

**DISCIPLINE COMMITTEE
OF THE COLLEGE OF CHIROPODISTS OF ONTARIO**

PANEL:

Adrian Dobrowsky, Chair
Alladin Mohaghegh
Peter Guy

BETWEEN:

)	JORDAN GLICK and MEGHAN
)	HOULT for the College
)	
COLLEGE OF CHIROPODISTS OF ONTARIO)	
(the “College”))	
)	
- and -)	IVAN MOROVAC, self-represented
)	
)	
IVAN MORAVAC)	
)	JUSTIN SAFAYENI, Independent Legal
)	Counsel
)	
)	Heard: November 1, 2018
)	
)	Court Reporter is Noemi Panameno

DECISION AND REASONS

This matter came on for hearing before a panel of the Discipline Committee on November 1, 2018 at Victory Verbatim, in Toronto.

The Allegations

The allegations against Ivan Moravac (the “Member”) are set out in the Notice of Hearing dated October 18, 2018 (Exhibit 1, Tab 1), and are divided according to two different file numbers (File 1718 and File 1812). The allegations read as follows:

STATEMENT OF ALLEGATIONS (MORAVAC – File 1718)

1. Ivan Moravac (the “**Former Member**”) initially registered with the College of Chiropractors of Ontario (the “**College**”) in August 1986. On April 13, 2018, the Former Member resigned his membership with the College.

2. Within the years 2015 to 2018 (the “**Relevant Period**”), the Former Member engaged in the practice of chiropody at Sole Feet Health Inc. (“**Sole Feet**”) and/or Henley Foot and Ankle Clinic (“**Henley**”). The Former Member is the direct, indirect, and/or beneficial owner of Sole Feet.
3. In or about August of 2017, the College received information that the Former Member was running an insurance benefits scheme whereby clients and potential clients were incentivized with gift cards to maximize insurance benefits relating to orthotics, orthopaedic shoes and/or compression stockings. The information suggested that the Former Member targeted members of the Toronto Police Service (“**TPS**”) as clients.
4. In or about September of 2017, an investigator, retained by the College, contacted Sole Feet under the pretext of having been recently hired by TPS and in need of orthotics.
5. On or about September 27th, 2017, the investigator attended at Sole Feet where:
 - a. she was immediately advised that her insurance coverage would allow her to claim two pairs of orthotics for \$1000 Cdn;
 - b. she filled out a client information sheet which included a request for her group and policy number for insurance purposes;
 - c. she was assessed, on a limited basis, by the Former Member and advised that she required orthotics;
 - d. she was then advised again that her insurance coverage would allow her to claim two pairs of orthotics for \$1000 Cdn, though she indicated that she only desired to purchase a single pair;
 - e. the investigator did not see the Former Member again with respect to her assessment and treatment. Scans of her feet were taken by a woman who was previously sitting at the reception desk (the “**Receptionist**”). The scans were not reviewed by the Former Member;
 - f. she was advised by the Receptionist that the promotion involving mall gift certificates for TPS employees ceased a month prior but that they had replaced that program with a give-away for free shoes;
 - g. she was provided with a catalogue for shoes and advised that she could otherwise go on the website www.TOG.com and order a pair of shoes of her choice; and,
 - h. she was charged \$500 Cdn for the visit and orthotics which she paid by credit card before departing.
6. On or about September 28, 2017, the investigator called Sole Feet and ordered a pair of boots from the catalogue.

7. On or about October 6, 2017, the investigator attended at Sole Feet where a chiropractor dispensed the orthotics. The Former Member was not present, nor was there any further contact and/or follow-up.
8. On or about November 30, 2017, the investigator attended at Sole Feet to pick up the boots. She was not required to sign any documentation or pay for them.
9. In respect of the investigator's assessment and treatment, the Former Member did not:
 - a. take an adequate medical history;
 - b. obtain and document, in a timely manner, informed patient consent;
 - c. perform an adequate chiropody assessment, including a gait analysis;
 - d. provide a range of treatment options;
 - e. personally perform the casting or scanning procedure or otherwise have a designated chiropodist, podiatrist, or properly trained assistant/support person do so, as outlined in the standards of practice;
 - f. personally evaluate the casts or scans to ensure they were an accurate reflection of the investigator's condition and the contours of the investigator's foot, as outlined in the standards of practice;
 - g. personally fit the orthotics and/or orthopedic shoes to ensure that the device met the prescription and the contours of the investigator's foot and/or ensure that those steps were performed by another chiropodist or podiatrist;
 - h. offer and/or conduct a follow-up and/or advise the investigator of the needs for long term checkups after the orthotics had been dispensed; and/or,
 - i. explain what the investigator may expect regarding the outcomes of her treatment.
10. The Former Member's record of the investigator's visit, including but not limited to the documentation regarding clinical findings, prescription and receipt, was false, inaccurate and/or misleading in that:
 - a. it indicated that a physical cast was taken when it was not; and,
 - b. it indicated that a bio-mechanical examination was performed when it was not.
11. The Former Member's record of the investigator's visit did not contain:
 - a. a history of the patient;
 - b. a written informed consent and/or reasonable information that an informed consent was obtained;

