



COLLEGE OF CHIROPODISTS ONTARIO

PUT YOUR BEST FOOT FORWARD

NEWSLETTER ~FALL~ 2012



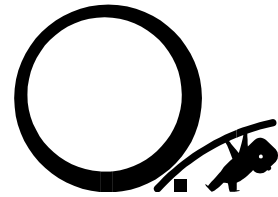
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A MESSAGE FROM YOUR REGISTRAR - Felecia Smith LL.B

Dear Members,

“Give me a lever long enough and a fulcrum on which to place it, and I shall move the world.” Archimedes



I hope that this newsletter finds everyone well. College Council has been very busy since we last reported to you in the spring 2012 - you will read about their activities in this newsletter. I want to speak to you about something that I believe is top of mind for many members and the turning point for this profession. Not only am I referring to the upcoming HPRAC review but equally important, the ability for 606 individuals to work together toward this common goal. As I look out my window on this gloomy November afternoon, I personally reminisce about how far this College has progressed since I arrived in February 2003. It has changed because of the hard work and determination of many people in this profession who have given hours of their time to move the profession forward to better serve the citizens of Ontario. In those early years, there were so many people who wanted to tell me “the real story” about the history of the profession. Why? Because they were passionate about this profession and they wanted it to succeed. I was more interested in where we were going, not where we had been. Together we have accomplished many, many milestones that are cause for celebration. Members are now allowed to prescribe drugs – there are very few health professions in this province that have been granted that privilege. We are included in the newly passed Federal legislation entitled New Class of Professions Regulations that deals with the prescribing of narcotics. Shortly our members will be able to use inhalation to assist their patients. As well, we have achieved an amended College registration examination and a new Registration and a Professional Misconduct Regulation, the latter two awaiting government approval. These are all examples of the positive things that can happen when we put our mind to it. They are all critical to self regulation and are indeed the foundation upon which we operate. But perhaps the single most important accomplishment is a Council that worked together with a united front to ask the Minister of Health to refer a review of chiropody and podiatry in Ontario to HPRAC. People repeatedly warned me that the bickering would not stop long enough to submit the request but we proved them wrong! This document was, quite succinctly, *the* catalyst for change. The referral was a watershed moment for the public of Ontario and for this profession.

Since that momentous day, there have been many bumps in the road, as expected. And there will continue to be. Change does not come easy. However, we are continuing down that road to reach the goal we set for ourselves when we asked for the referral – the ability to have enhanced tools or competencies, whatever the label, so that we are able to better serve the Ontario public. We are a service industry and that is the goal and expectation. We have an opportunity to set the standard for the way foot health is

delivered to the public, to reach for the highest level of foot care, to be the best we can be, to speak with one voice, to move ahead and keep pace with all the other changes happening around us, to set the foundation for generations to come – your children and mine – to heighten our profile as health care practitioners not only in the eyes of other practitioners but in the eyes of the people who count the most - the public. Without them, no one would be in the profession we are in. The goal must always be to serve the public to the very best of our abilities. I truly believe everyone who is reading this newsletter does exactly that. I believe people go into the profession so they can serve their neighbour, their family member or the stranger down the street. I am the public and I believe that that the profession as a whole provides an excellent service. I know that each of you is passionate about your patients and your fellow members. I also personally believe that if we are granted an expanded scope and authorized acts and the ability to order lab test or prescribe x-rays or MRI's etc. that service will be magnified and exemplary.

We need to work together, focus on the positive. We need to stop being naysayers, reacting emotionally, being hurtful, finger pointing and comparing. We need to stay the course and focus on what we all signed on for. We need to ask how it can be done, not why it cannot be done. We oftentimes spend too much time focussing on the negative and being concerned why something will not work rather than why it will work. Negativity is debilitating, exhausting and unhealthy. I understand why it happens – I get it. I also appreciate that people are apprehensive about the possible changes and where they fit into the potentially new world. People have mortgages, personal responsibilities and these concerns are totally understandable and real. But I also know that your College Council will not force anyone to do anything they do not wish to do. There are no hidden agendas or secret strategies or unwelcoming surprises. If you are concerned, we need to hear from you. If you are skeptical, we need to understand why. We cannot address matters if we do not know what they are. We are committed to working through the issues so that the public in Ontario is best served by our members.

