suspended due to mitigating factors, and the remaining two months to be served consecutively;
4. Mr. Allison to pay a fine of \$1000.00 to the Minister of Finance within 6 months of the date the Discipline Panel's decision is final; and
5. Mr. Allison to pay to the College \$3,000 in costs.

Discipline Digest

College of Chiropractors v David Allison

Summary of the Decision of the Panel of the Discipline Committee

This matter came on for hearing on August 30, 2004. The Discipline Panel considered the submissions of Counsel for the College of Chiropractors of Ontario and Mr. Allison. The Discipline Panel found Mr. Allison guilty of professional misconduct for failing to keep records as required by the regulations, submitting an account or charge for services that the member knew was false or misleading and for unprofessional conduct.

The Discipline Panel ordered the following penalty:

1. Mr. Allison was required to appear before the panel to be reprimanded;
2. The imposition of specified terms, conditions and limitations on Mr. Allison's certificate of registration, namely that he must submit to an audit of his practise (focusing primarily on record keeping and billing) at least two times over a 12-month period beginning from the date the Discipline Panel's order becomes final. If the auditor is of the opinion that Mr. Allison would benefit from further audits, then a maximum of

Christopher Ellacott

The Complaints Committee referred specified allegations against Mr. Ellacott to the Discipline Committee. After the allegations were referred, Mr. Ellacott signed an undertaking with the College to resign and to never reapply for registration with the College. A panel of the Discipline Committee ordered that the hearings in the matter be adjourned indefinitely to be brought back on with at least 30 days' written notice to Mr. Ellacott if he ever reapplies for registration with the College.

Transformation Project

Are you aware of the Ministry of Health and Long-Term Care's **Transformation Project**?

Please visit their website at:

www.health.gov.on.ca/transformation and see how it affects you!



Quality Assurance Continuing Education Logs UPDATE

There were a total of 44 members randomly selected to participate in the 2002-2003 Continuing Education cycle. The results of the participating members' submissions are as follows:

<u>Category</u>	<u>Total</u>
Exemplary	14
Good	19
Satisfactory	1
Unsatisfactory	5
Failure to Submit	5

The Quality Assurance Committee, in reviewing the Continuing Education Logs, made a number of new recommendations for dealing with members:

1. Any members who were in the category "failure to submit their Continuing Education Log for 2-terms" were notified they would undergo a practice assessment.
2. The members who were in the "unsatisfactory category for the 2002-2003 term" would be required to complete an on-line course dealing with an aspect of practice and attend a Category A education course by June 2005.
3. The members in the category "failure to submit their CE Log for the 2002-2003 term" will be required to complete an on-line course, attend at least one Category A continuing education course by June 2005, and prepare a paper of not more than 1000 words responding to a question posed by the QA Committee.
4. If the members in the latter two categories fail to complete the above-noted requirements, they will also be required to undergo a practice assessment.

The QA Committee will be reviewing 'Category A' courses to determine if they capture the broader range available in today's market (e.g. web-based continuing education courses).

Practice Assessment

The Quality Assurance Committee is finalizing its plans to launch the random practice assessments in the late fall of 2005. Detailed information about this statutory requirement may be found on the College's website at www.cocoo.on.ca.

Quality Assurance is meant to be a remedial and helpful program for members.

Council Meeting Highlights

Listed below are the highlights of the Council meetings that have been held since our last Bulletin:

January 30, 2004

- | President Laura Lee Kozody reported that Peter Higenell, Podiatrist, has completed his term as Non-Council member on the Patient Relations and Quality Assurance Committees.
- | A special acknowledgment was given to Chance Ng for his service on the Drug Committee and the major contribution to the Practice Assessment Programme he made while serving on the Quality Assurance Committee for the past three years.
- | Council approved the appointment of Sylvia Kovari, Chiropractor, and Giovanna Riolo, Chiropractor, as Non-Council members to serve on committees.
- | Council approved the motion that the College of Chiropractors of Ontario supports the Memorandum of Understanding made on December 4, 2003 of our two stakeholder groups, the OSC and the OPMA, to move in the direction of foot care in Ontario as set out in the Memorandum of Understanding.

