



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

COUNCIL MEETING

January 26, 2024

180 Dundas Street West, Toronto
19th Floor Conference Room
9:00 a.m. – 5:00 p.m.



Council Meeting Agenda

Friday, January 26, 2024

180 Dundas Street West, Toronto

19th Floor Conference Room

9:00 a.m. – 5:00 p.m.

8:30am – 9:00am		Breakfast	
		A hot breakfast will be served in the Conference Room	

9:00am – 9:15am	1.0	Call to Order – Peter Stavropoulos, President	Page Number(s)
	1.1	<p>Call to Order</p> <p>Appointment of Secretary</p> <p>Land Acknowledgement –</p> <p>“The members and staff of the College of Chiropractors of Ontario respectfully acknowledge that we are situated on the traditional territories of the fourteen First Nation peoples of Ontario – the Anishinaabe (A-ni-shi-naa-be), the Haudenosaunee-Onk we hone (How-den-o-sew-knee-Onk-we hone), the Mush ke gowuk Cree (Mush-go-wuk-Cree), the Mohawk, the Tus ca rora (tus-ca-rora), the Seneca, the Cayuga, the Oneida, the Delaware, the Mississauga, the Chippewa, the Pot ta wa tami, the Algonquin and the Odawa peoples. We also acknowledge the presence of the Métis and Inuit as well as Indigenous peoples and First Nations peoples living off reserve and in urban areas.”</p> <p>Approval of Professional Member Prep Time</p> <p>Motion: <i>That Council approve the preparation time for professional members on Council.</i></p>	N/A
	1.2	<p>Approval of Agenda</p> <p>Motion: <i>That Council approve the agenda for the January 26, 2024 Council meeting.</i></p>	N/A
	1.3	Declaration of Conflict of Interest**	1 – 8
	1.4	<p>Approval of Minutes of the September 22, 2023 Council Meeting **</p> <p>Motion: <i>That Council approve the minutes of the September 22, 2023 Council meeting.</i></p>	9 – 16
	1.5	Welcome Guests	N/A

9:15am – 9:20am	2.0	Consent Agenda Items	Page Number(s)
		<p>Consent Agenda Items</p> <p>A consent agenda is a bundle of items that is voted on, without discussion, as a package. It differentiates between routine matters not needing explanation and more complex issues needing examination. The Chair will ask if anyone wishes to remove an item from the consent agenda. Any Council member may request an item be removed so it can be discussed. To test whether an item should be included in the consent agenda, ask:</p> <ol style="list-style-type: none"> 1. Is this item self-explanatory and uncontroversial? Or does it contain an issue that warrants board discussion? 2. Is this item for information only? Or is it needed for another meeting agenda issue? <p><u>Motion:</u> <i>That Council approve consent agenda items 2.1, 2.2. and 2.3.</i></p>	N/A
	2.1	Council Meeting Survey Results from the September 22, 2023 Council Meeting**	17 – 24
	2.2	Practice Advisor Report**	25
	2.3	Committee Reports	
	2.3.1	Discipline Committee Report**	26 – 27
	2.3.2	ICRC Report**	28 – 33
	2.3.3	QAC Report**	34 – 35
	2.3.4	Registration Exam Committee Report**	36 – 37
	2.3.5	Standards and Guidelines Committee Report**	38
	2.3.6	Registration Committee Report**	39
	2.3.7	Patient Relations Committee Report**	40
	2.3.8	Fitness to Practice Committee Report**	41
	2.3.9	Technical Committee Report**	42 – 43
	2.3.10	Standing Drug Committee Report**	44
	2.3.11	Elections Committee Report**	45
	2.3.12	Strategic Planning Committee Report**	46 – 47
	2.3.13	Registrar’s Performance and Compensation Committee Report**	48
	2.3.14	Audit Committee Report**	49