- c. reasonable information about every examination performed and reasonable information about every clinical finding, diagnosis and assessment made by the Former Member; and/or,
 - d. reasonable information about every order made by the Former Member for examinations, tests, consultations or treatments to be performed by any other person; and/or,
 - e. reasonable information about all significant advice given by the Former Member including treatment options.
12. The investigator subsequently conducted an investigation of the Former Member's practice during the Relevant Period.
13. In one or more instances during the Relevant Period including, but not limited to, with respect to one or more of the patients listed in Schedule "A", the Former Member overprescribed and/or gave patients unnecessary prescriptions for orthotics and/or compression stockings in that:
- a. The Former Member did not perform a sufficient examination and/or assessment of the patient, but nonetheless prescribed and/or recommended orthotics and/or compression stockings for them;
 - b. The Former Member did not record having discussed other treatment options with the patient and/or determined if a different treatment was appropriate before prescribing orthotics, orthopaedic shoes and/or compression stocking as required per the standards; and/or,
 - c. The Former Member prescribed orthotics, often in multiples, for children as young as 5 and/or 6 years old.
14. During the Relevant Period, the Former Member prescribed and/or recommended orthotics and/or compression stockings for patients including, but not limited to, one or more of the patients listed in Schedule "A". He made one or more of these prescriptions and/or recommendations without:
- a. performing an adequate chiropody assessment, including a gait analysis and/or biomechanical examination;
 - b. obtaining and documenting, in a timely manner, informed patient consent;
 - c. providing a range of treatment options;
 - d. personally performing the casting or scanning procedure or otherwise having a designated chiropodist, podiatrist, or properly trained assistant/support person do so, as outlined in the standards of practice;

- e. personally evaluating the casts or scans to ensure they were accurate or ensuring another designated chiropodist or podiatrist did so. In particular, the Former Member did not ensure that the patient's foot was compared to the cast or scan to verify that it was an accurate reflection of the patient's condition and the contours of the patient's foot, as outlined in the standards of practice;
 - f. personally fitting the orthotics and/or orthopedic shoes to ensure that the device met the prescription and the contours of the patient's foot and/or ensuring that those steps were performed by another chiropodist or podiatrist;
 - g. offering and/or conducting a follow-up and/or advising the patient of the needs for long term checkups after the orthotics and/or orthopedic shoes had been dispensed. In particular, for one or more of the Former Member's patients, including but not limited to the patients listed in Schedule "A", the patient record contained no indication that a follow-up took place, or was offered, or that the Former Member advised of the need for long term checkups; and/or,
 - h. explaining what the patient may expect regarding the outcomes of their treatment.
15. During the Relevant Period, for one or more patients including, but not limited to, one or more patients listed in Schedule "A", the Former Member permitted individuals who were not registered chiropodists or podiatrists to dispense orthotics and/or compression stockings.
16. The Former Member did not take all reasonable steps necessary to ensure that his patient records were being kept in accordance with the regulations governing records and/or the College of Chiropodists of Ontario's Standards of Practice pertaining to Records. In particular, during the Relevant Period, one or more of the patient records including, but not limited to, one or more of the records for patients listed in Schedule "A" did not contain:
- a. a history of the patient;
 - b. a written informed consent and/or reasonable information that an informed consent was obtained;
 - c. reasonable information about every examination performed and reasonable information about every clinical finding, diagnosis and assessment made by the Former Member; and/or,
 - d. reasonable information about every order made by the Former Member for examinations, tests, consultations or treatments to be performed by any other person; and/or,
 - e. reasonable information about all significant advice given by the Former Member including treatment options.

