



College of Chiropodists of Ontario

Council Meeting Agenda

Friday, February 26, 2021 9:00 a.m.

[Zoom Meeting](#)

(if the link does not work, copy, and paste: <https://zoom.us/j/92262925959>)

You will be placed into the waiting room upon arrival

9:00 a.m.	1.0	Call to Order
	1.1	Call to Order, Appointment of Secretary
	1.2	Welcome Guests and introduction of Acting Registrar
	1.3	Approval of Agenda
	1.4	Declaration of Conflict of Interest
	1.5	Approval of Minutes of October 20, 2020 Council Meeting**

9:20 a.m.	2.0	In Camera
	2.1	Personnel Issue (pursuant to section 7(2)(d) of <i>Health Professions Procedural Code</i>)
	2.2	Approval of <i>In Camera</i> Minutes of February 18, 2021 Meeting

9:50 a.m.	3.0	Decision Items
	3.1	Committee Appointments (and Chair of Audit)**
	3.2	Bylaw Amendments re: Standards & Guidelines Committee**
		3.2.1 Appointment of S & G Committee Members and Chair**

10:45-11:00 a.m.		Break
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11:00 a.m.	3.0	Decision Items (continued)
	3.3	Registration Examination – for 2021 (and 2020 supplemental)**
	3.4	Member Request re Prescribing and Injecting**
	3.5	Advertising Guideline and Social Media Advisory**

11:30 a.m.	4.0	Discussion Items
	4.1	Proposed Amendments to Drug Regulation and Professional Misconduct Regulation – Update
	4.2	HPRO Governance Training for Council Members
	4.3	Registrar Search – Update
	4.4	College Performance Measurement Framework - Update
	4.5	Budget – Update

12:00-12:30 p.m.		Lunch Break
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12:30 p.m.	5.0	Other Committee Reports
	5.1	ICRC**
	5.2	Discipline Committee**
	5.3	Registration Committee**
	5.4	Quality Assurance Committee**

12:40 p.m.	6.0	Working Group/Other Committee Reports
	6.1	Technical Committee**
	6.2	Registration Examination Committee**
	6.3	Audit Committee**
12:50 p.m.	7.0	Next Meeting
	7.1	Council Meeting Dates for 2021: <ul style="list-style-type: none"> • February 26, 2021 • June 25, 2021 • October 29, 2021
	7.2	Proposed Agenda Items for Next Council Meeting
1:00 p.m.	8.0	Adjournment

*The agenda items may not necessarily be dealt with in the order in which they appear.

** Denotes an agenda item with supporting document

Draft Minutes
Meeting of the Council of the College of Chiropractors of Ontario
180 Dundas Street West
By ZOOM
Friday, October 23, 2020
9:00 a.m. - 4:00 p.m.

Present*Professional Members*

Melanie Atkinson
 Nosheen Chaudhry
 Ed Chung
 Matt Doyle
 Peter Ferguson
 Sasha Kozera
 Irv Luftig
 Cesar Mendez
 Agnes Potts
 Peter Stavropoulos
 Elliot To

Public Members

Jim Daley
 Douglas Ellis
 Andrew Gassmann
 Allan Katz
 Winnie Linker
 Agnes Potts

Regrets:

Staff: Felecia Smith, Registrar and CAO

Legal Counsel: Alan Bromstein

Part 3**5. For Decision**

The Registrar acted as Chair. She welcomed the new members Melanie Atkinson, Doug Ellis and Irv Luftig. A roll call was taken. The Registrar also welcomed Nosheen Choudhry & Yulian Pavlyuk

Part 1

1. **Call to Order, Ray McDonald was appointed Secretary,**

Approval of the Agenda

MOTION

MOVED BY: Jim Daley

SECONDED BY: Allan Katz

THAT Council approve the agenda, for the October 23, 2020 meeting of Council.

CARRIED UNANIMOSLY

Declaration of Conflict of Interest, Taping Policy,

Part 3

5. For Decision

5.1 Update on Election

The Registrar updated Council about the election. In District 3, Matt Doyle was elected for a second term. There was an election in that district and there was a 45% turnout. Melanie Atkinson was acclaimed in District 2. In District 5, there was a bi-election for Sonia Maragoni's position on Council. No one came forward on two calls for nominations. A letter was sent out to chiropody members and eight people came forward. The Executive reviewed all the applications and recommended two people, Nosheen and Yulian, who were present at the meeting to address Council. Both individuals addressed Council.

MOTION

Moved by: Agnes Potts

Seconded by Douglas Ellis

THAT council conduct a secret ballot for the elections to Council

CARRIED UNANIMOUSLY

Nosheen was appointed to Council for District 5 for the 20/21 year. It is a one year term and there will be an election in that District next year.

(i) Chiropodist Members

(a) District 3 – Matt Doyle elected for a second 3-year term

(b) District 4 – Melanie Atkinson acclaimed

(c) District 5 bi-election to be appointed:

Nosheen Chaudhry

Yulian Pavlyuk

(ii) Podiatrist Member - Districts 3&4 Combined District 2

Irv Luftig – acclaimed

5.2 Election of President and Vice-President

Peter Stavropoulos was acclaimed as President of the College.

Peter Ferguson was acclaimed as Vice-President to the College.

5.3 Election of Remaining Positions on Executive

Matt Doyle was acclaimed as the third professional member of Council.

Jim Daley and Winnie Linker were nominated for the public members position on Council. A vote was cast and there was a tie. Three options were proposed. The first is another vote; the second was that either Jim or Winnie could withdraw to allow the other one to be acclaimed on the understanding that they can still run for the second position. The third option is to determine if anyone else was intending to run. Before voting a second time, Council was asked if another public member intended to run. Mr. Stavropoulos nominated Andrew Gassmann. Mr. Daley withdrew.

Therefore, Winnie is the successful first public member. Andrew Gassmann was acclaimed as the second public member of Executive.

MOTION

Moved by: Peter Stavropoulos

Seconded by: Mr. Jim Daley

THAT Council approve destroying any and all election ballots cast

CARRIED UNANIMOUSLY

The Chair was handed from the Registrar to the President

Part 1

Approval of the Minutes of June 26, 2020

MOTION

Moved by: Ms. Potts

Seconded by: Mr. Daley

That Council approve the adopting of the minutes of the June 26th 2020 meeting

CARRIED UNANIMOUSLY

****THE AGENDA ITEMS MAY NOT NECESSARILY BE DEALT WITH IN THE ORDER THEY
APPEAR****

Part 2

1. Discussion

4.1 Proposed Amendments to Drug Regulation

Mr. Mendez brought Council up-to-date about where the College is with the proposed amendments to the drug regulation. Switching from a list of drugs to classes will allow member to prescribe the best, the safest and the most effective drugs for some of the cases that we are currently seeing. The draft regulation was posted on the Ministry site for stakeholder comments. A week ago a response

came in from the OMA which is included in your package. It was not very supportive and also not terribly surprising. The same issues that are reflected in the OMA letter come up repeatedly - how will we regulate this as a college; what is the educational standpoint. We have experts in place that can assess the knowledge base of our members. We implemented that the first time around. They have not made the effort to review what we submitted in the past because their concerns have already been addressed in terms of what we have submitted to the Ministry. Every time these arise, we have the public's best interest at the forefront. For the OMA to say it is okay for patients to have to go back to their general practitioner two or three times to make things right makes no sense. If we can safely address that and do it efficiently and save money, we can save frustration while providing the best care for our patients which is really what we are trying to do and that is all we tried to do. Unfortunately, their comments do not seem to support that.

4.2 Spousal Exemption Regulation – Update

This matter had been outstanding for 6-7 years but the regulation is now in place. Members can now treat their spouses without it being sexual abuse. The President indicated that the Registrar picked up on the fact that government overlooked us when they were revisiting this issue. We would have been in line with the other Colleges waiting to have this done. This is something that members should be able to offer their patient, particularly if they are our partners or spouses, with safety and all the due precautions that should be in place whenever we are treating any patients.

4.3 Updates on other Regulations with Proposed Amendments

The college has two regulations that need finalizing – the registration regulation and the professional misconduct regulation. Ms. Henry advised the Registrar earlier in the week that legal counsel was under the misunderstanding that the regulation had already been sealed. The Registrar advised that it should be sealed because there is nothing further to do. In terms of the Professional Misconduct regulation, we received many comments back and are working through them.

4.4 Processes that are now online at the College

There are many processes that are now online. To name a few – annual renewal, the corporation financial system, the continuing education logs and review. We also now have 3 social media sites.

4.5 Registration Examination – Update

The examination took place on Saturday and Sunday, October 17 & 18 October. We found out at 4:00 p.m. on Friday that we were a confirmed 'go' for the exam. There were many things that we had to do to convince the Michener that we would adhere to all the COVID requirements. The OSCE was a major undertaking for insuring that we met the requirements. The College felt the pain of the graduates. The College also did everything possible to ensure that the process was proper, with the assistance of the psychometrist.

4.8 Government Relations

The Executive Committee felt that given everything that is happening in the world of COVID that this would not be an appropriate time to pursue the College's desired scope expansion and title change effort. Given the enormous changes that are occurring round the health care system presently and the need for the College to finalize many of the regulations our efforts will be devoted to tidying these things up. We have not forgotten our belief that this pursuit is important but the timing is currently not appropriate.

4.9 Ministry of Health's Rollout of their New College Performance Measurement Framework

The CPMF will be an enormous amount of work for a College that has 4 employees. The government is looking to ensure that there is a minimum standard of transparency and there are guidelines in place. There are measures that are being put in place. The information is explained in the College parcel.

Short recess. Nosheen Choudhry and Allan Katz left the meeting.

In camera session taking place.

Roll call taken

MOTION

Moved by: Doug Ellis

Seconded by: Irv Luftig

That council confirm that the meeting of the Council as a whole in the exclusion of the public was for the purpose of receiving a report from the Registrar's Performance and Compensation Committee and for that purpose only.

CARRIED UNANIMOUSLY

The President reported that he will have something formal that he will be providing as they feel that they should. The President stated that early next week the Registrar will know that he will have something for her.

4.10 Financial Information – Update

Mr. Daley explained that from a revenue perspective we are on track with where we expected to be except for a couple of timing issues such as exam fees and first-time registrant fees but otherwise everything is pretty much in line. Expenses are either near budget and there are no major discrepancies other than legal fees for ICRC. This reflects a very active year in complaints. A lot of this has come from the zero tolerance policy that was adopted a little while ago. This has left us with a deficit of just short of \$82,000.00. We are in a strong position to weather this storm. Cash at the end of August is at almost \$1.9 million and a strong equity position.