9:20am – 10:00am	3.0	Decision Items	Page Number(s)
	3.1	<p>College 2024 Operational Budget **</p> <p><u>Motion:</u> <i>That Council approve the College 2024 operating budget.</i></p>	50 – 51
	3.2	<p>Registration Examination Failures Policy**</p> <p><u>Motion:</u> <i>That Council approve the Registration Examination Failures Policy.</i></p>	52 – 54
	3.3	Registration Examination Accommodations Policy**	55 – 58

Agenda items may not necessarily be dealt with in the order in which they appear.
** Denotes an agenda item with supporting documentation

		Motion: <i>That Council approve the Registration Examination Accommodation Policy.</i>	
	3.4	Amendments to and merging of the Registration Examination General Requirements Policy and the Registration Examination Appeals Policy into a new Registration Examination Process, Procedures & Appeals Policy** Motion: <i>That Council approve the Registration Examination Process, Procedures & Appeals Policy.</i>	59 – 72
	3.5	Returning to Practice Policy** Motion: <i>That Council approve the Returning to Practice Policy.</i>	73 – 78
	3.6	Continuing Education & Self-Assessment Policy on inclusion of EDI requirements** Motion: <i>That Council approve the amendments to the Continuing Education Policy.</i>	79 – 88
	3.7	Amendments to By-law 2 (Fees) to levy penalty against registrants who fail to complete their CE logs in a timely fashion** Motion: <i>That Council approve the amendments to By-law 2 to levy penalty against registrants who fail to complete their CE logs in a timely fashion.</i>	89 – 103
	3.8	Self-Assessment Tool ** Motion: <i>That Council approve the revised Self-Assessment Tool.</i>	104 – 107
	3.9	Amendments to By-law 2 (Fees) to increase the fee for equivalency assessments of non-approved programs** Motion: <i>That Council approve the amendments to By-law 2 to increase the fee for equivalency assessments of non-approved programs.</i>	108 – 122

10:00am – 10:15am		Break	
--------------------------	--	--------------	--

10:15am – 11:15am	4.0	Council Education Item #1 – Compassionate and Trauma Informed Regulation Anita Ashton, Deputy Registrar, College of Physiotherapists	Page Number(s) N/A
11:15am – 12:15pm	5.0	Council Education Item #2 – Updates in Professional Regulation College Staff	Page Number(s) N/A

12:15pm – 1:15pm		Lunch Break	
-------------------------	--	--------------------	--

1:15pm – 3:00pm	3.0	Decision Items	Page Number(s)
	3.10	Practice Assessment Tool**	123 – 136

Agenda items may not necessarily be dealt with in the order in which they appear.
** Denotes an agenda item with supporting documentation

		Motion: <i>That Council approve the revised Practice Assessment Tool.</i>	
	3.11	Surgical Suite Assessment Tool ** Motion: <i>That Council approve the Surgical Suite Assessment Tool.</i>	137 – 139
	3.12	2025 Council Meeting Dates Motion: <i>That Council approve the 2025 Council meeting dates.</i>	N/A
	3.13	Amendment to By-law 1 to Add Registrant Registration Numbers to the Public Register ** Motion: <i>That Council approve, in principle, the amendment to By-law 1 to add Registrant registration numbers to the public register, and that Council direct that the proposed amendments be circulated to registrants and other stakeholders for comment for 60 days before the matter is returned to Council.</i>	140 – 144
	3.14	Emergency Class (Standard, and Policy)** Motion: <i>That Council approve the Emergency Class Policy.</i> Motion: <i>That Council approve the Supervision in the Emergency Class Standard of Practice.</i>	145 – 153

3:00pm – 4:00pm	6.0	Discussion Items	Page Number(s)
	6.1	Registrar’s Report** – Nicole Zwiers	154 – 156
	6.2	President’s Report (verbal) – Peter Stavropoulos	N/A
	6.3	Key Performance Indicators (KPIs) Update & Dashboard**	157
	6.4	Standards Revision Update	N/A
	6.5	Discipline Hearings: Information for Registrants**	158 – 174
	6.6	Video Showcase: College Complaints Process – Shruti Tantry	N/A