17. During the Relevant Period, the Former Member, directly and/or indirectly, offered free shoes and/or gift certificates to one or more patients including, but not limited to, one or more patients listed in Schedule “B”, when those patients purchased orthotics and/or compression stockings.
18. In or about 2018, the Former Member was delisted from an insurance company, meaning that patients were no longer allowed to claim benefits where the Former Member provided professional services and/or prescribed orthotics.
19. By reason of the conduct alleged in paragraphs 1-18 above, the Former Member engaged in professional misconduct in that he violated section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991*, and in particular, the following subsections of Ontario Regulation 750/93 under the *Chiropody Act, 1991*:
 - i. 1.2 (Failing to meet or contravening a standard of practice of the profession), and, in particular, the standards pertaining to:
 1. Assessment and Management;
 2. Patient Relations;
 3. Prescription Custom Foot Orthoses;
 4. Prescription Footwear; and/or,
 5. Records;
 - ii. 1.3 (Doing anything to a patient for a therapeutic, preventative, palliative, diagnostic, cosmetic, or other health-related purpose in a situation in which a consent is required by law, without such consent);
 - iii. 1.14 Providing treatment to a patient where the Former Member knows or ought to have known that the provision of the treatment is ineffective, unnecessary or deleterious to the patient or is inappropriate to meet the needs of the patient);
 - iv. 1.17 (Failing to keep records as required by the regulations);
 - v. 1.18 (Falsifying a record relating to the Former Member’s practice);
 - vi. 1.21 (Submitting an account or charge for services that the Former Member knows is false or misleading);
 - vii. 1.30 (Contravening the *Chiropody Act, 1991*, the *Regulated Health Professions Act, 1991*, or the regulations under either of those Acts) and, in particular:

1. the provisions of Ontario Regulation 750/93 under the *Chiropody Act, 1991* specified in this Notice of Hearing,
 2. sections 13 and 17 of Ontario Regulation 203/94 under the *Chiropody Act, 1991*, pertaining to the required record-keeping practices.
- viii. 1.33 (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); and/or [*sic*]

Appendix "A"

1. A.F.
2. S.F.
3. E.F.
4. P.B.
5. D.B.
6. D.G.
7. G.P.
8. R.P.
9. S.P.
10. N.P.
11. J.T.
12. S.F.
13. N.F.
14. P.F.
15. R.F.
16. S.B.

Appendix "B"

1. P.B.
2. D.B.
3. D.G.
4. G.P.
5. R.P.
6. S.P.
7. N.P.
8. J.T.
9. S.F.
10. N.F.
11. P.F.
12. R.F.
13. S.B.

STATEMENT OF ALLEGATIONS (MORAVAC – File 1812)

1. Ivan Moravac (the “**Former Member**”) initially registered with the College in August 1986. On April 13, 2018, the Former Member resigned his membership with the College.
2. Within the years 2015 to 2018 (the “**Relevant Period**”), the Former Member engaged in the practice of chiropody at Sole Feet Health Inc. (“**Sole Feet**”) and/or Henley Foot and Ankle Clinic (“**Henley**”). The Former Member is the direct, indirect, and/or beneficial owner of Sole Feet.
3. In approximately March or April 2018, the Former Member abruptly closed Sole Feet without providing notice to his patients and/or the College. When patients attempted to contact Sole Feet and/or the Former Member, the Former Member did respond to their inquiries.
4. The Former Member discontinued professional services to his patients without arranging for alternative services, without giving patients a reasonable opportunity to arrange alternative services, and without a request from patients to discontinue professional services.
5. For a number of patients, including but not limited to J.C. and C.M., the Former Member and/or his designates assisted clients to submit claims to insurers for orthotics, orthopedic shoes, and/or compression stockings, and was paid for those claims, but failed to dispense those products to his patients.
6. With respect to patient J.C., the Former Member was paid to repair an old pair of orthotics which were not repaired and/or provided to J.C. prior to the Former Member’s resignation, nor did the Former Member advise J.C. of the closure of Sole Feet and his resignation from the College.
7. The Former Member left at least five pairs of orthotics, belonging to patients H.B., B.B., and R.L., at Sole Feet without arranging for the orthotics to be dispensed and/or dispensing them himself.
8. The Former Member did not take reasonable steps to ensure that his patient records were being kept in accordance with the regulations governing records and/or the College of Chiropodists of Ontario’s Standards of Practice pertaining to records. In particular, the Former Member:
 - a. failed to securely store his patient records and ensure his patient records remained confidential when he left patient records in an unlocked barn with a leaking roof outside his home;
 - b. failed to securely store his patient records and ensure his patient records remained confidential when he left patient records in the Sole Feet clinic in bags, shelves, and/or unlocked cabinets, when he no longer practised at the clinic; and/or