There are two major concerns with complaints – whether the volume of complaints continues to come in as they have over the last little while and secondly, we have 25 discipline hearings scheduled. We budgeted for about \$11,000 per hearing. Our current budget was for thirteen hearings which will probably not occur. We have no idea how many will be contested. If we average \$25,000 per case, that is about \$625,000. We are currently in a good position to manage this but we will need to pay very close attention in our budgeting going forward.

Mr. Bromstein advised that there is statutory authority which limits you in going into an overdraft or deficit position. The College can move into a deficit position presuming we can obtain whatever finances we need to meet our day-to-day matter. In essence, the College is a taxing authority. There is nothing that stops us from doing this. There is a summary for every case that goes to the Registrar outlining the time spent by each individual on each file. The rates are transparent and agreed to at the beginning of each year. Mr. Bromstein reviews each account. The amounts are due to the number of cases; time spent by panels and the lawyers. Any file sent to discipline is going to be much more expensive because you have allegations to prepare that have to be done in a particular form. Mr. Daley responded to a question about why there is an increase by saying that

now there are maybe three or four meetings involving investigation and legal counsel is present at each meeting. A lot more cases have been referred. He said it would be inappropriate to audit the invoices. The bills reflect the volume and complexity of what the College is doing that clearly drives this increase and is not unexpected. Mr. Daley indicated that he did not think the College was in trouble. It is unlikely that we will need a fees increase but we will need to pay close attention to it.

Mr. Mendez indicated that in his role as Chair, he has inherited some cases from many years ago that have been much more complex than the College has ever has to deal with. It is the College's mandate to treat these appropriately and adjudicate them as necessary. We cannot say a typical case would cost x; these cases are complex and that alone will drive costs up significantly. Once a complaint comes in, the College is going to investigate it and treat it with all due process. Cutting back on proper legal advice is not the way to cut costs. The Registrar explained that the reason the rent is higher this year is because she had negotiated 4-5 months free when she renegotiated our lease.

Part 3

5. For Decision

5.5 Prescription Custom Foot Orthoses –Comments Received from Circulation

The reason for the amendments was really a request from ICRC and legal counsel that there were issues that needed to be dealt with. The group was balancing the need to protect the public, as always, with the practical day to day circumstances in an office. A comment was made that a Council member could not understand some of the stakeholders feeling that this demeans them in a way. This is the College executing its mandate to protect the public and protecting the public means protecting the public from individuals who have put financial gain in front of the public's best interests.

The President commented that some of the people or groups that elected to comment on our standard felt that in some way that we were demeaning other professions or disparaging other professions, both regulated and not regulated, by the standard. That was never the intention. The College was doing what it needed to do to fulfil its mandate as it applies to this particular service that members provide to their patients.

MOTION

THAT Council finally approve the standard of practice for custom foot orthoses as set out in pages 55-64, effective immediately.

CARRIED UNANIMOUSLY

A comment was made that the new standard removes the grey areas and will definitely assist peer assessors.

The question was raised how amendments to our Standard restricts inter-disciplinary or inter-multi practice. Bioped was used as an example. They are owned by pedorthists and chiropodists work there and some may do the assessment portion. The pedorthist may make the orthotic and the pedorthist may dispense it. There is no problem with a chiropodist working alongside a pedorthist or being employed or employing a pedorthist to fabricate the orthotics. However, the end responsibility to the patient that they are both treating is to have the chiropodist or podiatrist dispense the orthotic to ensure that what was laid out on paper in the form of a prescription is actually being implemented in

the three-dimensional medical device that is being dispensed. We are not saying a pedorthist may not be qualified to dispense the orthotic but we feel there is a greater responsibility to the patient on behalf of the member to ensure that what is dispensed in actual fact fulfils the prescription that we have written and our unique set of skills makes us duly able to be able to.

If the patient comes in and is seen by the pedorthist, the chiropodist or podiatrist is not involved at all. The pedorthist is able to undertake the treatment free of the member. It is only when the member becomes involved in the assessment and prescribing that they have a duty to see it through.

5.8 Diversity and Inclusion –Developing a Policy

The Registrar had raised with Executive Committee whether we should be developing a policy on diversity and inclusion. Other Colleges are working on this. A couple of Colleges have hired a diversity specialist on staff. Council provided direction for the Registrar to work with the Practice Advisor to have this moving forward. It was suggested that not only should we liaise with the other health regulatory bodies, but also reach out to the Law Society of Ontario. They now require as part of the CPF hours certain numbers of hours in diversity education.

5.9 Survey of Membership regarding Member's finances & the pandemic – follow up from June Council meeting

The Registrar indicated that at the June 2020 Council meeting, there was a discussion whether we should be sending out a survey to our membership regarding their financial position in relation to the pandemic. Executive discussed this and felt it was too early. Council agreed – it will be deferred for now.

5.4 Formation of Statutory and Non- statutory Committee

The Executive Committee arranged the committees as follows:

Registration Committee

Chair – Matt Doyle

Professional Member – Sasha Kozera and Peter Stavropoulos

Public Members – Winnie Linker and Doug Ellis

ICRC

Chair – Peter Stavropoulos

Professional Members: Melanie Atkinson, Ed Chung, Matt Doyle, Peter Ferguson, Sasha Kozera, Irv Luftig, Cesar Mendez, Jamie Mazcko, Nosheen Chaudhry

Public Members: Jim Daley, Douglas Ellis, Andrew Gassmann, Allan Katz, Winnie Linker

Selected: Elliot To

Non-Council: Riaz Bagha, Peter Guy, Alan Frankel, Stephen Haber, Martin Hayles, Sylvia Kovari, Neil Naftolin, Nat Rave, Stephanie Shlemkevich, Ruth Thompson, Millicent Vorkapich-Hill

Discipline Committee

Chair: Cesar Mendez

Professional Members: Melanie Atkinson, Ed Chung, Matt Doyle, Peter Ferguson, Sash Kozera, Irv Luftig, Cesar Mendez, Peter Stavropoulos, Nosheen Chaudhry

Public Appointees Jim Daley, Doug Ellis, Andrew Gassmann, Allan Katz, Winnie Linker

Non-Council Appointees: Riaz Bagha, Peter Guy, Stephen Haber, Martin Hayles, Jamie Maczko, Marie McLaren, Millicent Vorkapich-Hill

Fitness to Practice

Chair: Peter Guy

Professional Members: Matt Doyle, Cesar Mendez

Public Appointees: Andrew Gassmann

Non-Council appointees – Pauline Looi, Kim Resmer, Pete Guy

Quality Assurance

Chair: Anna Georgiou

Professional Members

Public Members: Winnie Linker, Dog Ellis, Andrew Gassmann

Non-Council: Anna Georgiou, Annmarie McLaren, Brooke Mitchell, Millicent Vorkapich-Hill, Cindy Lewis

Patient Relations

Chair: Peter Stavropoulos

Professional Members: Matt Doyle, Peter Stavropoulos

Public Members: Andrew Gassmann, Allan Katz

Non- Council: Pauline Looi

Elections Committee:

Chair: Allan Katz

Committee members: Doug Ellis, Andre Gassmann, Allan Katz

Strategic Planning

Chair: Andrew Gassmann

Professional members: Peter Ferguson, Sasha Kozera, Peter Stavropoulos (ex-officio)

Public Members: Jim Daley, Allan Katz, Dou Ellis, Andrew Gassmann

Registrars Performance and Compensation Committee:

Chair: Andrew Gassmann

Professional Members: Peter Stavropoulos (ex officio), Peter Ferguson

Public Members: Andrew Gassmann, Winnie Linker, Allan Katz

Audit Committee

Chair – Jim Daley

Professional Members: Ed Chung, Andrew Gassmann. Peter Stavropoulos

Sedation Committee

Chair: Anna Georgiou

Professional Members

Public Members: Winnie Linker, Dog Ellis, Andrew Gassmann

Non-Council: Anna Georgiou, Annmarie McLaren, Brooke Mitchell, Millicent Vorkapich-Hill, Cindy Lewis

Technical Committee

Chair: Peter Ferguson

Professional Members: Peter Ferguson, Sasha Kozera, Matt Doyle, Ed Chung

Public Member: Andre Gassmann

Non-Council: John Lanthier and Tracy Oliver

Registration Examination Committee

Chair: Stephanie Shlemkevich

Professional Members: Peter Ferguson, Matt Doyle Nosheen Chaudhry

Non-Council Professional Members: Stephanie Shlemkevich, Marcella Cowan, Kathryn Ferguson, Jaky Fu, Megan Grantham, Kay Hayles, Andrew Klayman, Brooke Mitchell, Sonia Rebello, Donna Shewfelt, Martin Hayles

Standards & Guidelines

Chair: Nosheen Chaudhry

Professional Members: Nosheen Chaudhry, Ed Chung, Sasha Kozera, Melanie Atkinson, Peter Ferguson Irv Luftig

Selected Member: Eliot To

Non-Council appointed: Anna Georgiou, Peter Guy Martin Hayles, Cindy Lewis

MOTION

Moved by: Peter Stavropoulos

Seconded by: Agnes Potts

THAT Council appoint each of the statutory committee member who are not member of Council as non-Council committee members

CARRIED UNANIMOUSLY

MOTION

Moved by: Peter Stavropoulos

Seconded by: Ed Chung

THAT Council compose and appoint a chair for each of the statutory, standing and other committees and working groups as proposed and presented by the Executive Committee

CARRIED UNANIMOUSLY

5.6 Amendments to Fees by-law –Comments Received from Circulation

This is a proposed by-law amendment coming from the Executive committee. It reads “for the calendar year 2021 the annual fee is \$1,700 if paid on or before August 14, 2021 and \$1,900 if paid thereafter.”

The motion is extending the deadline to pay the fee to August 14, 2021.

MOTION

That Council approve the following amendments to the College’s Fees By-law:

1. Add the phrase, “Subject to article 4.03.1, to the beginning of Articles 4.02 and 4.03; and

2. Add a new Article 4.03.1 as follows: “For the calendar year 2021, the annual fee is \$1700.00 if paid on or before August 14, 2021 and \$1900.00 if paid thereafter.

CARRIED (by a 2/3 majority)

5.7 Standards of Practice – Records - and Discontinuation of Services*

This is a by-product of the request of ICRC legal counsel and in close cooperation with the standards and guidelines Committee people that had seen some requirement to amend the standards consistent with the expectation as far as proper practice. Executive is putting forward the motion.

MOTION

THAT Council approve the standard of practice on records as set out on pages 107 to 117 of the materials.

CARRIED UNANIMOUSLY

MOTION

THAT Council approve the advisory entitled discontinuation of services as set out on page 118-130 of the materials.