4:00pm – 4:15pm		Break	
-----------------	--	-------	--

4:15pm – 5:00pm	7.0	In-Camera	Page Number(s) N/A
	7.1	Motion to move in camera Motion: <i>That Council move in camera pursuant to section 7(2)(b) of the Health Professions Procedural Code on the basis that financial or personal or other matters may be disclosed of such a nature that the harm created by the disclosure would outweigh the desirability of adhering to the principle that meetings be open to the public.</i>	
	7.2	Approval of in camera Minutes of the September 22, 2023 Council Meeting Motion: <i>That Council approve the in-camera minutes of the September 22, 2023 Council meeting.</i>	

Agenda items may not necessarily be dealt with in the order in which they appear.
** Denotes an agenda item with supporting documentation

	7.3	In-Camera Discussion Items	
	7.3.1	Leasing Space Options	
	7.3.2	Stakeholder communications	
	7.3.3	Employee Handbook**	
	7.3.4	Financial Presentation – Tigran Vardanyan and Robert Boyd, Scotiabank	
	7.3.5	Communications Strategy / Social Media Strategy	
	7.3.5	Podiatry Model Update	
	7.4	In-Camera Decision Items	
	7.4.1	QAC Assessments	
	7.4.1	HR Policy**	
	7.4.2	Registrar’s Performance Review and Compensation Committee	

5:00pm – 5:15pm	8.0	Next Meeting	Page Number(s) N/A
	8.1	Council Meeting Dates for 2024: <ul style="list-style-type: none"> • May 31, 2024 • September 27, 2024 	
	8.2	Council Survey Reminder	
	8.3	Proposed Agenda Items for Next Council Meeting	

5:15pm	9.0	Adjournment	Page Number(s) N/A
		Motion: <i>That Council adjourn the meeting.</i>	



Conflict of Interest Disclosure Form

Meeting Date: January 26, 2024

Council Meeting

Meeting type: Plenary Panel

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-laws](#) on conflict of interest, the [Code of Conduct for Members of Council and its Committees](#) (Appendix A), the **Conflict of Interest Worksheet** (Appendix B) and the Process for Considering & Declaring a Conflict of Interest (Appendix C).

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.

Signature:

Date:



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 Chiroprody 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.

WORKSHEET: Conflict of Interest

What is a conflict of interest?

A conflict of interest may be defined as any financial, personal, professional or emotional interest that could reasonably be perceived as interfering with the exercise of a person's public duties, for example as a COCOO Council, committee or panel member.

Self-screening Questions

Not sure if you are in a conflict of interest? In assessing for conflicts of interest, know that each situation will vary and have its own specific context. Consider the following questions & examples:



Financial interest

Do you stand to be affected financially by the outcome of this decision?

Example: Council is discussing whether it would find College-provided iPads mounted in the meeting room for each Council member to be helpful. One Council member owns a small number of shares of Apple, Inc. Since the financial implication for the Council member is negligible or non-existent, they do not declare a conflict of interest.

Personal or professional relationship

Have you had a personal or professional relationship, e.g. friend, family, instructor, student, supervisor, supervisee, employer, employee, colleague, with any of the individuals involved in the matter?



Example: A Registration Committee panel member taught at the education program from which an applicant obtained some of their education. They declare a conflict of interest.

Example: An Inquiries, Complaints and Reports Committee panel member attended a two-day workshop seven years ago with the respondent's clinical supervisor. Since the contact was brief and occurred long ago, they do not declare a conflict of interest.



Professional bias. Do you have a private or publicly stated opinion that could reasonably be perceived as interfering with your ability to consider one or more of the issues with an open mind?

Example: An Inquiries, Complaints and Reports Committee panel member has published work about the harms of breaching therapist-client boundaries. They are reviewing a complaint involving an alleged breach of boundaries. Since there is no reasonable disagreement within the profession, and assuming they are not emotionally biased, they do not declare a conflict of interest.