- c. failed to take reasonable steps after resigning his membership with the College to ensure:
 - i. his patient records were transferred to another member of the College; and/or
 - ii. that his patients were notified that he intended to resign and notified that they could obtain copies of their patient record(s).

- 9. During the course of the investigation, the Former Member provided inaccurate and/or misleading information to the College and/or its investigators regarding his ownership interest (direct or beneficial) in Sole Feet.

- 10. By reason of the conduct alleged in paragraphs 1-9 above, the Former Member engaged in professional misconduct in that he violated section 51(1)(c) of the *Health Professionals Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991*, and in particular, the following subsections of Ontario Regulation 750/93 under the *Chiropody Act, 1991*:
 - i. 1.2 (Failing to meet or contravening a standard of practice of the profession), and, in particular, the standards pertaining to:
 - 1. Patient Relations; and/or
 - 2. Records;
 - ii. 1.8 (Discontinuing professional services that are needed without arranging alternative services or giving patients a reasonable opportunity to arrange alternative services);
 - iii. 1.12 (Breaching an agreement with patient relating to professional services for the patient or fees for such services);
 - iv. 1.17 (Failing to keep records as required by the regulations);
 - v. 1.30 (Contravening the *Chiropody Act, 1991*, the *Regulated Health Professions Act, 1991*, or the regulations under either of those Acts) and, in particular:
 - 1. the provisions of Ontario Regulation 750/93 under the *Chiropody Act, 1991* specified in this Notice of Hearing,
 - 2. sections 13 and 20 of Ontario Regulation 203/94 under the *Chiropody Act*, pertaining to the required record-keeping practices;
 - vi. 1.33 (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).

Member's Plea

The Member admitted that he engaged in professional misconduct as described at paragraph 19 of the Notice of Hearing (File No. 1718) and paragraph 10 of the Notice of Hearing (File No. 1812).

The panel conducted an oral plea inquiry and was satisfied that the Member's admissions were voluntary, informed and unequivocal.

Agreed Statement of Facts

Counsel for the College and the Member advised the panel that agreement had been reached on the facts and introduced an Agreed Statement of Facts, which provides as follows:

The parties agree that the Discipline Committee of the College of Chiropractors of Ontario may accept the following facts as true:

1. Ivan Moravac (the "**Former Member**") initially registered with the College of Chiropractors of Ontario (the "**College**") in August 1986. On April 13, 2018, the Former Member resigned his membership with the College.

Facts Admitted to With Respect to File 1718

2. Within the years 2015 to 2018 (the "**Relevant Period**"), the Former Member engaged in the practice of chiropractic at Sole Feet Health Inc. ("**Sole Feet**"). The Former Member is a beneficial owner of Sole Feet as it is a corporation registered to the Former Member's wife.
3. In August of 2017, the College received information that the Former Member was running an insurance benefits scheme whereby clients and potential clients were incentivized with gift cards to maximize insurance benefits relating to orthotics, orthopaedic shoes and/or compression stockings. The information suggested that the Former Member targeted members of the Toronto Police Service ("**TPS**") as clients.
4. In or about September of 2017, an investigator, retained by the College, contacted Sole Feet under the pretext of having been recently hired by TPS and in need of orthotics.
5. On or about September 27th, 2017, the investigator attended at Sole Feet where:
 - a. she was immediately advised that her insurance coverage would allow her to claim two pairs of orthotics for \$1000 Cdn;