CARRIED UNANIMOUSLY

Part 2

1. Discussion

4.11 Practice Advisor – Update

The idea of having a practice advisor had been discussed for a long time. Meghan Hoult officially 'launched' on September 8, 2020. She has provided some information about the frequency of inquiries. A question was asked what she would do if she was asked a question about bone surgery. The Registrar explained that she would not respond to a question that she was not competent to answer. She would discuss the question with the Registrar and she would seek the assistance of the Executive Committee or whomever else we would need to contact to receive the assistance needed.

Part 4

6. Other Statutory Committee Reports

(Available from committees that have met since the last meeting of Council)

In reviewing the reports, Council agreed that rather than the Chair going through the report, we will simply ask if anyone has any questions.

- 6.1 ICRC* – Martin Hayles
- 6.2 Discipline* – Cesar Mendez
- 6.3 Quality Assurance * - Anna Georgiou
- 6.4 Registration – Agnes Potts

Part 5

7. Working Group/Other Committee Reports

7.1 Standards and Guidelines [Peter Ferguson]

Mr. Ferguson thanked the committee members. There are a number of documents going forward that are being worked on – social media and advertising – and will come back to Council.

7.2 Registration Examination – [Stephanie Shlemkevich]

7.3 Audit Committee – Jim Daley

7.4 Strategic Planning Committee [Andrew Gassmann]

The committee has not been active due to COVID

7.5 Registrar's Review and Compensation Committee [Winnie Linker]

No further comment by the Chair.

8. In Camera Session

9. Next Meeting

9.1 Items for Agenda – Next Council Meeting

9.2 Next Meeting Date – February 26, 2021

10. Adjournment

Motion

Moved by: Agnes Potts

To adjourn meeting

CARRIED UNANIMOUSLY

**COUNCIL BRIEFING NOTE RE COMMITTEE APPOINTMENTS AND AUDIT COMMITTEE CHAIR
APPOINTMENT (4 motions)**

1. Background:

A vacancy occurred in the Audit Committee upon the resignation of Mr. Jim Daley and as such the Executive Committee was required to appoint a Council member to replace Mr. Daley. The Executive Committee was advised that Council member Mr. Douglas Ellis had expressed an interest in joining the Audit Committee and that he had relevant experience. Pursuant to bylaw 26.02, the Executive Committee appointed Mr. Ellis to the Audit Committee on February 3, 2021 so that it met its quorum requirements and was properly constituted. Pursuant to bylaw 26.04, that appointment must be approved by Council at its next meeting.

Public Interest Rationale for Decisions:

It is in the interest of the public that there be strong financial stewardship of the College. Appointing members of the Audit Committee with strong financial backgrounds helps ensure that Committee is composed of those with the relevant competencies and skills to ensure the College's sustainability.

Recommended Motion:

That Council approve the appointment of Mr. Douglas Ellis to the Audit Committee to fill the vacancy in that Committee.

Mover: _____

Second: _____

2. Background:

Mr. Daley had been the Chair of the Audit Committee and so with his resignation, the Executive Committee was required to appoint a Chair of the Audit Committee. Mr. Andrew Gassmann expressed an interest in becoming Chair at least for the rest of the 2021 term. The Executive Committee appointed Mr. Gassmann as Chair of the Audit Committee pursuant to bylaw 26.03. Pursuant to bylaw 26.04, that appointment must be approved by Council at its next meeting.

Recommended Motion:

That Council approve the appointment of Mr. Andrew Gassmann as Chair of the Audit Committee.

Mover: _____

Second: _____

3. Background:

Mr. Ramesh Bhandari is a new public Council member. He expressed an interest in both the Quality Assurance Committee and the Registration Committee but was willing to serve on any committees on which he is needed. Given the need for public members on ICRC and Discipline, the Executive Committee appointed Mr. Bhandari to the Quality Assurance Committee, the Registration Committee, the Inquiries, Complaints and Reports Committee and the Discipline Committee.

Recommended Motion:

That Council approve the appointment of Mr. Ramesh Bhandari to the following committees of the College: Registration; Quality Assurance; Inquiries; Complaints and Reports, and Discipline.

Mover: _____

Seconder: _____

4. Background:

Given Mr. Ellis' appointment to the Audit Committee and associated time commitments with that Committee, it is appropriate that Mr. Ellis be taken off the Quality Assurance Committee. Given that Mr. Bhandari's appointment to the Quality Assurance Committee, Mr. Ellis' removal from the Quality Assurance Committee will not cause any committee composition issues.

Recommended Motion:

That Council approve Mr. Ellis coming off the Quality Assurance Committee.

Mover: _____

Seconder: _____

**COUNCIL BRIEFING NOTE REGARDING BYLAW AMENDMENTS FOR STANDARDS & GUIDELINES
COMMITTEE (2 motions)**

Background:

The Standards & Guidelines Committee has been doing its work as an ad hoc committee of Council to date. Given the important work undertaken by this Committee, it is recommended that the Committee become a Standing Committee of Council established in the bylaws.

Public Interest Rationale for Decision:

It is in the interest of the public that the work on standards and guidelines be carried out by a formal Standing Committee of the Council, given the fact that standards and guidelines (along with regulations and bylaws) establish the foundation for the “rules” by which the profession carries out its work. Putting the formal composition and terms of reference of this Committee into the bylaws will help strengthen transparency and accountability about the role of the College and this Committee in particular.

Recommended Motion #1:

That Council establish the Standards and Guidelines Committee as a Standing Committee of the College by amending By-law No. 1 to add the following new articles under the heading “Standards and Guidelines Committee” as follows:

23.4.01 The Standards and Guidelines Committee shall be a standing committee of the College composed of

- i) at least one elected or selected councillor;*
- ii) at least one public councillor; and*
- iii) at least one non-council committee member.*

23.4.02 The President shall be an ex-officio member of the Standards and Guidelines Committee.

23.4.03 The Standards and Guidelines Committee’s responsibilities are to assist the Executive Committee and Council in developing and amending Standards of Practice, Guidelines, Advisories, policies and other documents, when requested or directed to do so by the Executive Committee or Council.

23.4.04 A quorum of the Standards and Guidelines Committee is a majority of the Committee.

Mover: _____

Seconder: _____

Background:

Assuming that Council passes the above bylaw amendments, it would be appropriate to keep the existing committee members on the Standards & Guidelines Committee for 2021 but one public member of Council will also have to be appointed to the Committee so that it is properly constituted.

Recommended Motion #2:

That the current members and Chair of the Standards and Guidelines Committee as it existed immediately prior to revising the by-laws to make the Committee a Standing Committee continue to be the Chair and members of the new Standing Committee and that Mr. Jim Daley be appointed to the Standards and Guidelines Committee, effective immediately.

Mover: _____

Seconder: _____

COUNCIL BRIEFING NOTE REGARDING REGISTRATION EXAMINATION (3 MOTIONS)**ISSUE #1****Background:**

The Council of the College is required to “set or approve” a registration examination for entry-to-practice, pursuant to the College’s Registration Regulation. The examination approved by Council consists of a written competency component, a written Jurisprudence component and an Objective Structured Clinical Examination (OSCE). The examination questions are created by subject matter experts and the validity, reliability and fairness of the examination (and any changes to it) is measured by a psychometrician retained by the College. The College administers the examination and prior to COVID-19 it was physically offered at the Michener Institute (but the examination itself is independent of the Michener Institute).

Council approved the use of the updated Profile of Competencies (approved by Council in October 2019) to serve as a guide for the development of the College’s registration examination. The use of the updated Profile of Competencies was intended to start in 2021. Unfortunately, Council’s previous decision in that regard was not articulated to stakeholders and as a result, it would be unfair to current students to implement the new Profile of Competencies any earlier than 2022. With Council’s approval, the updated Profile of Competencies will serve as a guide for the College’s registration exam starting in 2022. Stakeholders, including the Michener Institute (which offers the approved Ontario chiropody program and which is aware of the issue), will be advised immediately after Council’s decision (and this information will also be included on the College website immediately so that applicants for registration will have sufficient and fair notice).

Public Interest Rationale for Decision:

It is in the public interest that those candidates who are registered by the College are able to meet the established Profile of Competencies, such that they are safe and competent to practice in Ontario in accordance with the standards of practice of the profession. The College has ensured that the existing registration examination has been guided by both the existing and new Profile of Competencies, and so balancing the interest in moving exclusively to the new Profile of Competencies against the need for the College to be fair to students and candidates who are currently in school or have started the registration process, the decision that is most in keeping with the public interest is to implement the Profile of Competencies as a guide for the College’s registration examination starting in 2022.

Recommended Motion:

That stakeholders be advised immediately that starting in 2022, the updated (2019) Profile of Competencies will serve as a guide for the College’s registration examination.

Mover: _____

Second: _____

ISSUE#2

Background:

It is extremely expensive for the College to offer supplemental OSCEs for candidates who fail the OSCE. It is also expensive, as well as distressing, for candidates to have to retake a high-stakes Examination. In the Examination Committee's experience, preparation for the written competency examination and jurisprudence examination contributes greatly to the chances of the candidate being successful at the OSCE, and as such, the Examination Committee believes that successful completion of both written parts of the registration examination should be required prior to a candidate being permitted to sit the OSCE.

Recommended Motion:

That Council approves, starting in 2022, that candidates attempting the College's registration examination must first successfully complete both the written Jurisprudence examination and the written competency examination before being permitted to attempt the OSCE.

Mover: _____

Second: _____

ISSUE #3

Background:

Given that it is unclear when in-person examinations for large groups of people will be safe/permitted again in light of COVID-19, the Examination Committee believes it is prudent to put steps in place to be able to offer the June 2021 written portions of the registration examination electronically. This decision is in the public interest given the safety concerns created by the COVID-19 pandemic.

Recommended Motion:

That in light of the COVID-19 pandemic, starting June 2021, Council approves the jurisprudence and written competency registration examinations of the College being offered either in-person or via an online format, whichever is operationally more feasible at the time at the sole discretion of the College.

Mover: _____

Second: _____

COUNCIL BRIEFING NOTE RE MEMBER REQUEST FOR AUTHORIZATION TO PRESCRIBE AND INJECT

Background:

Member X is a member of the College, having been trained internationally (graduated in 2018) and registered via the labour mobility provisions from another Canadian jurisdiction. The Member has not passed a College approved prescribing and injecting course. The Member's qualifications were assessed (in 2019) as being equivalent for the purposes of registration only, i.e., the program from which Member X graduated was not assessed for the purposes of authorization to prescribe and inject.

Pursuant to sections 1-3 of the College's General Regulation (Ontario Regulation 203/94), the College must provide - as an option for members to obtain authorization to prescribe and inject - assessment of their training. This option requires the College to rely on an expert to assess the training for equivalence to the Ontario program. On the Executive Committee's recommendation, the College has reached out to Dr. Anthony Merendino, a former member of the Faculty of the Michener Institute at UHN, to determine if he would be prepared to assess Member X's program for equivalence to the College's approved program, so that Member X should be authorized to prescribe and inject. Dr. Merendino has confirmed that he is available and willing to do this work. (Dr. Merendino's cv follows this briefing note.)