The future is ours to grab hold of for the benefit of the public and generations to come.

Give us a lever long enough, using our unique experiences and passion and the fulcrum of the HPRAC review on which to place it, and together we will change the world of foot care.

On behalf of College Council and myself, I want to wish you and your family the best of the upcoming holiday season and a very happy, healthy and prosperous New Year.

Felicia Smith

Standards of Practice

Infection Control Standard

College Council continues to review and fine tune the proposed amendments to the Infection Control Standards of Practice. The Practice Working Group, under the Chair Anna Georgiou, has done a monumental task of reviewing all the literature and comments from stakeholders and proposing suggested amendments to Council.

Members of the group include:

- *Pete Guy*
- *Cindy Lewis*
- *Neil Naftolin*
- *Khaliq Nizami*
- *Anamelva Reveredo*

Council reviewed the Standard once again at their October meeting and had some outstanding questions and suggestions for further amendments. The standard has been sent back to the working group for further review and will be on Council's agenda at their March 1, 2013 meeting. Once again, the College will advise you when the amendments have been finally approved and the new Standard of Practice is in effect.

Regulations

Draft Registration Regulation:

The Ministry continues to work with the College to take steps to deal with the changes to the Regulation that the College is seeking. All the AIT related amendments have been passed by the government and finalized and are part of our current Registration Regulation.

Draft Professional Misconduct Regulation:

The draft amendments to this Regulation were passed by Council at their October 12, 2012 meeting. Council took a great deal of time over the past 2 years to thoroughly review the comments of all stakeholders, including the OSC and OPMA. The College also met with the 2 Associations on several occasions to conduct a line-by-line review of the proposed amended Regulation. This was done with the College Executive committee and representatives of the Association. The College also sent the Regulation out to stakeholders twice seeking comments. Each response was reviewed in detail by the Executive Committee and Council. Both Associations agreed with the wording in the final draft.

The biggest issue relating to the amendments was in relation to practice names. It is important to understand that in s.16 of the current Regulation, it says that it is an act of professional misconduct for members to **“use a name other than the member’s name, as set out in the register, in the course of providing or offering to provide services within the scope of practice of the profession.”** Therefore members have never been allowed

to use practice names – this is not something new in the Regulation. Members are supposed to be practising in their *personal name* and if a member has a Health Professions Corporation (HPC), members should be practicing under the name of the Health Professions Corporation. The College has never had a process in place to deal with practice names. Therefore, in the new amended Regulation, a process has been put into place.

If a person wants to use a name another name, it needs to be approved by the committee. There is a list of practice names in the Regulation that the Committee should not approve, such as: any practice name that would demean the dignity or integrity of the profession or is suggestive of favourable results or appeals to public fears or is likely to mislead or confuse the public. The proposal assumes that a member's practice name reasonably refers to and describes the location of the practice.

The OSC indicated in meetings with the College that their members were concerned that there was no 'appeal' mechanism if a member was unhappy with the decision made regarding their practice name. In response to this concern, the College approved the establishment of a *Practice Names Approval Committee* which will be a standing committee of the college. It will be composed of four councillors, one of whom will be a chiropodist, one of whom is a podiatrist and two of who are public members. No member of the Executive Committee can be a part of the Practice Names Approval Committee. Should the Practice Names Approval Committee refuse to allow a proposed name, the member would have the option of having the decision reviewed by the Executive Committee.

The Regulation must now be forwarded to the Ministry to go through their approval processes. The College will advise you when the Regulation has been approved.