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- | Final approval of the draft Drug Regulation was made by Council. The submission is to be sent to the Ministry.
- | Council approved the following policies:
 - a) Procedure for Registration for out-of-province applicants
 - b) Translation of College documents into French
 - c) Provision of full year-end financial statements
 - d) The availability of the full text of a Discipline Decision when requested in writing
 - e) Defining date for payment of fees when February 14th falls on a Saturday
 - f) Clinical instruction hours and s.4(3) of the Registration Regulation
 - g) Media requests for information/interviews.
- | Council approved an amendment to By-law No. 1 s.27(1) which was to add the words “non-refundable” before “annual fee.”
- | Vice-President Bruce Ramsden was appointed to the Healing Arts Radiation Protection Committee.

June 4, 2004

- | Bruce Ramsden was acclaimed as the podiatry member to Council in combined Districts 1 & 2.

Anna Georgiou was the acclaimed chiropody member in District 1. A second call for nominations will be sent for nominations for a chiropody member in District 2.
- | Council approved the Draft Standard on Orthotics, and the Draft Standard on Infection Control.
- | Council voted to reduce the Annual Renewal Fee for incorporation to \$475.00 from \$950.00. The initial incorporation fee is \$950.00.
- | Council approved the presentation of a plaque, certificate or letter of recognition for Council

Presidents, past-Presidents or members of the profession who have demonstrated outstanding performance or special achievement in their work with the College.

October 1, 2004

- | President Laura Lee Kozody congratulated Craig Hunt who was acclaimed as the Chiropody member in District 2.
- | Anna Georgiou, Chiropodists was welcomed to the College Council. Anna was acclaimed as the Chiropody member in District 1.
- | The President thanked Lorinne Chong for her work as a public member on Council. Lorinne’s term expired with the College on October 20, 2004 after six-years of service.
- | Registrar, Felecia Smith updated Council on the newly redesigned College website: The member information portion of the website will be updated on a monthly basis; member information can be accessed alphabetically by member name or city; the new “Member Change of Information” form can be electronically forwarded to the College; there will be a section for “Members Only” which will contain information to assist members in their practice, as well as a separate section designed for the general public.
- | Ms. Smith highlighted portions of the speech delivered in September 2004 by the Honourable George Smitherman about the Transformation Project. The goal of the Ministry of Health and Long-Term Care is a comprehensive and integrated system of care that is shaped with the active leadership of communities, and driven by the needs of the patient. Health results teams consisting of seven individuals will work with the Ministry, health providers, and community groups.

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- 1 Council elections were held at the October 1, 2004 Council meeting:

Bruce Ramsden, Podiatrist, was elected President of the College of Chiropractors of Ontario for the 2004/2005 term.

Norman Kew, Chiropractor, was acclaimed as the Vice-President for the 2004/2005 term.

- 1 *Membership*—458 members are registered with the College: 374 Chiropractors and 84 Podiatrists.
- 1 President Laura Lee Kozody reported to Council:
 - i. We are optimistic that the consortium formed to study Labour Mobility will hopefully meet again in the future.
 - ii. The College has not yet received the Judge's decision on the Official Mark.

Alan Bromstein, legal counsel, was present at the October 1st meeting.

- 1 The following motions were unanimously approved:
 1. The College of Chiropractors of Ontario agrees to move the direction of foot care in Ontario towards a podiatry model of practice.
 2. Representatives of the College, as determined by the Executive Committee, be directed to meet with representatives of the Ministry to explore the feasibility of this change.
 3. An implementation team (ad hoc committee) be composed (by the Executive Committee) to investigate and report to Council on the implementation issues that would need to be addressed, along with its recommendations, for making the broad-based principles a reality.

Mr. Bromstein explained to Council that the *Red Tape Reduction Act*, 1998 authorizes regulated health profession colleges to revoke certain regulations governing administrative provisions and replace them with By-laws. Ten regulations were revoked and replaced with By-laws by Council.