The College's current approved course on prescribing and injecting will not be run again until the Fall of 2021 at the earliest and in any event, the College has an obligation to assess Member X's qualifications through both options (course/program or assessment of training), pursuant to the General Regulation under the *Chiropody Act, 1991*. (Furthermore, another labour mobility applicant has since applied for registration and likely will also need to have their training with respect to prescribing and injecting assessed for equivalence.)

If a member's training is determined to not be equivalent to the approved Ontario program, then it is still open to the member to complete the approved Ontario program.

Public Interest Rationale for Decision:

It is in the interest of the public that only those members of the profession who are competent to prescribe and inject are granted authorization to do so. The College is obliged to offer as an option to members the ability to have their credentials assessed by the College in this regard. Given that it is not feasible for the College staff or Council itself to undertake this assessment, it is in the public interest to have a respected member of the profession who has a thorough knowledge of both the competencies of the profession and the elements of Ontario's approved chiropody training program (and the prescribing and injecting program, in particular) undertake this assessment.

Recommended Motion:

That if a member pays the associated fee (\$625), the member's credentials should be assessed for equivalence by Dr. Anthony Merendino and if Dr. Merendino's opinion is that the program is equivalent to the College's approved course on prescribing and injecting, that the member be authorized to prescribe and inject. Once a program has been assessed as equivalent, then as long as the program does not substantially change, the program will be deemed to be equivalent to the College's approved prescribing and injecting program.

Mover: _____

Second: _____

Antony Merendino, D.P.M.459 SW 129th Terrace

Newberry, FL 32669

PROFESSIONAL EXPERIENCE**University of Florida***Assistant Professor*, Department of Orthopaedics, Foot and Ankle Division.....2019 to present**Michener Institute for Applied Health Sciences at University Hospital Network (UHN)***Professor*, Department of Chiropody (Podiatric Medicine).....2010 to 2019**Michener Institute for Applied Health Sciences at University Hospital Network (UHN)***Associate Professor*, Department of Chiropody (Podiatric Medicine).....2009 to 2010**Sherbourne/Michener Chiropody Clinic***Clinical Education Instructor*.....2009 to 2019**Hollywood Medical Center's PSR 36 Residency Program***Attending staff physician and assistant educator for residency program*.....1996 to 2005**Private Podiatric Medical Practice**Florida.....1996 to 2005,
2019

Ontario, Canada.....2009 to 2019

Tennessee.....2006 to 2009

EDUCATIONDoctor of Podiatric Medicine (DPM).....May 1993
Barry University, School of Podiatric Medicine.....1989 to 1993

Bachelor of Science in Biology, CUNY, Staten Island, New York.....1989

TEACHING

PGCH 110 Pathophysiology 1.....2013 to 2019

TSCH 240 Podiatric Soft Tissue Surgery2012 to 2019

LPCH 360 Legislation and Practice Management2011 to 2019

EBCH 253 Evidence Based Medicine2010 to 2019

RMCH 360 Research Project.....2011 to 2019

APCH 110 Lower Extremity Anatomy Dissection2010 to 2019

LACH 230 Podiatric Anesthesia and Injections lab.....2011 to 2019

SMCH 240 Podiatric Sports Medicine2010 to 2012

CLCH Podiatric Clinical Practice, all years.....2010 to 2019

EDUCATIONAL ADVANCEMENT

Expanding the Hollywood Medical Center Podiatric Surgical Residency program
Initiated and helped coordinate the expansion of the residency program to Coral Springs Surgical Center2001

RESIDENCY TRAINING

Podiatric Surgical Residency PSR-24 Program
Kern Hospital for Special Surgery, Warren, Michigan1993 to 1995
Diabetic Patient Care
Diabetic Foot Centers of America1993 to 1995

RESIDENCY ROTATIONS

General Surgery/Vascular Surgery, Garden City Hospital, MichiganJune 1995
Anesthesiology , Garden City Hospital, MichiganJune 1994
Internal Medicine, Grace Hospital, MichiganMay 1994
Radiology/Pathology, Garden City Hospital, MichiganMarch 1994
Emergency Medicine, Oakland General Hospital, MichiganNovember 1993

EXTERNAL LECTURES

Equinus and its role in foot pathologies.....February 2021
The Role of Biomechanics in Hammertoe Deformities.....June 2020
Common foot pathologies related to the local farmer.....July 2021
Surgical prep and set up workshop.....November 2018
Electrosurgical/excision techniques workshop, OSC conferenceApril 2010
Diabetic Limb SalvageMay 1995
Ankle Arthrodesis.....January 1995
The Diabetic Foot.....October 1994
Total Contact CastingJune 1994
Frostbite.....November 1993
The Cavus FootSeptember 1994
The Ilizarov DistracterMay 1992

RESEARCH PROJECTS

Local Infiltration of Steroids, Effects on Post-Op Healing
Posterior Tibial Neurectomy
Review of the Management of Venous Stasis Ulcerations

BOARD APPOINTMENTS

<i>Academic Professional Council Member, College of Chiropodist of Ontario</i>	2015 to 2019
<i>Board Member for Ontario, Gideons International in Canada</i>	2016 to 2019

COMMITTEES

Executive Committee, College of Chiropodist of Ontario	2016 to 2019
Chair, Registration Committee, College of Chiropodist of Ontario	2016 to 2017
Discipline Committee, College of Chiropodist of Ontario	2015 to 2019
Inquiries, Complaints, Reports Committee, College of Chiropodist of Ontario	2015 to 2019
Co-chair, Entry to Practice/Education Program working group, HPRAC Review Steering Group College of Chiropodists of Ontario	2012-2013
Chair, Nominations Committee, Gideons International in Canada	2018 to 2019

HONORS AND AWARDS

<i>Innovation in Education Award, The Michener Institute</i>	2016
<i>President's List, Barry University</i>	May 1992
<i>President's List, Barry University</i>	Aug 1992
<i>President's List, Barry University</i>	Dec 1992
<i>Dean's List, Barry University</i>	May 1991
<i>Dean's List, Barry University</i>	Dec 1991
<i>Dean's List, Barry University</i>	May 1990
<i>Dean's List, Barry University</i>	Aug 1990
<i>Dean's List, Barry University</i>	Dec 1990

ORGANIZATIONS

<i>Member, Gideons International in Canada</i>	2015 to 2019
<i>Member, FAPA Fraternal Organization</i>	1990 to 2005
<i>Member, Student Chapter, American College of Foot Surgeons</i>	1991 to 1993
<i>Member, Student Chapter, American College of Podiatric Radiologists</i>	1991 to 1993
<i>Member, Sports Medicine Club</i>	1990 to 1993
<i>Member, Hollywood Chamber of Commerce</i>	1996 to 2005

HOSPITAL AFFILIATIONS

<i>Consulting Member, Select Specialty Hospital Gainesville, Florida</i>	2019 to present
<i>Staff Member, Hollywood Medical Center, Florida</i>	1996 to 2005
<i>Staff Member, Coral Springs Surgical Center, Florida</i>	2000 to 2005
<i>Adjunct Staff Member, Holy Cross Hospital, Florida</i>	2000 to 2005

MEDIA CONTRIBUTIONS

<i>Univision Network, International Report: Biomechanics and Functional Orthotics</i>	1997
<i>Catholic Hospice, Podiatry & Diabetes</i>	1999

VOLUNTEER

Aventura Foot and Ankle Center/Residency Program, Florida	1996
Hurricane Andrew, American Red Cross, Florida	1992
Jackson Memorial Hospital Foot Clinic, Florida	1991 to 1993
Detroit Walkathon for the American Diabetes Association, Michigan	1993 and 1994
Detroit Marathon, Michigan	1994

COUNCIL BRIEFING NOTE REGARDING ADVERTISING GUIDELINE AND SOCIAL MEDIA ADVISORY**Background:**

The Standards and Guidelines Committee carried out important work last year creating an Advertising Guideline to assist Members in understanding their legal and professional responsibilities regarding any advertising related to a Member's practice. Furthermore, the Committee also created a Social Media Advisory intended to assist members when using various social media platforms, which have become sources of information and sources of innovative ideas for clinical practice, networking and social support.

Given that the College has an Advertising Regulation (which is law) the Guideline and Advisory (which are not law) are purposely drafted using language such as "should" and "may" rather than "must" or "shall" as guidelines and advisories are not binding documents that can be enforced in the same way that regulations can be.

Issues such as the inappropriate use of search terms or algorithms to drive traffic to a particular website will be addressed through a Question & Answer section in an upcoming College Newsletter.

Public Interest Rationale for Decision:

It is in the interest of the public that advertising by chiropodists and podiatrists comply with the Advertising Regulation, that it not be misleading, and that advertising assists the public in making the best choice for their particular healthcare needs. It is also in the interest of the public that members of the profession be given guidance from their regulator with respect to the appropriate use of social media platforms so that their online presence is always professional so as to foster trust in the ability of the profession to regulate itself.

Recommended Motion:

That the Advertising Guideline dated January 2021 be approved by Council.

Mover: _____

Seconder: _____

Recommended Motion:

That the Social Media Advisory dated January 2021 be approved by Council.

Mover: _____

Seconder: _____

Item 3.5 Updated Advertising Guidelines

COLLEGE OF CHIROPODISTS OF ONTARIO

Advertising Guideline (January 2021)

Preamble

The College of Chiropractors of Ontario (COCO) has created this guideline on professional advertising to assist Members in understanding their legal and professional responsibilities regarding any advertising related to a Member's practice. Members are responsible for promoting their services and practices in a manner that meets the highest ethical standards, enhances the public image of the profession, and complies with the requirements of the regulation relating to advertising (O. Reg. 203/94 - referred to below as the "Regulation").

What is professional advertising?

Professional advertisement means any material related to your practice which is published, displayed, distributed or used, whether by you directly or by someone on your behalf. This may include, but is not limited to:

Advertisements	Flyers
Websites	Social Media
Interviews with Media	Advertorials
Newsletters	Business Cards
Stationary	Logos
Signage	Announcements
	Social Networking

Or other information related to the Member/Member's practice, regardless of the form or the manner of distribution. To be clear, advertising also includes any written and/or oral statements made to the public for the purposes of promoting the Member's services or practice.

Purpose

The basic intent of the Regulation is to protect the public interest and to ensure that advertising by Members does not demean the integrity and dignity of the profession (and any other professions) and undermine public confidence.