Inhalation Regulation

The College continues to work with the Ministry to finalize the Inhalation Regulation. The College has been advised that it is the intention of the Ministry to have the draft Regulation proceed to Cabinet early in the New Year. Once the legislation is passed, the College will need to determine what courses/training will be required before members will be able to administer a substance by inhalation.

Drug Regulation

Administering Substances by Injection – Course at the Michener

New this fall at the Michener Institute is a continuing education course on administering substances by injection. The course has been approved by the College so that anyone who successfully completes it will meet the standard of practice in the Regulation for administering substances by injection. The course covers all aspects (including

pharmacology, indications, contraindications, complications, related emergencies, injection techniques, current/evidence based advancements and recommendations) of all the injectables currently listed on the drug list and is intended to provide a solid foundation for the use of other injectables in the future. This course is suitable for not only those without previous exposure to this material or experience in these techniques, but will also be an excellent review for those who would like to update their skills or who desire a refresher on these concepts.

Course Approval for Administering Substances by Injection or Prescribing Oral Drugs.

If any member of the College wishes to have their pharmacology course materials reviewed for purposes of being able to administer substances by injection or prescribe oral drugs, they must now apply to the College using the newly approved forms and process. The forms are available from the College and will shortly be posted on the College website. This process will be more applicable to new members who have recently joined the College or ones who have not yet been approved to administer substances by injection. Those members can obviously take the Michener courses without the College reviewing their course materials. There is now also a cost involved to do so:

1. \$1,250.00 if the assessment relates to both injecting a substance into the foot and to prescribe a drug; or
- b) \$625.00 if the assessment relates to *either* injecting a substance into the foot or to prescribing a drug, *but not both*.

Drug Committee

College Council reconstituted the Drug Committee so that it is able to assist with questions arising from pharmacology and drug related issues. The new committee will be chaired by Colin McQuistan and David Roth. Members of the Committee include Cesar Mendez, Lara Murphy, Meera Narenthiran, Anamelva Revoredo.

In order for any amendments to be made to any Regulations relating to drugs for all health professionals who are able to prescribe, the government must first establish the Drug Authorities Committee. This Committee was suggested by HPRAC in their 2009 Critical Links Report as a possible way to expedite these amendments. The Ministry is continuing to establish this Committee. Both Colin McQuistan and David Roth are the College's representatives to assist the Ministry to first establish the parameters and composition of the Drug Authorities Committee. Colin and David have been invited to participate in one meeting thus far. We will advise you as matters progress.

New Classes of Practitioners Regulations dealing with The Prescribing Of Narcotics – Update

The Federal government very recently approved the New Classes of Practitioners Regulation. This particular Regulation relates to the *Controlled Drugs and Substances Act*. Podiatrist, for purposes of the Regulation is defined as: "a person who is registered and

entitled under the laws of a province to practise podiatry or chiropody and who is practising podiatry or chiropody in that province.”

Section 3 of the Regulation says:

“Subject to section 4, a midwife, nurse practitioner or podiatrist, as a practitioner, may prescribe or possess a listed substance, or conduct an activity with a listed substance, in accordance with the *Benzodiazepines and Other Targeted Substances Regulations*, Part G of the *Food and Drug Regulations* or the *Narcotic Control Regulations* if they are permitted to prescribe, in their practice under the laws of the province in which they are registered and entitled to practise, that substance.” Therefore, a member must be able to prescribe the federally listed drugs in Ontario before they are able to prescribe them. That is, they must first be listed in the College’s drug regulation.

The College needs to review these amendments and work with the Ministry of Health and Long Term Care to amend the Drug Regulation so that the new drugs and substances are permitted provincially. The College will also need to determine members’ competencies to prescribe these controlled substances before they will be able to do so and put in place appropriate training and education. We will keep you posted as matters progress.