- b. she filled out a client information sheet which included a request for her group and policy number for insurance purposes;
 - c. she was assessed, on a limited basis, by the Former Member and advised that she required orthotics;
 - d. she was then advised again that her insurance coverage would allow her to claim two pairs of orthotics for \$1000 Cdn, though she indicated that she only desired to purchase a single pair;
 - e. the investigator did not see the Former Member again with respect to her assessment and treatment. Scans of her feet were taken by a woman who was previously sitting at the reception desk (the “**Receptionist**”). The scans were not reviewed by the Former Member with the investigator;
 - f. she was advised by the Receptionist that the promotion involving mall gift certificates for TPS employees ceased a month prior but that they had replaced that program with a give-away for free shoes;
 - g. she was provided with a catalogue for shoes and advised that she could otherwise go on the website www.TOG.com and order a pair of shoes of her choice; and,
 - h. she was charged \$500 Cdn for the visit and orthotics which she paid by credit card before departing.
6. On September 28, 2017, the investigator called Sole Feet and ordered a pair of boots from the catalogue.
 7. On October 6, 2017, the investigator attended at Sole Feet where a chiropractor dispensed the orthotics. The Former Member was not present, nor was there any further contact or follow-up.
 8. On November 30, 2017, the investigator attended at Sole Feet to pick up the boots. She was not required to sign any documentation or pay for them.
 9. In respect of the investigator’s assessment and treatment, the Former Member did not:
 - a. take an adequate medical history;
 - b. obtain and document, in a timely manner, informed patient consent;
 - c. perform an adequate chiropody assessment, including a gait analysis;
 - d. provide a range of treatment options;
 - e. personally perform the casting or scanning procedure or otherwise have a designated chiropodist, podiatrist, or properly trained assistant/support person do so, as outlined in the standards of practice;

- f. personally evaluate the casts or scans to ensure they were an accurate reflection of the investigator's condition and the contours of the investigator's foot, as outlined in the standards of practice;
 - g. personally fit the orthotics to ensure that the device met the prescription and the contours of the investigator's foot or ensure that those steps were performed by another chiropodist or podiatrist;
 - h. offer and/or conduct a follow-up and/or advise the investigator of the needs for long term checkups after the orthotics had been dispensed; and,
 - i. explain what the investigator may expect regarding the outcomes of her treatment.
10. The Former Member's record of the investigator's visit, including but not limited to the documentation regarding clinical findings, prescription and receipt, was false, inaccurate and misleading in that:
- a. it indicated that a physical cast was taken when it was not; and,
 - b. it indicated that a bio-mechanical examination was performed when it was not.
11. The Former Member's record of the investigator's visit did not contain:
- a. a history of the patient;
 - b. a written informed consent and/or reasonable information that an informed consent was obtained;
 - c. reasonable information about every examination performed and reasonable information about every clinical finding, diagnosis and assessment made by the Former Member;
 - d. reasonable information about every order made by the Former Member for examinations, tests, consultations or treatments to be performed by any other person; and,
 - e. reasonable information about all significant advice given by the Former Member including treatment options.
12. The investigator subsequently conducted an investigation of the Former Member's practice during the Relevant Period.
13. In respect of the patients listed in Schedule "A", the Former Member overprescribed and/or gave patients unnecessary prescriptions in that:
- a. the Former Member did not perform a sufficient examination and/or assessment of the patient, but nonetheless prescribed orthotics and/or orthopaedic shoes for them; and,

- b. the Former Member did not discuss other treatment options with the patient and/or determined if a different treatment was appropriate before prescribing orthotics and/or orthopaedic shoes as required per the standards.
14. During the Relevant Period, the Former Member prescribed orthotics to patients listed in Schedule “A” without:
- c. performing an adequate chiropody assessment, including a gait analysis and/or biomechanical examination;
 - d. obtaining and documenting, in a timely manner, informed patient consent;
 - e. providing a range of treatment options;
 - f. personally performing the casting or scanning procedure or otherwise having a designated chiropodist, podiatrist, or properly trained assistant/support person do so, as outlined in the standards of practice;
 - g. personally evaluating the casts or scans that were taken by staff to ensure they were accurate or ensuring another designated chiropodist or podiatrist did so. In particular, the Former Member did not ensure that the patient’s foot was compared to the cast or scan to verify that it was an accurate reflection of the patient’s condition and the contours of the patient’s foot, as outlined in the standards of practice;
 - h. personally fitting the orthotics and/or orthopedic shoes to ensure that the device met the prescription and the contours of the patient’s foot and/or ensuring that those steps were performed by another chiropodist or podiatrist;
 - i. offering and/or conducting a follow-up and/or advising the patient of the needs for long term checkups after the orthotics and/or orthopedic shoes had been dispensed. In particular, for the patients listed in Schedule “A”, the patient record contained no indication that a follow-up took place, or was offered, or that the Former Member advised of the need for long term checkups; and,
 - j. explaining what the patient may expect regarding the outcomes of their treatment.
15. During the Relevant Period, for the patients listed in Schedule “A”, the Former Member permitted individuals who were not registered chiropodists or podiatrists to dispense orthotics and/or compression stockings.
16. The Former Member did not take all reasonable steps necessary to ensure that his patient records were being kept in accordance with the regulations governing records and the College of Chiropodists of Ontario’s Standards of Practice pertaining to Records. In particular, during the Relevant Period, the records for patients listed in Schedule “A” did not contain:
- a. a history of the patient;