Ensuring Compliance

While there is no substitute for reading and understanding the Regulation, the highlights below may provide some assistance in ensuring compliance with the Regulation:

- Ensure that you personally control any and all printed and/or electronic material about your practice that is made available to the public.
- Do not engage in advertising promotion that would result in the sharing or splitting of fees or payments to a third party that relate to the amount of business that you obtain as a result of an advertising or marketing campaign.
- Do not include in your advertisement materials anything that would be considered by the COCOO to be a violation of the Regulation. This includes using:
 - statements which are unclear, untrue or misleading
 - statements which are indicative of superiority or uniqueness
 - statements which suggest or create an expectation of favourable results or appeal to the public's fears
 - testimonials or any statement that can only be verified by a person's personal feelings or views
 - incentive programs, including giveaways, contests, draws or free products or services
 - superlative or comparative terms, such as "state of the art, "cutting edge" or any other words or phrases to suggest a higher quality in relation to services, equipment, technology used, or products or persons providing the services

- There is nothing to prevent you from advertising a fee; however, caution is recommended if you do so, and you must keep in mind the following:
 - Members cannot include in any advertising anything that promotes or is likely to promote the excessive or unnecessary use of services
 - Fees may change year to year
 - Insurance coverage may vary from provider to provider
 - The fee must be clearly stated so that anyone reading the advertisement will know what you are offering
 - Unless otherwise specified, the advertised fee would be the maximum fee inclusive of all services, including laboratory costs. The advertised fee would be applicable to all patients, whether or not they were aware of the advertisement and whether or not they had insurance coverage
- The advertisement must be clear and understandable to the public. Use of technical/medical terminology should be avoided.
- Advertisement content is not limited to being in English or French, any language can be used however it is the Member's responsibility to ensure translation is accurate.
- Members must clearly identify their title (Chiropodist or Podiatrist) on any advertisement. When abbreviations are used, Members are encouraged to elaborate their degree or designation (for example, D.Pod.M. – Diploma in Podiatric Medicine)
- Speciality areas within Chiropody and Podiatry are not recognized and references to a "specialty" or being a "specialist" or an "expert" are not permitted.
 - Members are permitted to use the term 'foot specialist' if alongside title of Chiropodist or Podiatrist
- Ensure compliance when sending commercial electronic messages and use of computer programs (internal advertising/scheduling).

- Members are not permitted to contact or communicate individually with a potential patient either in person, by telephone, by mail or by any other means of individualized communication, in an attempt to solicit business.
- Members must also ensure compliance with Canada's Anti-Spam Legislation (CASL) and maintain appropriate records to demonstrate that they have consent for all electronic messages (which can be expressed or implied).

Advertising and Social Media

Members using social media in their practice are required to comply with the COCOO legislation, standards and guidelines. In relation to advertising and the social media, Members should also review the College's advisory on the use of on social media by Members ([link](#)).

Glossary

Advertisement: Any written, oral, visual or electronic communication whose purpose or effect includes promoting the Member's practice and/or the professional services he/she offers. The content of which he/she controls or influences, directly or indirectly.

Member: A Chiroprapist or Podiatrist registered with the College of Chiroprapists of Ontario

Soliciting: Seeking the business of potential customers. The term sometimes refers to offering or directly asking potential customers to purchase goods or services, rather than using **advertisements**. Freelance contractors and other independent business owners often engage in **solicitation** to seek new customers.

Social Media: Digital technologies and practices that enable people to use, create, and share content, opinions, insights, experiences, and perspectives. Social media can take many forms, including text, images, audio, video, and other multi-media communications. Popular examples include blogs, social networking websites such as Facebook, Twitter, and YouTube.

Social Networking: The development of social and professional contacts; the sharing of

information and services amongst people with a common interest.

Resources

1. Royal College of Dental Surgeons of Ontario:
https://az184419.vo.msecnd.net/rcdso/pdf/practice-advisories/RCDSO_Practice_Advisory_Professional_Advertising.pdf
2. Regulated Health Professions Act, 1991, S.O. 1991, c. 18:
<https://www.ontario.ca/laws/statute/91r18>
3. O. Reg. 203/94: General Under Chiropody Act, 1991, S.O. 1991, c.20: Part II Advertising: <https://www.ontario.ca/laws/regulation/940203#BK2>
4. Advertising Restrictions, Government of Canada:
<https://www.competitionbureau.gc.ca/eic/site/cb-bc.nsf/eng/04142.html>
5. Practice Guideline: Using Social Media, College of Occupational Therapists of Ontario: https://www.coto.org/docs/default-source/default-document-library/guidelines-for-use-of-social-media-2018.pdf?sfvrsn=5ca067b6_2
6. Canada's Anti-Spam Legislation: <http://www.chamber.ca/resources/casl/>
7. Personal Health Information Protection Act, 2004, S.O. 2004, c. 3, Sched. A:
<https://www.ontario.ca/laws/statute/04p03>

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

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.
- (2) An advertisement must be readily comprehensible to the persons to whom it is directed. 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.

(2) No Member shall hold himself or herself out,

(a) as a chiropodist unless the Member is registered as a chiropodist; or

(b) as a podiatrist unless the Member is registered 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.

10. A Member shall not contact or communicate individually with, or cause or allow any person to contact or communicate individually with, a potential patient either in person, by telephone, by mail or by any other means of individualized communication, in an attempt to solicit business. O. Reg. 746/94, s. 2.

11. No Member shall appear in, or permit the use of the Member’s name in, an advertisement that is for a purpose other than the promotion of the Member’s own practice if the advertisement implies, or could be reasonably interpreted to imply, that the professional expertise of the Member is relevant to the subject-matter of the advertisement. O. Reg. 746/94, s. 2.

12. A Member shall not advertise or permit advertising with respect to the Member’s practice in contravention of this Part. O. Reg. 746/94, s. 2.

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Item 3.5 Revised Social Media Advisory

COLLEGE OF CHIROPODISTS OF ONTARIO

Social Media Advisory (January 2021)

Social media is a powerful tool for communicating and networking and has become pervasive in all aspects of our lives, personal and professional. This is especially true during global crises, like the COVID-19 pandemic we are currently experiencing. Various social media platforms, such as Facebook (especially the group discussion forums), Twitter, and Instagram, have become sources of information, innovative ideas for clinical practice and coping strategies, networking and social and emotional support. For Members of the College, social media can be useful for:

- Advertising
- Educating the public and promoting foot health
- Networking with other Members or members of other colleges
- Sharing of ideas
- Professional development opportunities (e.g. conferences, webinars)
- Discussing challenging and/or interesting issues
- Gathering news, whether it's global, local and/or professional

As health care professionals, the opportunities to reach out, dialogue, inform, educate and learn online are tremendous. But Members ought to be cautious in their use of the social media, which presents unique challenges, including but not limited to, maintaining patient confidentiality and professional boundaries in an environment that is inherently public and not secure.

The Role of the College in Guiding Professional Practice

The role of the College in regulating the profession is to ensure the core principles, standards, and relevant legislation are interpreted and applied to practice and to conduct, including within the social media environment. For example, issues related to confidentiality and privacy, professional behaviour, consent, advertising standards, etc.

Where there are many benefits of social media, as indicated above, those benefits need to balance against the obligations to protect the interest of the public and ensure professional, ethical behaviour and relationships are maintained.

Informed Consent

Members are accountable for ensuring health information is not collected, used, or disclosed without the informed consent of the patient. When interacting with the public and/or other members of the College using social media platforms, the Member must be mindful and adhere to their professional obligations under, among others, the Health Care Consent Act, the [Personal Health Information Protection Act \(PHIPA\)](#), and the [College's Standards \(including, in particular, the Patient Relations Standard\)](#).

Tips and Advice for Social Media Use

The College offers Members the following tips and advice when participating in social media (adapted from the “12-Word Social Media Policy”¹ by the Mayo Clinic Social Media Network):

1) Don't Lie

Members must only share information online that is true, not misleading, and/or obtained from credible sources. Members must always fact-check before posting or disseminating information. Members should always consider whether the information they are sharing is helpful to the reader or whether it will propagate unnecessary fear, panic and misinformation. Additionally, Members should always retract or correct any inaccurate comments or information they have shared.

2) Don't Pry

Members are prohibited from seeking personal or sensitive information about patients, patients' family members or friends. Doing so may constitute professional misconduct and/or a breach of the College's Standards.

3) Can't Delete

Most social media “posts” are searchable and very difficult to eliminate from the cyber-world. Therefore, Members should always “pause before you post” and consider whether what they are sharing online is helpful or harmful to others. In addition, Members could consider if what they are posting is targeting another individual or an identifiable group and could be considered as discriminatory, bigotry, offensive, cyber-bullying and/or unprofessional.

4) Don't Steal, Don't Reveal

¹ <https://socialmedia.mayoclinic.org/2012/04/05/a-twelve-word-social-media-policy/>

Members should never share information that is confidential or proprietary. When sharing credible information online, Members should always cite and give credit to its source.

Discussion Group/Forum Moderation

For Members that are also moderators of social media groups/forums related to the profession, it is their responsibility to ensure all of the aforementioned principles and advice are followed and upheld in their respective platforms. Moderators should develop policies and guidelines for participation and communicate them clearly to their users. Moderators should enforce these policies and guidelines and act accordingly should there be violations or breaches.

Professional Image

Information, pictures and/or opinions posted on social media platforms and the internet are permanent. Negative or unprofessional images and/or statements by Members are harmful to the reputation of the profession and undermine patient or public trust.

“It is absolutely crucial to remember that anything you post online may stay there forever, in one form or another, so think carefully before you post- post information with eyes wide open, and consider the potential risks to their employment- current and future. Whether through the Internet Archive’s Wayback Machine Site or the caches of Google and Yahoo, old versions of websites are indeed searchable by those ‘in the know’. What is actually found may include your own posted material, as well as information about you posted by others.”² - Dr. Ann Cavoukian, the former Information and Privacy Commissioner of Ontario and one of the world’s leading privacy experts.

Other Helpful Resources:

- 1) Canadian Medical Protective Association – Top 10 tips for using social media in professional practice: <https://www.cmpa-acpm.ca/en/advice-publications/browse-articles/2014/top-10-tips-for-using-social-media-in-professional-practice>
- 2) How to use social media in healthcare: a guide for health professionals: <https://blog.hootsuite.com/social-media-health-care/>
- 3) Social Media and Health Care Professionals: Benefits, Risks and Best Practices: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4103576/>
- 4) How to be an Effective Social Media Moderator (LinkedIn): <https://www.linkedin.com/pulse/how-effective-social-media-moderator-jay-majumdar>
- 5) Social Media – Embracing the Opportunities, Averting the Risks: https://www.nasba.org/app/uploads/2011/03/Social_Media_Policy_Article_Presentation-Aug09.pdf

² [https://www.hrreporter.com/DynamicData/AttachedDocs/facebook-refcheck-PRINT%20\(2\).pdf](https://www.hrreporter.com/DynamicData/AttachedDocs/facebook-refcheck-PRINT%20(2).pdf)

- 6) Social Media Toolkit for Ontario Public Health Units (Feb 2014): <https://www.publichealthontario.ca/-/media/documents/L/2014/ldcp-social-media-toolkit.pdf?la=en>
- 7) The Health Communicator's Social Media Toolkit:
https://www.cdc.gov/socialmedia/tools/guidelines/pdf/socialmediatoolkit_bm.pdf

Report of the Inquiries, Complaints and Reports Committee: October 2020 to January 2021

Introduction: Role of the Committee

The Inquiries, Complaints and Reports Committee (ICRC) investigates complaints and reports to address concerns about the conduct and practice of Ontario chiropractors and podiatrists.