By-law Amendments

Council finally approved the following additions to the College’s General by-law. By doing so and adding this to the public register, the College is now able to post on a member’s page on the website if the member is *not* allowed to administer a substance by injection or prescribe a drug. If a member is allowed to do both, there will be no notation on their page regarding administering by injection or prescribing. This will now allow pharmacists, for example to be able to determine after office hours or on a weekend whether a member is entitled to do either.

Amendment to the General By-law

1. Information on the Website

If you visit the College’s website, you will note that information about who is NOT able to administer substances by injection or prescribe oral drugs is on the website.

Council approved the following amendment to the College’s General Regulation: two new paragraphs 11.1 and 11.2 as follows:

11.1 Where a member is not authorized to inject a substance, a notation to that effect

11.2 Where a member is not authorized to prescribe any drugs, a notation to that effect.

AND FURTHER to circulate for 60 days the proposed amendment to members and other stakeholders for comment.

2. Amendment to the Fees By-Law

Council approved an amendment to the fees by-law. This applies to a person who wishes to have Dr. Beazely, for example, review their course materials to determine if they meet the standard in the drug regulation and have the requisite competencies. Here is the motion:

That Council approve the amendment to the Fees By-law No.2 and insert a new provision 5.2.01 which would read:

5.2.01 Where a person or applicant wishes Council to assess whether he or she meets the Standard of Practice to permit that person to inject a substance into the foot or prescribe a drug, the member or applicant shall pay a fee of:

- a) \$1,250.00 if the assessment relates to whether he or she meets the standard of practice to both inject a substance into the foot and to prescribe a drug;
- b) \$625.00 if the assessment relates to whether he or she meets the standards of practice to either inject a substance into the foot or to prescribe a drug, *but not both*.

HPRAC Review

The College is moving forward to prepare for the HPRAC review. We have been advised that the review should either begin in the Fall 2013. It is essential that we collect all the necessary data and evidence to support our request to change the model of foot care in Ontario.

In this regard, at its June meeting, with the assistance of the College's legal counsel, Council refined and unanimously approved the proposed scope of practice and authorized acts for the Podiatry foot care model that will be provided to HPRAC as follows:

Authorized Acts

In the course of engaging in the practice of podiatry, a member is authorized, subject to the terms, conditions and limitations imposed on his or her certificate of registration, to perform the following:

- 1. Communicating a diagnosis identifying a disease or disorder of the foot or ankle as the cause of a person's symptoms.**
- 2. Performing a procedure on tissues below the dermis to treat condition of the ankle or foot.**

3. **Setting or casting a fracture of a bone or dislocation of a joint, in the foot or ankle.**
4. **Administering, by inhalation, a substance designated in the Regulations.**
5. **Administering, by injection, a substance designation in the Regulations.**
6. **Applying or ordering the application of a prescribed form of energy.**
7. **Prescribing, dispensing and selling a drug designated in the Regulations.**

Scope of Practice

The scope of practice statement would be expanded as follows:

“The practice of podiatry is the assessment or diagnosis of the foot and ankle and the treatment and prevention of diseases, disorders or dysfunctions of the foot, ankle and structures affecting the foot or ankle by therapeutic, orthotic or palliative means.”

We will also be asking for the ability to order lab tests, x-rays, MRI's and for hospital privileges, for example. This is in keeping with the original request that was sent to Mr. Smitherman in 2006 upon which the referral to HPRAC is based (see 'Information for Members' below).

There is a great deal of work to be done in terms of data collection and evidence based information. The College has therefore undertaken the following in preparation for the review.

Work Plan

In order to begin the task of data collection, a work plan has been developed. The plan is organized to reflect the criteria HPRAC uses in its reviews. The criteria may be found on HPRAC's website at <http://www.hprac.org/>. There are two possible avenues HPRAC may pursue when a review has been referred. The review may be conducted as a new professions review or an expanded scope of practice review. In a telephone conversation with HPRAC months ago, HPRAC indicated that they felt that the review should fall under a 'new professions review and not an expanded scope of practice review. The reason for this view was because currently, there is not a 'podiatry' profession in Ontario – the practice is chiropody. The College intends to try to persuade HPRAC otherwise because similar to many of you, we believe our review should be a scope of practice review. When the comment was made, HPRAC had clearly not turned its mind to our review or seriously considered or focussed on the best course of action. Therefore, when the review is closer and the time is appropriate, we will make our case to HPRAC for an expanded scope of practice review. The standard that needs to be met in a scope of practice review is less onerous that the new professions review.