- 1 Council also approved the following motions:
 1. To accept the Practice Assessment Programme Package (previously named "Peer Review Programme").
 2. To approve the Guideline for the profession on Extracorporeal Shock Wave Therapy as amended.
 3. To approve the Policy for gifts to Council and Non-Council Members.
 4. To approve the Complaints Brochure.
 5. To approve the required forms for Annual Renewal for a Certificate of Authorization for a Health Profession Corporation.
- 1 Tribute was paid by Council to Sheldon Langer, Podiatrist, in New York, who passed away in September 2004. The College will send a donation to a charity in Dr. Langer's name.
- 1 Bruce Ramsden thanked out-going President Laura Lee Kozody for her commitment to the College in her capacity as President of the College and as a member of several committees during her term. Several members of Council added their thanks for her outstanding leadership.

Reminder

Please visit the College website regularly at www.cocoo.on.ca to receive new and current valuable information relevant to the profession.

Registration Matters

Updated June 2005

New Members

The College would like to congratulate and welcome 23 new Chiropracist members for 2004/2005 who met the requirements for registration.

Michael Acosta	Jenny Kim
Clare Baker	Bardee Lewis
Nicola Bartley	Suzanne Lu
Linda Bastone	Erwin Mendoza
Angela Bilich	Mark Reiter
Brett Caperchione	Dionne Sutton
Ada Chiu	Daniel Tolj
Carlos Choi	Manpreet K. Virk
Stephanie Cramm	Fraoch Warden
Tammy Keller	Lionel Warren
Erum Khan	Melissa Wright
Farha Khan	

Members Resigned (2005)

Natalie Bazan, Chiropracist
Peter Kapschuk, Chiropracist
Joseph Ladelpha, Podiatrist
Fiona Morrison, Chiropracist
Seifali Patel, Chiropracist
Thomas Weisz, Chiropracist
Dorit Zschape, Chiropracist

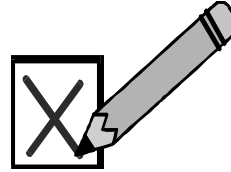
Suspensions

In accordance with the *Regulated Health Professions Act, 1991*, under section 24 of the Procedural Code, Certificate of Registration issued to the following individuals has been suspended for non-payment of fees. A suspended member cannot practice as a Chiropracist or Podiatrist in Ontario. A person whose certificate of registration has been suspended is not a member of the College unless and until the suspension is removed.

Chiropracity Members

Kirsty Cameron
Adnan Rayan

College News



Election 2005 Update

In September 2005, the election will take place for one chiropracist (Council position) in each of Districts 3 and 4 and one podiatrist (Council position) in the combined Districts 3 & 4.

Electoral district 3 (Central West) is composed of counties: Brant, Bruce, Dufferin, Grey and Wellington and the regional municipalities of Haldimand-Norfolk, Halton, Hamilton-Wentworth, Niagara and Waterloo.

Electoral district 4 (East) is composed of counties: Frontenac, Hastings, Lanark, Prince Edward & Renfrew, and the united counties of Leeds & Grenville, Lennox & Addington, Prescott & Russell, Stormont, Dundas and Glengarry, and the Regional Municipality of Ottawa-Carleton.

The notice of election explaining all the details was mailed out to the Chiropracity and Podiatry members in Districts 3 and 4 on May 31, 2005.

Election Schedule:

May 31, 2005

Nomination forms mailed to all registered Chiropracity and Podiatry members in Districts 3 & 4.

July 18, 2005

Nominations due and must be received at the College no later than 5:00p.m.

July 29, 2005

Voting packages mailed to Chiropracists and Podiatrists in Districts 3 & 4.

September 1, 2005

Ballots must be received at the College in the envelopes provided by 5:00p.m.

September 2, 2005

Election Day. Ballots counted by scrutineers.

YOUR COUNCIL

President

Bruce Ramsden, Podiatrist

Vice President

Norman Kew, Chiropracist

Elected Members

Allen Frankel, Podiatrist

Anna Georgiou, Chiropracist

David Greenberg, Podiatrist

Jonathan (Craig) Hunt, Chiropracist

John Infanti, Chiropracist

David Kerbl, Chiropracist

Norman Kew, Chiropracist

Julie Levesque-DeSimone, Chiropracist

Bruce Ramsden, Podiatrist

Academic Members

Steven Cassel, Chiropracist

Diane Tyczynski, Chiropracist

Public Members

Norm Baker

Mary Ann Christie

Ray Ferraro

Dan Houssar

Barbara Major

Penny McGregor

NON-COUNCIL COMMITTEE MEMBERS

Martin Hayles, Chiropracist

Sarah Kerwin, Chiropracist

Sylvia Kovari, Chiropracist

Meera Narenthiran, Chiropracist

Kim Resmer, Chiropracist

Giovanna Riolo, Chiropracist

Stuart Sackman, Podiatrist

COMMITTEE COMPOSITION 2004/2005

Council has approved the following appointments to the College's statutory and non-statutory committees:

EXECUTIVE

Bruce Ramsden, Chair

Dan Houssar

Craig Hunt

Norman Kew

Penny McGregor

REGISTRATION

Norm Baker, Chair

Steven Cassel

Penny McGregor

Bruce Ramsden

COMPLAINTS

John Infanti, Chair

Ray Ferraro

David Greenberg

Barbara Major

Kim Resmer

DISCIPLINE

David Kerbl, Chair

Norm Baker

Mary Ann Christie

Allen Frankel

Sarah Kerwin

FITNESS TO PRACTICE

J. Levesque-DeSimone

Barbara Major

Meera Narenthiran

QUALITY ASSURANCE

Diane Tyczynski, Chair

Anna Georgiou

Penny McGregor

Giovanna Riolo

Stuart Sackman

PATIENT RELATIONS

Norman Kew, Chair

Norm Baker

Mary Ann Christie

Sylvia Kovari

UPCOMING COUNCIL MEETING

All Council meetings of the College of Chiropracist of Ontario are open to the membership and the public. As space is limited, and you would like to attend the meeting, please call the College at (416) 542-1333 x226 to reserve a seat.

Next Council Meeting:

Friday, September 30, 2005

180 Dundas Street West

19th Floor Conference Room

Toronto, Ontario



HELP US TO KEEP YOU INFORMED

Receiving Regular, Timely and Important Information from the College through Email Communications

The College would like to be able to inform you about matters that directly concern you in a timely and informative manner. The College has historically communicated through the Bulletin. Often, by the time the Bulletin reaches your doorstep, the information has changed.

Through the use of e-mail, the College will be able to deliver important pieces of information to all members in an efficient, accurate and timely way. In this fast-paced, ever changing world we live in, it is critical that information comes to you quickly and that you are kept up-to-date on changes that directly affect you and your practice. The use of e-mail is also much more cost effective and environmentally friendly as compared to the production and mailing of the Bulletin.

The College has approximately 60% of our members' e-mail addresses. If you have not already done so, please provide us with your e-mail address by sending it to info@cocoo.on.ca. The College is planning to commence using e-bulletins in the fall 2005.

ANNOUNCEMENTS!

The College welcomes two new Members to the College Council:

Anna Georgiou (Chiroprapist) was elected to Council in June 2004 and is currently a member on the Quality Assurance Committee. Anna maintains three practice sites in the City of Toronto.

Ray Ferraro (Public Member) was appointed to Council by the Lieutenant Governor in Council on May 18, 2005. Mr. Ferraro lives in Guelph and has a long history of public service. He is currently a municipal councillor in Ward 2 with the City of Guelph.

The College says good-bye to the following individuals:

Laura Lee Kozody (Chiroprapist) past-President of the College served on Executive and Quality Assurance Committees. Lorinne Chong (Public Member) served on Executive and Quality Assurance Committees, and Eric Sisèl (Public Member) served on the Complaints Committee. The College wishes to thank Laura Lee, Lorinne and Eric for contributing their expertise, insights and valuable time during their term with the College.

CHANGE OF ADDRESS NOTIFICATION

To ensure the College has current contact information for you, please provide us, within 30 days, with written notification of any changes to your business/residential/or preferred mailing address.

Your practice site(s) is a matter of public record in the College Register.

CONTACTING THE COLLEGE

General Information:

(416) 542-1333 info@cocoo.on.ca

Felecia Smith, Registrar and CEO:

(416) 542-1333 x 225 fsmith@cocoo.on.ca

Marilyn Bartlett, Complaints Officer:

(416) 542-1333 x 224 complaintsofficer@cocoo.on.ca

Sharon Cole, Executive Assistant:

(416) 542-1333 x 226 scole@cocoo.on.ca