The level of detail in this report is being provided for the benefit of new Council and ICRC members.

ICRC Dispositions

After a complaint or report is investigated, the ICRC decides what action to take. The ICRC may do any one or more of the following:

- refer allegations of the member's professional misconduct or incompetence to the Discipline Committee;
- refer the member to a panel of the ICRC for a health inquiry;
- require the member to attend before a panel of the ICRC to be cautioned;
- require the member to participate in a specified continuing education or remedial program (educational program); or
- take other action including providing advice to the member, accepting an undertaking, accepting a permanent resignation or taking no action.

If the ICRC is satisfied that a complaint is an abuse of process, it is required to take no action.

Interim Orders

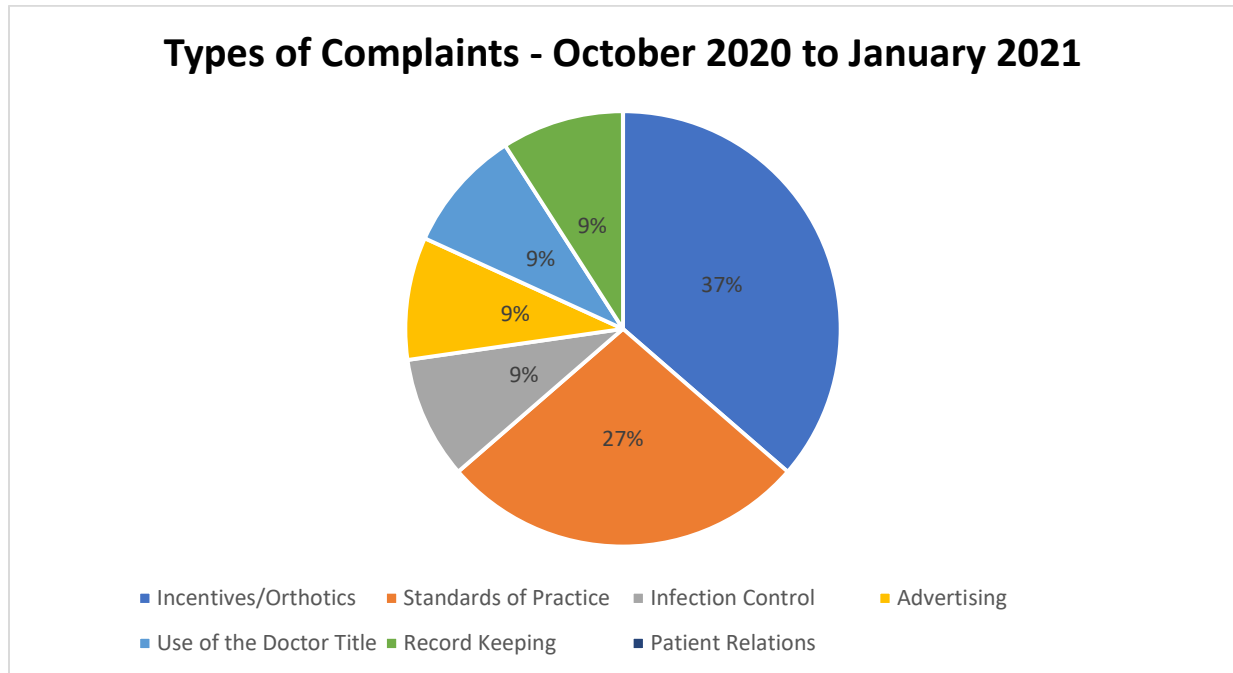
If there is a risk of harm or injury to patients, the ICRC may make an interim order to suspend or impose restrictions on the member's certificate of registration pending the disposition of a health inquiry, an investigation, a Discipline Committee hearing, or a Fitness to Practise hearing.

Complaints

In general, complaints come from patients and other members of the public, but other possible sources of complaints include insurance companies, members or other health care professionals. The ICRC investigates most complaints with the consent of the patient/complainant to obtain relevant health information. Where the investigative powers obtained through an appointment, such as the authority to issue a summons, are required to investigate a complaint, the ICRC can make a request to the Registrar for an investigator appointment.

Between October 2020 and January 2021, the College received 14 complaints, which is relatively consistent with the number of complaints received in the last two years, although it is slightly higher. See chart 2 below. Seven of the new complaints were from patients or their families, with the remainder being from insurance companies or other members of the College.

Chart 1



A. *Dispositions*

Between October 2020 and January 2021, ICRC panels disposed of 11 complaints matters as follows:

- 5 cases – no further action was taken
- 1 case – SCERP
- 1 case – SCERP and Oral Caution
- 1 case – referral to the Discipline Committee
- 1 case – oral caution

Two cases were withdrawn.

The nine complaints matters that were considered by ICRC panels were disposed of in an average of 160 days. The length of time is slightly high because of one 2019 case that required a lengthy investigation. However, the average length of time to complete ICRC files has reduced from 250 days in September 2020, down to 160 days.

B. *HPARB Appeals*

The Health Professions Appeal and Review Board (HPARB) reviews the adequacy of an investigation and the reasonableness of an ICRC decision. Both complainants and members can request HPARB reviews.

Between October 2020 and January 2021 there was one appeal to HPARB by a member.

In January 2021, the College received a decision from HPARB that confirmed the decision of the ICRC to take no further action.

Reports

Reports come from employers, facility operators, members, and others. The Registrar reviews a report of a preliminary investigation and decides on the appropriate response from options including remediation, or the appointment of investigators to conduct a full investigation. The ICRC approves Registrar investigator appointments and is informed of Registrar emergency investigator appointments, which are made if there is a risk of harm or injury to patients.

Reports from the Quality Assurance Committee

The ICRC can also request a Registrar's investigator appointment if it receives a report about a member's conduct or practice from the Quality Assurance Committee (QAC).

Registrar Investigations

C. Investigator Appointments

Between October 2020 and January 2021, an investigator was appointed to conduct four Registrar Investigations. Three of the four investigations were initiated because members were referred to as "doctor" on social media and other websites and promotional materials. The other investigation was about the member's advertising practices.

This is slightly higher than the data from 2019 and 2020.

Chart 2

	October 2018 – January 2019	February – May 2019	June – September 2019	October 2019 – January 2020	February – May 2020	June – September 2020	October 2020 – January 2021
Complaints	10	15	12	12	11	11	14
Registrar's Investigations	3	1	2	2	1	0	4

D. Dispositions

Between October 2020 and January 2021, panels of the ICRC did not dispose of any Registrar Investigations.

E. Interim Orders

The ICRC did not impose any interim orders because of Registrar investigations between October 2020 and February 2021.

Health Inquiries

The ICRC conducts inquiries into whether a member has a mental or physical condition or disorder that impacts the member's capacity to practice safely. The ICRC makes inquiries and may require the member to undergo medical examinations and suspend the member's certificate of registration if he or she does not attend or comply. The ICRC, after reviewing the results of its inquiries, may refer the matter to the Fitness to Practise Committee.

The ICRC did not conduct any health inquiries between October 2020 and February 2021.

ICRC Active Complaints Files

The Complaints process has been classified into stages, which are described below. The number of days elapsed is calculated from the date the complaint was received by the College.

The *Regulated Health Professions Act, 1991* requires that the College dispose of a complaint within 150 days, but the jurisdiction to continue an investigation is not lost if the investigation exceeds 150 days. At 150 days, a letter is sent to both parties explaining that the ICRC will not meet the deadline. At 210 days, the College is required to notify the parties and HPARB of the delay, as well as the reasons for the delay. After 210 days, either party can apply to HPARB seeking relief for the delay. Delay letters must be issued to both parties every 30 days after the 210-day delay.

Reviewing cases expeditiously, but fairly, meets the mission of the College to regulate the practice of Chiropractic in the interest of the overall health and safety of the public of Ontario. Some matters take longer to complete due to complexity and/or to ensure the parties had a fair amount of time to respond to College requests.

A. *Stage 1: Notice of Complaint/Report*

Within 14 days of receipt of a complaint or a report, the College notifies the member. The member may make written submissions to the ICRC within 30 days of the date of the notice.

B. *Stage 2: Additional comments from complainant*

The member's response is provided to the complainant who may provide comments.

C. *Stage 2a: Additional comments from member*

The complainant's response is provided to the member who may provide comments.

D. *Stage 3: Review by ICRC*

Once the supporting documentation and relevant information has been collected from the parties and possible witnesses, the matter is reviewed by a panel of the ICRC. The Panel conducts a thorough review of the information and considers whether there are any additional documents that should be obtained or any other witnesses who should be approached.

E. *Stage 3a: Formal Investigation*

In some circumstances, the Panel may appoint an Investigator, who has the power to:

- Enter the Member's place of practice and examine records or equipment and, where necessary, copy them or remove them;
- Summons witnesses or documents;
- Obtain a search warrant.

F. *Stage 4: Decision and Reasons*

Once the investigation is complete, the ICRC deliberates on the appropriate disposition of the complaint. This stage includes decision where a panel has formed the intention to refer a matter to the Discipline Committee, but allegations are being drafted.

The Panel's written decision and the reasons are provided to both the complainant and the member, except where the matter has been referred to another panel of the ICRC to conduct a health inquiry.

Active ICRC Complaint Cases to end of January 2021

Date Received	Days Elapsed	Stage1	Stage 2	Stage 2a	Stage 3	Stage 3a	Stage 4
October 24, 2019	468	✓	✓	✓	✓	✓	✓
January 22, 2020	379	✓	✓	✓	✓	✓	
May 22, 2020	258	✓	✓	✓	✓	✓	
June 19, 2020	230	✓	✓	✓	✓	✓	✓
June 25, 2020	224	✓	✓	✓	✓	✓	✓
September 2, 2020	155	✓	✓	✓	✓	✓	✓
September 27, 2020	130	✓	✓	✓	✓	✓	
October 7, 2020	122	✓	✓	✓	✓	✓	
October 21, 2020	106	✓	✓	✓	✓	✓	
November 1, 2020	95	✓	✓	✓	✓	✓	
December 1, 2020	65	✓	✓	✓	✓	✓	
December 15, 2020	51	✓	✓	✓			
December 18, 2020	48	✓					
January 15, 2021	20	✓					

January 20, 2021	15	✓					
January 28, 2021	7	✓					

Average: 148 days

ICRC Active Registrar Investigations Files

The process for Registrar Investigations differs from the complaints process. Usually the Member is not informed about the investigation until an investigator has been appointed and the Investigations Report is complete.