The work plan is broken down into five working groups, with each group having two co-chairs. They are as follows:

1. **Entry to Practice/Education Program Working Group** - Pete Guy & Tony Merendino
2. **Clinical Evidence Working Group** – Christine Burton & Cesar Mendez
3. **Stakeholder Consultations Working Group** - Jamie Maczko & Peter Stavropoulos
4. **Economic and Fiscal Impact Working Group** - Bruce Ramsden & TBA
5. **Member Communications & Consultations Working Group** - Jamie Maczko & Peter Stavropoulos

The working groups will address all aspects of the data collection that must be completed in order to address the review. Committee Chairs are currently in the process of selecting their committee members so that they are able to begin their work in January. There is much to do and we are very grateful to the many members who will be assisting with this project. If you have any helpful statistical data or information that you feel would be relevant and benefit the review, please feel free to send it to fsmith@cocoo.on.ca.

Competency Review

As we advised in our Spring 2012 newsletter, the College has undertaken a review of the competencies of all of our members in preparation for the HPRAC review. The College has hired Professional Examination Services (PES) to assist with this project. The members of the Steering Committee that is providing guidance and information to PES were listed in the last edition. The Steering Committee met with PES on September 28, 2012 to review the information that had been collected thus far. The members of the Committee were given an opportunity to review the data and to comment and make suggestions to any unanswered questions. The Steering Committee will be meeting again on Friday, January 18, 2013 at which time a final report should be forthcoming for the review by the Committee and ultimately College Council. The information in the report will also assist the working groups with information they may require.

Survey

Included with your annual renewal and this newsletter is a survey. The information we are requesting from you is similar to last year's survey but the survey has been improved based on suggestions we received from you. It is critical that everyone respond to the survey and return it to the College with your annual renewal.

Keeping Members Informed and Up-to-date about the HPRAC Review

It is critically important that each of you is kept informed and up-to-date about what is happening with the review. The College wants to ensure that information is accurate and timely. We do not want incorrect information circulating in the profession.

The Member Communications & Consultations Working Group will be formulating a communications plan to do exactly that. At this point in time, two ideas that are being developed include:

1. **Website.** In a member's only section, the College will post documentation relating to the review and allow members to ask questions and obtain answers; and
2. Although in early discussion, the College is contemplating a "**Town Hall**" meeting in the spring so that members can hear about the review and progress that has been made directly from the College.

If you have any suggestions about how the College can better keep you informed, the working group would welcome your input. Simply send your suggestions to fsmith@cocoo.on.ca.

Guideline for Dealing with Office Medical Emergencies in the Podiatry and Chiropody Office Setting

At their June 8, 2012 meeting, Council approved the above noted guideline (attached to this newsletter). It is included at the end of this newsletter. The College wishes to thank and gratefully acknowledges Cesar Mendez, DPM FACFAS who was instrumental in the development of this document.

In an effort to assist College registrants in preparing their offices for medical emergencies, the College offers this Guideline. While it is reasonable to expect that all offices have at least a written office medical emergency response plan and the essential equipment/supplies and agents listed for low risk practices, it should be emphasized that the following guidelines are designed as guidelines *only*. They are not intended to place any specific obligations or burdens on individual practices or replace a practitioner's own judgment regarding the needs of their own practice settings. The ultimate goal is to encourage practitioners to make proper preparations, specifically tailored to their practices and to ensure that all patients will receive essential care in the event of an office emergency. Practitioners should be encouraged to use their own judgment when assessing the appropriate level of emergency preparedness they feel would best suit their specific practice situations.