Emotional bias

For whatever reason, do your ideas or emotions prevent you from considering one or more of the issues with an open mind?

Example: Based on personal experience, an Examination Committee member has an emotional reaction to a candidate's rationale for needing to extend the normal timeframe within which to write the exam. They declare a conflict of interest.



Example: A panel of the Inquiries, Complaints and Reports Committee is dealing with serious allegations of misconduct. After discussing and processing the emotional impact of reviewing the materials, they all reassure themselves that they can consider the situation with an open mind.

Interests of Related Persons

Are you aware that your parent, child, spouse or sibling has any of the above interests respecting Council, committee or panel business?

Example: A Registration Committee member's child is attending a program coming before the Committee to seek recognition. They declare a conflict of interest.



Example: An Inquiries, Complaints and Reports Committee panel is considering a complaint by a firefighter. One panel member's spouse is also a firefighter. Assuming there is no emotional bias, the profession of the panel member's spouse would not reasonably be seen as interfering with the panel member's duties. They do not declare a conflict of interest.



Threshold analysis

Would a reasonably well-informed person perceive that the above interest could interfere with the exercise of your public duties?

Example: A Discipline Committee panel member was employed at the same large clinic at the time the alleged misconduct occurred. While the panel member had no prior knowledge of the alleged events, the panel member is close colleagues with a key witness in the case. There was a reasonable apprehension of bias on the part of the panel member.

Example: A complainant appeals a decision of the Inquiries, Complaints and Reports Committee taking no action against a registrant. Through Google, the complainant discovered that a panel member was a LinkedIn contact of the respondent. The panel member clarified they only met once briefly three years ago. Even though it may have been preferable for that panel member not to participate, this was not found to be a conflict of interest.

Process for Considering & Declaring Conflicts of Interest

The following are steps the College follows in addressing conflicts of interest.



Staff pre-screening

- Staff will pre-screen agenda items for obvious conflicts of interest on the part of Council, committee or panel members.
 - If a conflict is identified, staff will alert the Chair and materials will not be sent to the conflicted member.
 - The matter will either be assigned to a different panel, or the conflicted member will be alerted in advance that they will not be present for the entire meeting.
-



Council, committee or panel member self-screening

- Go through the above self-screening.
 - If a concern is identified that does not rise to the threshold of a conflict of interest, consider making a courtesy declaration at the meeting to reassure the Council, committee or panel that you have considered the issue.
 - If unsure, consult with staff, legal counsel or the Chair. It is preferable to consult with staff or legal counsel before the Chair to avoid the risk of tainting the Chair.
 - In close cases, consider the potential benefit of declaring a conflict to avoid later disputes about whether or not there was a conflict of interest.
 - If you identify a conflict of interest, do not review the meeting materials further and securely delete them. Alert the Chair and support staff in advance of the meeting. Always declare in a general manner so as not to cause emotional bias on the listener's part.
 - Subsequently, declare the conflict at the meeting itself. Do not take part in or attempt to influence the deliberation and leave the room while deliberation is taking place. The general nature of conflict will be recorded in the minutes.
-



Council, committee or panel discussion of possible conflicts of interest

- Occasionally, you may become aware that another member may have a conflict. If that member does not declare a conflict, or if they are unsure, all members are responsible at the meeting for raising the concern and discussing whether it constitutes a conflict of interest.
- In rare cases of disagreement, a majority of those present can vote to find there is a conflict and exclude the conflicted member from considering the matter.

- Post Meeting Conduct: After recusing yourself on a matter, use professional discretion and avoid revisiting the issue with colleagues, even if the decision is on the public register or you have seen the meeting minutes.¹

¹ Council minutes are public documents (aside from in camera portions). Regarding committee and panel minutes, normally it will not be considered that viewing minutes by a panel member who has declared a conflict poses a risk of improperly affecting the College's decision. However, occasionally confidentiality and risk management may require that panel minutes not be viewed by a member who has declared a conflict of interest.