- b. a written informed consent and/or reasonable information that an informed consent was obtained;
 - c. reasonable information about every examination performed and reasonable information about every clinical finding, diagnosis and assessment made by the Former Member;
 - d. reasonable information about every order made by the Former Member for examinations, tests, consultations or treatments to be performed by any other person; and,
 - e. reasonable information about all significant advice given by the Former Member including treatment options.
17. During the Relevant Period, the Former Member, directly or indirectly, offered free shoes and/or gift certificates to the patients listed in Schedule “B”, when those patients purchased orthotics and/or compression stockings.
18. In 2018, the Former Member was delisted from an insurance company, meaning that patients were no longer allowed to claim benefits where the Former Member provided professional services and/or prescribed orthotics.

Facts Admitted to With Respect to File 1812

19. In approximately March or April 2018, the Former Member closed Sole Feet without providing notice to his patients or the College. When patients attempted to contact Sole Feet and/or the Former Member, the Former Member did not respond to their inquiries.
20. The Former Member discontinued professional services to his patients without arranging for alternative services, without giving patients a reasonable opportunity to arrange alternative services, and without a request from patients to discontinue professional services.
21. For patients J.C. and C.M., the Former Member had assisted those clients to submit claims to insurers for orthotics and/or orthopedic shoes and were paid for those claims but failed to dispense those products. If the Former Member were to testify, he would state that these clients did ultimately receive their orthotics and/or orthopedic shoes though it did not occur until after the College investigation.
22. With respect to patient J.C., the Former Member was paid to repair an old pair of orthotics which were not repaired and/or provided to J.C. prior to the Former Member’s resignation, nor did the Former Member advise J.C. of the closure of Sole Feet and his resignation from the College. If the Former Member were to testify, he would state that he tried to track down the orthotics and when he could not find them, he refunded J.C. the money for the orthotics. The refund occurred after the College investigation.
23. The Former Member left at least five pairs of orthotics, belonging to patients H.B., B.B., and R.L., at the previous address of Sole Feet without arranging for the orthotics to be

dispensed and/or dispensing them himself. If the Former Member were to testify, he would state that he refunded the money to these patients for the orthotics, though it did not occur until after the College investigation.

24. The Former Member did not take reasonable steps to ensure that his patient records were kept in accordance with the regulations governing records and/or the College of Chiropodists of Ontario's Standards of Practice pertaining to records. In particular, the Former Member:
- a. failed to securely store his patient records and ensure his patient records remained confidential when he left patient records in plastic bags in an unlocked barn with a leaking roof outside his home;
 - b. failed to securely store his patient records and ensure his patient records remained confidential when he left patient records in the Sole Feet clinic in bags, shelves, and/or unlocked cabinets, when he no longer practised at the clinic; and/or
 - c. failed to take reasonable steps after resigning his membership with the College to ensure his patient records were transferred to another member of the College; and,
 - d. failed to notify his patients that he intended to resign and that they could obtain copies of their patient record(s).
25. During the course of the investigation, the Former Member provided misleading information to the College and its investigators regarding his ownership interest in Sole Feet, repeating that he was only an employee of the company but failing to disclose that the company was owned by his wife and that he was therefore a beneficial owner.

Acknowledgement of Professional Misconduct

26. By reason of the conduct alleged in paragraphs 1-18 above, the Former Member acknowledges that he committed professional misconduct in that he violated section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991*, and in particular, the following subsections of Ontario Regulation 750/93 under the *Chiropody Act, 1991*:
- a. 1.2 (Failing to meet or contravening a standard of practice of the profession), and, in particular, the standards pertaining to:
 - i. Assessment and Management;
 - ii. Patient Relations;
 - iii. Prescription Custom Foot Orthoses;
 - iv. Prescription Footwear; and,
 - v. Records.