Extracorporeal Shock Wave Therapy – Amended Policy:

The College received many requests from members to clarify and simplify the policy. Council approved an amended version of the policy as follows:

The Regulated Health Professions Act, 1991

The College has received several inquiries over the years about whether members are allowed to use extracorporeal shock wave therapy in their practice. Council understands that this therapy involves the use of soundwaves¹ but that the energy is not used to break down calcifications or other hard deposits. As such members may employ this therapy for their patients provided all of the following conditions have been met:

1. The member has appropriate training to determine the need for this form of treatment and in the administering of the therapy.
2. The treatment is one which a prudent member would consider to be appropriate having regard to the patient's condition.
3. The member has obtained an informed consent from the patient.

The policy may also be found on the College's website.

Elections

Districts 5&6

The spring election took place in Districts 5&6 for chiropodists and podiatrists. Pete Guy, chiropodist, was acclaimed in District 5 and Julie DeSimone, chiropodist, was acclaimed in District 6. Peter Stavropoulos, podiatrist, was appointed in districts 5&6.

Elections on Council

An election for the Executive Committee is held each year at the fall meeting of Council. We are pleased to advise you that the following members were elected to the Executive:

- Jamie Maczko – President
- Colin McQuistan – Vice-President
- Peter Stavropoulos – Podiatrist – professional member
- Khalid Daud – Public Member
- Wilhelmina Gonzales – Public member

Peter Stavropoulos was also appointed to Council for another 3 year term. Cesar Mendez, selected member, was also appointed to Council for a further 3-year term.

Statistics

There are a total of 606 members, 546 chiropodists and 70 podiatrists.

¹ The Regulated Health Professions Act, 1991 prohibits applying or ordering the application of certain specified energies which energies are listed in a regulation under that Act ("Regulation"), unless the person is a member of a Regulated Health Profession who is authorized to use that form of energy. For example, that Regulation controls certain uses of electricity but specifically allows our members to apply energy for electrocoagulation and fulguration. The use of soundwaves is also controlled in that Regulation but only for the purpose of "ultrasound" and "lithotripsy". Lithotripsy is not defined in the legislation but is commonly understood to involve the breaking up of stones or calculi (usually in the kidney or gallbladder).

ICRC

The ICRC has had a very busy schedule since the last Council Meeting. At the October 12th Council meeting, The report of the ICRC Committee, presented at the October 12, 2012 Council meeting, indicated that between June 8, 2012 and September 15, 2012, there were 28 new complaints and 15 continuing complaints for a total of 43 matters. As you know, a Panel is selected to investigate each complaint or Registrar's Report.

There have been numerous insurance companies' complaints. Basically, insurance companies do random audits, or specific audits of members' billing and prescribing patterns/habits.

It is important to Remember:

Orthotics and Orthopaedic shoes should be prescribed based upon patient need, not upon insurance coverage.

Please review the following restrictions on advertising:

Chiropody Act, 1991 **Ontario Regulation 203/94**

ADVERTISING

7. (1) An advertisement with respect to a member's practice must not contain,

- (a) Anything that is false, misleading or self laudatory;
- (b) Anything that, because of its nature, cannot be verified;
- (c) An endorsement other than an endorsement by an organization that is known to have expertise relevant to the subject matter of the endorsement;
- (d) Any testimonial;
- (e) A reference to a drug or to a particular brand of equipment used to provide health services;
- (f) A claim or guarantee as to the quality or effectiveness of services provided;
- (g) Anything that promotes or is likely to promote the excessive or unnecessary use of services. O. Reg. 746/94, s. 2.

8. (1) *In any advertisement*, a member who is registered as a chiropodist shall clearly identify himself or herself as a chiropodist and a member who is registered as a podiatrist shall clearly identify himself or herself as a podiatrist. O. Reg. 746/94, s. 2.