Active ICRC Registrar Investigation Cases to end of January 2021

Date Received	Days Elapsed	Stage1	Stage 2	Stage 2a	Stage 3	Stage 3a	Stage 4
October 6, 2020	121	✓	✓	✓	✓	✓	✓
October 15, 2020	112	✓	✓	✓	✓	✓	✓
November 10, 2020	86	✓	✓	✓	✓	✓	
November 18, 2020	78	✓	✓	✓	✓	✓	

Average: 99 days

Committee Members

Chair:

Peter Stavropoulos, Podiatrist

Committee:

Melanie Atkinson, Chiropodist

Riaz Bagha, Chiropodist

Nosheen Chaudhry, Chiropodist

Ed Chung, Podiatrist

Jim Daley, Public Appointee

Matt Doyle, Chiropodist

Doug Ellis, Public Appointee

Peter Ferguson, Chiropodist

Allen Frankel, Public Appointee

Andrew Gassmann, Public Appointee

Pete Guy, Chiropodist

Stephen Haber, Podiatrist

Martin Hayles, Chiropodist

Allan Katz, Public Member

Sylvia Kovari, Chiropodist, Non-Council

Sasha Kozera, Chiropodists

Winnie Linker, Public Appointee

Irv Luftig, Podiatrist

Jamie Maczko, Chiropodist, Non-Council

Cesar Mendez, Chiropodist

Neil Naftolin, Podiatrist, Non-Council

Nat Rave, Chiropodist, Non-Council

Stephanie Shlemkevich, Chiropodist

Ruth Thompson, Chiropodist

Eliot To, Selected Member

Millicent Vorkapich-Hill, Podiatrist

Report of the Discipline Committee: October 2020 to January 2021

Introduction: Role of the Committee

The Discipline Committee supports the College's public protection mandate by conducting hearings to adjudicate allegations of professional misconduct and incompetence against members of the College.

Steps Post-Referral

Once a matter is referred by the Inquiries, Complaints and Reports Committee to the Discipline Committee, the Notice of Hearing and Allegations must be drafted and finalized. The College and the Member then work towards resolving the matter. The College will provide the Member or his or her counsel with disclosure, which includes all relevant and non-privileged information in the College's possession. Either party may request that a pre-hearing conference be scheduled with a member of the Discipline Committee to obtain a candid opinion of the case and the College's proposed penalty. After the pre-hearing conference, a hearing will be scheduled.

Completed Matters

Disciplinary matters are resolved by way of uncontested or contested hearings. Matters are resolved or disposed of when:

- All allegations are withdrawn or dismissed;
- No findings of professional misconduct and/or incompetence are made by a panel;
- Findings of professional misconduct and/or incompetence are made and a penalty is ordered;
- Reinstatement requests are granted, not granted or abandoned; and
- Removal of information requests are granted, not granted or abandoned.

Between October 2020 and January 2021, the Discipline Committee disposed of three matters. In one case, the Committee accepted the College's motion to stay the allegations of professional misconduct against the member because he signed an undertaking to permanently resign from the College. The Member was ordered to pay \$6,000 in costs to the College.

In the second case, the member signed an agreed statement of facts, admitting that he engaged in professional misconduct, including that he:

- failed to meet or contravened the College's standards,
- practised the profession in a conflict of interest,
- provided treatment that he knew or ought to have known was ineffective, unnecessary or deleterious,
- falsified records,

- failed to keep records,
- submitted an account or charge for services that he knew was false or misleading,
- contravened the *Chiropractic Act* and its regulations, and
- engaged in conduct that was disgraceful, dishonourable and unprofessional.

The Committee ordered that the member's certificate of registration be revoked and that he pay costs in the amount of \$5,000 to the College.

In the third case, the member signed an agreed statement of facts admitting that he: failed to meet or contravened the College's standards, was found guilty of an offence (voyeurism) relevant to his suitability to practice and engaged in conduct that was disgraceful, dishonourable and unprofessional. The Committee ordered that the member appear before the panel to be reprimanded and it directed the Registrar to revoke the member's certificate or registration.

On February 1, 2021, the panel ordered that the member pay \$35,000 in costs to the College.

Outstanding Referrals to the Discipline Committee

There are currently 22 cases that have been referred to the Discipline Committee and are waiting to be completed. All of the cases have been referred since September 2019 with the exception of two cases that were referred in April 2018 but were held in abeyance pending related matters that were under investigation.

Between October 2020 and January 2021 there was one new referral.

Referrals are posted on the College's website: <http://cocoo.on.ca/scheduled-discipline-hearings-referrals/>

A. HEARINGS

- **Completed hearings:** three hearings were completed between October 2020 and January 2021
- **Scheduled hearings:** two of the 22 referrals have scheduled hearing dates

B. PRE-HEARING CONFERENCES

- **Completed pre-hearings:** no pre-hearings took place between October 2020 and January 2021
- **Scheduled pre-hearings:** there are no scheduled pre-hearing conferences

The number of current referrals is high for the College. The College's Hearings office is in the process of scheduling dates, for either hearings or pre-hearing conferences, for the outstanding referrals.

Committee Members

Chair:

Cesar Mendez, Chiropodist

Committee:

Melanie Atkinson, Chiropodist

Riaz Bagha, Chiropodist

Nosheen Chaudhry, Chiropodist

Ed Chung, Podiatrist

Jim Daley, Public Appointee

Matt Doyle, Chiropodist

Doug Ellis, Public Appointee

Peter Ferguson, Chiropodist

Andrew Gassmann, Public Appointee

Peter Guy, Chiropodist

Stephen Haber, Podiatrist

Martin Hayles, Chiropodist

Allan Katz, Public Appointee

Sylvia Kovari, Chiropodists, Non-Council

Sasha Kozera, Chiropodist

Winnie Linker, Public Appointee

Irv Luftig, Podiatrist

Jamie Maczko, Chiropodist, Non-Council

Ann-Marie McLaren, Chiropodists, Non-Council

Peter Stavropoulos, Podiatrist

Eliot To, Selected Member

Millicent Vorkapich-Hill, Podiatrist

Report of
the Registration Committee
of the College of Chiropodists of Ontario
February 15, 2021

Committee Members Present:

Matthew Doyle, Chair

Sasha Kozera,

Winnie Linker

Peter Stavropoulos

Doug Ellis

Also Present: Alan Bromstein, legal counsel to the Registration Committee

On November 27, 2020, a panel of the Registration Committee met by zoom and reviewed an application for registration and issued a decision to register the applicant if they successfully completed the jurisprudence examination being held on December 12 and/or 13, 2020 or if the examination is not able to be conducted on that/those dates due to the current pandemic restrictions, on such date(s) as shall be approved by the Registrar.

QUALITY ASSURANCE COMMITTEE REPORT FEBRUARY 2021

Members:

Anna Georgiou, Chiropodist, Non-Council (Chair)
 Melanie Atkinson, Chiropodist
 Ramesh Bhandari, Public Appointee
 Mathew Doyle, Chiropodist
 Peter Ferguson, Chiropodist
 Andrew Gassmann, Public Appointee
 Cindy Lewis, Chiropodist, Non-Council
 Winnie Linker, Public Appointee
 Irv Luftig, Podiatrist
 Ann-Marie McLaren, Chiropodist, Non-Council
 Cesar Mendez, Chiropodist
 Brooke Mitchell, Chiropodist, Non-Council
 Millicent Vorkapich-Hill, Podiatrist

The next QA Committee meeting is scheduled for February 22, 2021. The following reflects the work of the committee since the last Council meeting:

Continuing Education Program

CE LOG PROGRAM

- Launch of on-line reporting portal for the CE Log submissions for a total of **165** randomly selected members and carryovers from previous cycles
- 20% of membership were randomly selected (delayed due to COVID-19) to participate in the continuing education program for the 2018-2019 two-year cycle
- Several members were added for review as required from previous cycles
- QA Committee will be meeting on February 22, 2021 to review the online program in preparation for the CE Log reviews

Quality Assurance Working Group (Federation)

- Continues to meet about two or three times per year
- Meetings usually attended by QA Chair and Tera Goldblatt
- Information is shared by e-mail and vboardroom platform

- The next meeting (virtual) is scheduled for February 18, 2021

Technical Committee Report – Jan 2021

Members:

Ed Chung, Matt Doyle, Peter Ferguson (chair) Andrew Gassmann, Sasha Kozara, John Lanthier, Tracy Oliver.

At 7pm, Monday 4th January 2021, the Technical Committee convened via Zoom conference call to consider the following request from the Executive Committee:

“The Technical Committee has been requested by Executive to do a thorough and comprehensive review of microwave therapy as well as providing any recommendations with the intention of reporting back to Executive. This is in response to an insurance company request to the College in response to a member using this technology for wart treatment. The issue is not whether or not it is permissible for Members to use this technology based on legislation and regulation (the understanding is that Members are), but whether the College should be providing guidance to Members.”

Discussion started with the question of microwave therapy. Main issue is that there is very limited research, in particular, independent research and whether or not the only unit currently available which we were aware of, is approved by Health Canada.

Discussion revolved around microwave and other technologies and whether as a profession we want a specific guideline of every new technology. Do members have the appropriate training and expertise to use whatever technology?

There is an increasing number of members and physicians such as dermatologists in Canada using the Swift System which utilises microwave technology.

Consensus is that there is no appetite to develop individual policies/guidelines for microwave at this time because there is no additional training members can receive currently as well as the research being very limited. In addition, developing guidelines for procedures which are covered under the Chiropractic Act is not feasible and unwarranted.

If the technology is Health Canada approved, then the consensus of the committee is there is no need for a guideline at this time.

After the meeting was adjourned, Peter Ferguson was able to access the **Health Canada** website and obtain the following information on the Swift microwave system:

Manufacturer: Emblation Ltd

3 Forrester Lodge, Inglewood, Alloa, SL, GB FK10 2HU

Company ID: 142951

Type: System

Device Class: 3

Device first issue date: 2017-01-17

Licence Name: Swift System

Given the Technical Committee were able to verify that the Swift System is Health Canada approved, it is the recommendation of the committee that no further action be taken at this time.