- b. 1.3 (Doing anything to a patient for a therapeutic, preventative, palliative, diagnostic, cosmetic, or other health-related purpose in a situation in which a consent is required by law, without such consent);
 - c. 1.14 Providing treatment to a patient where the Former Member knows or ought to have known that the provision of the treatment is ineffective, unnecessary or deleterious to the patient or is inappropriate to meet the needs of the patient);
 - d. 1.17 (Failing to keep records as required by the regulations);
 - e. 1.18 (Falsifying a record relating to the Former Member's practice);
 - f. 1.21 (Submitting an account or charge for services that the Former Member knows is false or misleading);
 - g. 1.30 (Contravening the *Chiropody Act, 1991*, the *Regulated Health Professions Act, 1991*, or the regulations under either of those Acts) and, in particular:
 - i. the provisions of Ontario Regulation 750/93 under the *Chiropody Act, 1991* specified in this Notice of Hearing; and,
 - ii. sections 13 and 17 of Ontario Regulation 203/94 under the *Chiropody Act, 1991*, pertaining to the required record-keeping practices.
 - h. 1.33 (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);
27. By reason of the conduct alleged in paragraphs 1 and 19-25 above, the Former Member acknowledges that he committed professional misconduct in that he violated section 51(1)(c) of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991*, and in particular, the following subsections of Ontario Regulation 750/93 under the *Chiropody Act, 1991*:
- a. 1.2 (Failing to meet or contravening a standard of practice of the profession), and, in particular, the standards pertaining to:
 - i. Patient Relations; and,
 - ii. Records;
 - b. 1.8 (Discontinuing professional services that are needed without arranging alternative services or giving patients a reasonable opportunity to arrange alternative services);
 - c. 1.12 (Breaching an agreement with patient relating to professional services for the patient or fees for such services);

- d. 1.17 (Failing to keep records as required by the regulations);
- e. 1.30 (Contravening the *Chiropody Act, 1991*, the *Regulated Health Professions Act, 1991*, or the regulations under either of those Acts) and, in particular:
 - i. the provisions of Ontario Regulation 750/93 under the *Chiropody Act, 1991* specified in this Notice of Hearing; and,
 - ii. sections 13 and 20 of Ontario Regulation 203/94 under the *Chiropody Act*, pertaining to the required record-keeping practices; and,
- f. 1.33 (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).

Former Member's Acknowledgements

- 28. The Former Member understands the nature of the allegations that have been made against him and that by voluntarily admitting to these allegations, he waives his right to require the College to otherwise prove the case against him.
- 29. The Former Member understands that the Discipline Committee can accept that the facts herein constitute professional misconduct.
- 30. The Former Member 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 his name.
- 31. The Former Member understands that any agreement between him and the College does not bind the Discipline Committee.
- 32. The Former Member has had the opportunity to consult legal counsel before signing this Agreed Statement of Facts but has declined to do so.

Reasons for Decision

In coming to this decision, the Panel considered the following: the Member's admission of professional misconduct, the Agreed Statements of Facts, and the parties' submissions.

Following deliberations, the Panel was satisfied that the conduct described in the Agreed Statement of Facts did constitute professional misconduct as alleged in the Notice of Hearing and as admitted by the Member.

The Panel found that members of the profession would reasonably regard the conduct admitted in respect of File 1718 to be disgraceful, dishonourable and unprofessional. The Panel found that members of the profession would reasonably regard the conduct admitted in respect of File 1812 to be dishonourable.

Penalty

Counsel for the parties advised the panel that a Joint Submission as to Penalty and Costs had been agreed upon. The Joint Submission as to Penalty and Costs provides as follows:

1. The College of Chiropodists of Ontario (the “**College**”) and Mr. Ivan Moravac (the “**Former Member**”) agree and jointly submit that the Discipline Committee ought to make the following order:
 - (a) An Order directing the Registrar to revoke the Member’s certificate of registration.
 - (b) An Order requiring the Member to appear before the panel to be reprimanded and the fact of the reprimand to be recorded on the Register of the College.
 - (c) An Order requiring the Member to pay the College’s costs fixed in the amount of \$20,000 to be paid by way of certified cheque, or its equivalent, immediately following the Member’s discipline hearing.
2. The Member acknowledges that pursuant to section 56 of the *Health Professions Procedural Code*, being Schedule 2 to the *Regulated Health Professions Act, 1991*, the decision and reasons, or a summary thereof, will be published in the College’s annual report and may be published in any other publication of the College with the Member’s name.
3. The Member acknowledges that this Joint Submission as to Penalty is not binding upon the Discipline Committee.
4. The Member acknowledges that he has had the chance to receive independent legal advice but has declined to do so.