9. No member shall indicate after his or her name,

- (a) A diploma or degree other than a diploma or degree held by the member; and
- (b) The word "chiropodist" if the member is not registered as a chiropodist or the word "podiatrist" if the member is not registered as a podiatrist. O. Reg. 746/94, s. 2

Members must clearly identify their title chiropodist or podiatrist on any advertisement. If, for example, your practice name is “Yonge-Eglinton Foot Clinic”, the name and title of the member providing the care must also be indicated on all the signage and other advertising media. (Advertising Guideline)

For example:

Joan Smith, D.Ch, Chiropodist

John Smith, D.Pod.M, Chiropodist

John Doe, DPM, Chiropodist

Jane Smith, DPM, Podiatrist

Jane Doe, Doctor of Podiatric Medicine, Podiatrist

Jane Doe, Doctor of Podiatric Medicine, Chiropodist

The College has adopted the following definition of advertising:

"any written, oral, visual or electronic communication whose purpose or effect includes promoting the member's practice."

Advertising includes paid announcements over radio or television, in newspapers, magazines and other print or electronic media.

Specifically, advertising may also include, but is not limited to:

- | | |
|--------------------|--|
| Newspaper articles | Signs |
| Interviews | Advertorials |
| Newsletters | Infomercials |
| Brochures | Promotional materials placed on the Internet |
| Business cards | All telephone listings |

All types of advertising, regardless of the medium, must comply with regulation 203/94, Part II, Advertising, as amended under the *Chiropody Act, 1991*.

Advertising must never...

- Denigrate any member of the College or any member of a different profession.
- Promote one member of the same or different profession over another by direct comparison.
- Promote the excessive or unnecessary use of chiropody or podiatry services.
- Promote any particular product or brand of equipment.

- Be unprofessional or undignified.
- Include a testimonial from any patient or include an award received from any local newspaper or neighbourhood organization.
- Offer a guarantee or a cure.
- Offer incentives such as: free shoes, free assessments, insurance coverage, or discounts.
- Specify, infer, or allude to the title “doctor”. An article written about you, in which you are referred to as “Doctor”, must not be placed either in your office, or on your website as it would suggest that you condone the use of the title “Doctor”.
- Suggest that you are a specialist in anything other than being “foot specialist”. [If you do use foot specialist in an advertisement you must add your title either chiropodist or podiatrist according to your class of registration.]

It is your responsibility to ensure that all advertisements comply with the advertising regulation and guidelines.

Discipline Proceedings

The Discipline Committee of the College holds hearings into allegations of professional misconduct and/or incompetence. A summary of disciplinary proceedings is provided for the information of the public, members of the College and other professionals.

A Discipline Hearing was held on Thursday, October 11, 2012 for Salima Tharani. The Panel Members for this Hearing were Jamie Maczko,, Wilhelmina Gonzales (Chair), Soussan Eissabigloo. The college prosecutor Mr. Bernard LeBlanc presented the following Agreed Statement of Facts and a Joint Submission on Penalty. Ms. Tharani was represented by Counsel.

The Panel found that Ms. Salima Tharani had committed Professional Misconduct.

Agreed Statement of Facts:

1. Salima Tharani, D.Ch. was, at all material times, a chiropodist registered to practise chiropody in the Province of Ontario. Ms. Tharani practised at Complete Foot Care Clinics in Toronto, Ontario.

2. During the course of an audit conducted by Manulife Financial (“Manulife”) with respect to certain claims submitted by, or on behalf of, Ms. T and Mr. N (“the claimants”), Manulife discovered that the claimants submitted insurance claims for certain chiropody treatments by a JD on September 1, 6, 10 and 17, 2010 in the case of Ms. T, and September 3 and 17, 2010 in the case of Mr. N.