Submitted 1st Feb, 2021

Peter Ferguson, Technical Committee, Chair

Feb 5th 2021

Registration exam committee Report

Members: Stephanie Shlemkevich (Chair), Matt Doyle, Peter Ferguson, Brooke Mitchell, Martin Hayles, Kay Hayles, Jacky Fu, Megan Grantham, Sonia Rebello, Kathryn Ferguson, Andrew Klayman, Donna Shewfelt

Last meeting: Feb 5th, 2021

Previous meetings: Dec 18th 2020, Jan 29th 2021 and Feb 5th, 2021.

Purpose and results of the meetings:

- Reviewed and approved new questions for the exam bank
- Corrected all “poorly scored” questions from the 2020 exams
- Delegated items to be worked on (i.e., JP questions)
- Met with the Michener regarding what OSCE process they are using for 2021
- Updating and creating new OSCE stations to be “COVID friendly” if we are still in lockdown

For Council:

- Tera and the committee are currently researching possible OSCE options for the 2021 exams (if in person exams are not possible)
- We are hoping to have the JP and the written exams online using a secure site (if Council approves),
- New competency document will be implemented on the 2022 exams (advise of this on the COCOO website)
- Consider offering the exams twice in one year
- Recommend that a pass on the JP exam be required prior to sitting the OSCE (this would greatly reduce cost of hosting the exams)
- Should the exam fee be increased to help recover some of these changes?
- There are still a few unsuccessful candidates who have not had a chance to resit the exams due to the lockdown; we are moving forward quickly with steps to address those.

Audit Committee Report (Feb 5, 2021)

Members: Jim Dailey (Chair – resigned), Ed Chung, Andrew Gassmann

Background:

On December 9, 2020, the Executive Committee asked the Audit Committee to look into the issue of the large increase in ICRC legal fees to August 31, 2020 as compared to the prior year. The Audit Committee was asked to work with the former Registrar to identify exactly where the unexpected increase in expenditures occurred and why, determine if this trend is expected to continue through the remainder of 2020 and make recommendations on how to reduce these expenditures and more accurately forecast them in future.

The Audit Committee requested information from the former Registrar in early January 2021. The former Registrar reported in mid-January that expenditures previously characterized at ICRC fees should in fact have been allocated to discipline (because they were incurred after a referral to discipline). The report was not in the format the Audit Committee had originally asked so another attempt was made, including the request for all the invoices billed for the referral to Discipline in 2020, after they were referred to Discipline. The Audit Committee then received a report directly from WeirFoulds, which showed some inconsistencies from the original report received from the Registrar. After some analysis, the Audit Committee Chair had highlighted a few inconsistencies between the reports thus far. The Audit Committee felt it was appropriate to pass this matter to the Exec Committee to discuss and decide on next steps.

The Executive Committee has engaged Welch LLP to reconcile the ICRC and discipline expenditures for 2020 to ensure that the fees billed have been accurately reported in the financial statements of the College.

To attempt to reduce such large expenditures going forward, the Audit Committee recommends that all legal expenditures are sourced through a Request for Proposal (RFP) process. More oversight by the Audit Committee is also required and detailed invoices from external legal counsel will be reviewed by the Complaints Manager, who is aware of the complexity of each matter being billed.



College of Chiropodists of Ontario

ITEM 1.5(B)

MINUTES OF COUNCIL MEETING

COLLEGE OF CHIROPODISTS OF ONTARIO

FEBUARY 18, 2021 – 7:00 pm

Councillors in attendance:

Peter Stavropoulos – President – Professional Member

Peter Ferguson – VP – Prof. Member

Matthew Doyle – Prof. Member

Andrew Gassmann – Public Member

Winnie Linker – Public Member

Melanie Atkinson – Prof. Member

Nosheen Chaudhry – Prof. Member

Ed Chung – Prof. Member

Sasha Kozera – Prof. Member

Irv Luftig – Prof. Member

Cesar Mendez – Prof. Member

Eliot To – Prof. Member

Jim Daley – Public Member

Douglas Ellis – Public Member

Allan Katz – Public member

Ramesh Bhandari – Public Member

Legal Counsel:

Kumail Karimjee, Karimjee Law

1. Call to Order, Appointment of Secretary, Peter Ferguson.
2. Peter S. introduced legal counsel – Kumail Karimjee
3. Roll Call for Attendance – Taken by Peter Ferguson
4. RATIFICATION OF APPOINTMENT OF ACTING REGISTRAR – presented by Peter Stavropoulos.

Background: With the departure of the former Registrar, the Executive Committee, pursuant to bylaw 13.01, on January 20, 2021 appointed Ms. Julie Maciura to serve as Acting Registrar until a permanent replacement can be recruited. Julie is a lawyer with the firm Steinecke Maciura LeBlanc, a Toronto law firm practising exclusively in the area of professional regulation.

Julie has practised administrative law, with an emphasis on professional regulation, for over 25 years. She acts as general counsel, prosecutor, or independent legal counsel for numerous Ontario regulators. Julie's general counsel work includes training specific to the needs of statutory committees, guidance to regulators on day-to-day operations, as well as registration, quality assurance matters, drafting regulations, by-laws, standards and policies. She has performed comprehensive legal audits of various statutory programs and processes for regulators and has experience with strategic planning. Julie regularly speaks at professional conferences on administrative law and professional regulation. She has written numerous articles for the firm's newsletter, Grey Areas, as well as its blog, Regulation Pro. She is co-author of the first and second editions of The Annotated Statutory Powers Procedure Act.

In addition to her Bachelor of Laws degree from Osgoode Hall Law School, Julie obtained a Master of Laws degree (Administrative Law) from Osgoode in 2007. In 2012, Julie received her specialist certification in health law from the Law Society of Ontario. Julie was the recipient of the CLEAR Consumer Protection Award in 2019 awarded in Minneapolis, Minnesota.

Pursuant to bylaw 13.03, the appointment of Acting Registrar must be ratified at the next meeting of Council.

Motion 1: That Julie Maciura's appointment as Acting Registrar for the College until a permanent Registrar is hired, be ratified.

Moved: Matthew Doyle, Seconded by Alan Katz

Motion carried unanimously.

5. Peter S. identified agenda item “Personnel Matter” requesting Matthew Doyle to present the motion to move in-camera to consider a personnel matter.

Motion 2; "THAT council move in camera to discuss a personnel matter"

moved: Matthew Doyle, Seconded by Peter Stavropoulos

Motion carried unanimously.

Discussion of personnel matter ensued, followed by a Q&A period.

Motion made to come out of *in camera*.

Moved: Sasha Kozara, Seconded by Douglas Ellis

Motion carried.

Meeting was adjourned at 7.55pm



College of Chiropractors of Ontario

Conflict of Interest Disclosure Form

Meeting Date:

Council/Committee:

Meeting type: PPlenary PPanel

I acknowledge and agree that an actual or perceived conflict of interest can undermine confidence in the College and its ability to fulfill its public interest mandate. I have read and understood the **College's by-law** on conflict of interest, and the **Code of Conduct for Members of Council and its Committees** (Appendix A).

I agree to take all reasonable steps to avoid any actual or perceived conflict of interest from arising and, if one cannot be avoided, I undertake to declare any real, perceived, or potential conflict of interest and to recuse myself from any consideration of the matter at issue.

I have NO conflict of interest to report regarding any of the agenda items to be discussed at the above noted meeting.

I declare a conflict of interest with one or more of the agenda items to be discussed at the above noted meeting.

I certify that the information above is true and complete to the best of my knowledge.

SSignature

DDate



Code of Conduct for Members of Council and its Committees

Preamble

For the College to command the confidence of the government, the public and the profession, it is necessary that Council, as the profession's governing body, adopt appropriate standards of conduct for members of Council and its Committees in order to ensure that they properly perform their duties with integrity and in a manner that promotes the highest standard of public trust.

Each member of Council and its Committees is therefore required to comply with the following Code of Conduct (Code) understanding that a breach of the Code could result in the Council member being removed from Council or the Committee member being removed from all Committees, in accordance with the By-laws of the College.

The Code

1. Council and Committee members shall be familiar with and comply with the provisions of the Regulated Health Professions Act, 1991 (RHPA), its Health Professions Procedural Code and its regulations, the Chiropody Act 1991 and its regulations, and the by-laws and policies of the College.
2. Council and Committee members, when acting in that capacity, shall act in a diligent manner, including preparing for meetings/hearings, attending meetings/hearings on time, and actively participating.
3. Council and Committee members, when acting in that capacity, shall participate in all deliberations and communications in a respectful, courteous and professional manner, recognizing the diverse background, skills and experience of members on Council.
4. Council and Committee members, when acting in that capacity, shall conduct themselves in a manner that respects the integrity of the College by striving to be fair, impartial and unbiased in their decision making.
5. Council and Committee members shall place the interests of the College and Council above their personal interests.
6. Council and Committee members shall avoid any appearance of or actual conflict of interest or bias.
7. Council and Committee members shall uphold the decisions made by Council and its Committees, regardless of the level of prior individual disagreement. Where a member of Council or its Committees feels compelled to publicly oppose or speak against a policy adopted by Council, or a decision made by a Committee, the member should first resign from Council and/or its Committees.

8. Council and Committee members shall refrain from engaging in any discussion in relation to the business of Council and/or Committees with other Council or Committee members that takes place outside the formal Council/Committee decision making process.
9. Council and Committee members shall refrain from communicating with Committee members on Statutory Committees in circumstances where this could be perceived as an attempt to influence a member or members of a Statutory Committee, unless he or she is a member of the panel or, where there is no panel, of the Statutory Committee dealing with the matter. This would include, but not be limited to, matters involving the Registration of applicants and matters involving members involved with the Inquiries, Complaints and Reports Committee, the Quality Assurance Committee, the Disciplinary Committee or the Fitness to Practise Committee.
10. Council and Committee members shall respect the confidentiality of information identified as confidential and acquired solely by virtue of their Council/Committee member position.
11. Council and Committee members shall ensure that confidential information is not disclosed except as required for the performance of their duties, or as directed by Council or the Executive Committee acting on behalf of Council.
12. Council and Committee members shall not use their positions as members of Council or any Committee to obtain or attempt to obtain employment at the College or preferential treatment for themselves, family members, friends or associates.
13. Council and Committee members shall not include or reference Council or Committee titles or positions held at the College in any business promotional materials, advertisement or business cards.
14. Council and Committee members shall respect the boundaries of staff recognizing that a staff member's role is not to report to or work for individual Council or Committee members. Council and Committee members will, therefore, not directly contact staff members, other than the Registrar, except on matters where the staff member has been assigned to provide administrative support to that Committee, without the prior approval of the Registrar or the Executive Committee.
15. Council and Committee members shall be respectful of each other and staff and not engage in conduct or behaviour towards fellow Council or Committee members or staff that might reasonably be perceived as verbal, physical or sexual abuse or harassment.