Decision and Reasons for Penalty

The Panel considered the Joint Submission of the parties on Penalty and Costs. The Panel recognized that the penalty should maintain high professional standards, preserve public confidence in the ability of the College to regulate its members, and, above all, protect the public.

The Panel concluded that the proposed penalty is reasonable and in the public interest and therefore accepted the Joint Submission as to Penalty. The Panel also determined that the proposed penalty reflects these principles of both a general and specific deterrence.

In coming to its decision to accept the Joint Submission, the Panel considered the following mitigating factors:

1. By admitting the allegations of professional misconduct and entering into an Agreed Statement of Facts and a Joint Submission as to Penalty, the Former Member has saved the College considerable time and expense which would have been incurred had the matter proceeded on a contested basis.
2. The Panel notes that as part of this resolution, the Former Member agreed to pay the College a portion of its costs to investigate and prosecute this matter. While the costs are not part of the penalty, it is worth recognizing that the Former Member agreed to make this payment.

The Panel considered the following aggravating factors as well:

1. The professional misconduct was not an isolated incident, rather it consisted of multiple files and breaches of similar standards of practice. This includes previous disciplinary action in 2006 in which the Former Member was reprimanded for breaches of the same standards of practice. In addition, the Former Member failed to demonstrate regret and remorse for his conduct.
2. The Former Member's conduct demonstrated minimal interest in existing healthcare standards and legislation that is in place to protect patients.

3. The Panel is unconvinced in the potential for rehabilitation of this Former Member and considers the permanent revocation of the Member's certificate of registration essential in protecting the public and represents a significant specific deterrent in response to the Former Member's actions.
4. The Panel considers this penalty, and the publication of the case on the College website and other publications an effective general deterrent demonstrating to the profession as a whole that this type of conduct will not be tolerated.
5. The reporting of this case on the College website is consistent with the College's mandate to protect the public and to do so in a fair and transparent manner.

Reprimand

At the conclusion of the hearing, having confirmed that the Former Member waived any right to appeal, the Panel delivered its reprimand. A copy of the reprimand is included as an attachment to these reasons.

I, Adrian Dobrowsky, sign this Decision and Reasons for the Decision as Chairperson of this Discipline panel and on behalf of the members of the Discipline panel as listed below:



Adrian Dobrowsky, Chairperson

November 15, 2018

Date

Alladin Mohaghegh
Peter Guy

REPRIMAND

As you know, Mr. MORAVAC, as part of its penalty, this Discipline panel has ordered you be given an oral reprimand.

The fact that you have received this reprimand will be part of the public portion of the Register and, as such, part of your record with the College.

Although you will be given an opportunity to make a statement at the end of the reprimand, this is not an opportunity for you to review the decision made by the Discipline panel, nor a time for you to debate the merits of our decision.

The panel has found that you have engaged in professional misconduct in the following ways:

1. Breaching the standards of practice of the profession;
2. Not obtaining informed consent;
3. Prescribing and recommending treatments when they were not medically necessary;
4. Failing to keep proper records;
5. Falsifying a record;
6. Submitting an account or charge for services that was false and misleading;
7. Discontinuing services without allowing time to arrange for an alternative;
8. Breaching an agreement with patients to provide certain services.

The fact that you engaged in professional misconduct is a matter of profound concern. You have brought discredit to the entire profession and to yourself. Public confidence in this profession has been put in jeopardy. The result of your misconduct is that you have let down the public, the profession, and yourself.

Your conduct is totally unacceptable to your fellow chiropractors and to the public. You have also contributed to the increased scrutiny of our profession by the insurance industry.

As you heard earlier, you will now be given an opportunity to respond if you wish. Remember this is not an opportunity for you to review the decision or debate its correctness. Do you have any questions or do you wish to make any comments?

Thank you for attending today. We are adjourned.