3. In fact, these claims were false as JD did not provide the services referred to on the claims to the claimants.

4. After receiving notice from Manulife that these claims were being investigated, the claimants attended at Complete Foot Care Clinics and obtained Ms. Tharani’s agreement to issue false claims and create false records indicating that the claimants actually received the services in question on the above noted dates from Ms. Tharani instead of JD.

5. Ms. Tharani knowingly created false records at the request of the claimants. Ms. Tharani thereby engaged in professional misconduct within the meaning of paragraphs 2 (failing to meet or contravening a standard of practice of the profession), 17 (failing to keep records as required by the regulations), 18 (falsifying a record relating to the member’s practice), 20 (signing or issuing, in the member’s professional capacity, a document that contains a false or misleading statement), 21 (submitting an account or charge for services that the member knows is false or misleading) and 33 (engaging in conduct or performing an act, in the course of practising the profession, that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional) of section 1 of O. Reg. 750/93 under the *Chiropody Act, 1991*.

6. Attached hereto at **Tab “A”** is a copy of the complaint of Mr. David H. Porter, Investigator for Manulife, dated April 30, 2011 (without attachments, except the relevant claims and receipts).

7. Attached hereto at **Tab “B”** is a copy of the report of Erin Fairbanks, D.Ch., dated February 20, 2012.

8. The parties agree that these facts are substantially accurate.

9. Ms. Tharani understands the nature of the allegations that have been made against her and that by voluntarily admitting these allegations, she waives her right to require the College to otherwise prove the case against her.

10. Ms. Tharani understands that the Discipline Committee can accept that the facts herein constitute professional misconduct.

11. Ms. Tharani understands that depending on any penalty ordered by the Discipline Committee, the panel's decision and reasons may be published, including the facts contained herein and her name.

12. Ms. Tharani understands that any agreement between her and the College does not bind the Discipline Committee.

13. Ms. Tharani acknowledges that she has had the opportunity to receive, and has in fact received, independent legal advice.

Joint Submission As To Penalty And Costs

The College of Chiropodists of Ontario ("the College") and Salima Tharani ("the member") agree and jointly submit that the Discipline Committee make the following order:

1. The member shall appear before the Panel of the Discipline Committee to be reprimanded, the fact of which shall be recorded on the public register of the College.

2. The Panel of the Discipline Committee shall direct the Registrar to suspend the member's certificate of registration for a period of three (3) months, one month to be remitted in the event that the member complies with paragraph 3. The first two (2) months of the suspension shall commence on December 15, 2012. If the third month of the suspension must be served, it shall be served immediately following the first two (2) months of the suspension.

3. The Panel of the Discipline Committee shall direct the Registrar to impose a specified term, condition and limitation on the member's certificate of registration requiring that the member successfully complete, at her own expense and to the satisfaction of the Registrar, an ethics course, by no later than February 15, 2013. The course must be pre-approved by the Registrar

4. The member shall pay to the College its costs fixed in the amount of \$5,000.00, \$3,000.00 of which must be paid within thirty (30) days of the date of the hearing and the remaining \$2,000.00 within three (3) months of the date of the hearing.

5. The member acknowledges that this Joint Submission as to Penalty and Costs is not binding upon the Discipline Committee.

6. The member acknowledges that she has had the opportunity to receive, and has in fact received, independent legal advice.

You may read the entire decision on the College website under 'Discipline Decisions'.

Don't forget to fill out and return your survey with your annual renewal.

Next Council Meeting

Friday, March 1, 2013

9: 00 a.m. – 5:00 p.m.

**This meeting will be held at the 180 Dundas Street West,
19th floor boardroom
Toronto, Ontario**

All Council meetings of the College of Chiropodists of Ontario are open to the membership and to the public. If you would like to attend the meeting, please call the College at 416 452-1333 ext. 226 and speak to Sheila to R.S.V.P.

Upcoming Meetings for 2013 – 2014 are:

Friday, June 21, 2013

Friday, October 18, 2013

Friday, February 21, 2014

Friday, June 20, 2014

Friday, October 17, 2014

Locations to be Announced