College of Chiropodists of Ontario

Minutes of the Council Meeting
Friday, September 22, 2023 at 9:00 a.m.
180 Dundas St. W., 19th Floor Conference Room

Council Members in Attendance:

1. Matthew Andrade
2. Melanie Atkinson
3. Chad Bezaire
4. Ed Chung
5. Donna Shewfelt
6. Peter Stavropoulos
7. Deborah Loundes, Selected Member
8. Jim Daley, Public Appointee
9. Allan Katz, Public Appointee
10. Reshad Nazeer, Public Appointee
11. Jannel Somerville
12. Andrew Klayman

Regrets:

1. Murtuza Najmudin
2. Ramesh Bhandari, Public Appointee
3. Andrew Simmons, Public Appointee

Staff in Attendance:

1. Nicole Zwiers, Registrar and CEO
2. Meghan Clarke, Deputy Registrar and Manager, Professional Conduct and Hearings
3. Meghan Hoult, Manager, Operations
4. Michael Aubé – Manager, Registration, Examinations and Quality Programs

General Legal Counsel:

1. Sarah Yun

Guests:

1. Allyson Harrison
2. Anthony Marini – via Zoom
3. Bruce Ramsden, President, OPMA
4. Ian Colin McQuistan, OSC
5. Iang Mawi Zai Tu, Ministry of Health – via Zoom
6. Megan Brittain, Michener Institute – via Zoom
7. Marlie Cappel – via Zoom

1. Call to Order

1.1 Call to Order, Appointment of Secretary, Land Acknowledgement, Approval of Professional Member Prep Time

N. Zwiers called the meeting to order at 9:07 a.m., noting that notice of the meeting was given, and the meeting was properly constituted with a quorum present. N. Zwiers welcomed guests. M. Hoult was appointed as Secretary.

D. Shewfelt delivered a land acknowledgement.

P. Stavropoulos proposed two hours of preparation time for professional members.

N. Zwiers suggested adding Item 3.11 (EDI Survey Questions) to the agenda.

1.2 Approval of Agenda

It was moved by A. Katz and seconded by J. Daley to approve the agenda, as amended. Motion CARRIED.

1.3 Declaration of Conflict of Interest

D. Loundes declared a conflict of interest relating to section 4.03 of By-law 4, under agenda item 3.3.

1.4 Approval of Minutes of May 12, 2023 Council Meeting

It was moved by J. Daley and seconded by M. Andrade to approve the minutes of the May 12, 2023 Council meeting. Motion CARRIED.

1.5 Announcement & Welcome to Chiroprapist Member for District 3 (Murtuza Najmudin, D.Ch.)

N.Zwiers welcomed M. Najmudin, not present at today's meeting due to unforeseen circumstances, to Council.

2. Consent Agenda Items

It was moved by D. Shewfelt and seconded by P. Stavropoulos to approve consent agenda items 2.1, 2.2. and 2.3. Motion CARRIED.

3. Decision Items

3.1 Motion to appoint A. Klayman as the Podiatrist Member for Districts 3 & 4 (Combined District 2)

In Combined District 2, no podiatrists came forward despite two call outs to the membership. Following a general call to all podiatrist members, A. Klayman was nominated to serve in this District.

A. Klayman left the room for Council's decision.

It was moved by D. Shewfelt and seconded by M. Atkinson that Council appoint A. Klayman as the Podiatrist Member for Combined District 2. Motion CARRIED.

A. Klayman returned to the room following Council’s decision.

3.2 Election of Executive Committee Members

N. Zwiers reported that there are five positions for election to the Executive Committee that would be cast by secret ballot, if necessary. The five positions are President, Vice-President, professional member, first public member and second public member. She added that there would be five separate elections, one for each position, if necessary.

(a) Election of President

N. Zwiers requested nominations for President of the Executive Committee. M. Atkinson nominated P. Stavropoulos and P. Stavropoulos accepted the nomination. There were no further nominations. P. Stavropoulos was acclaimed as President.

(b) Election of Vice-President

N. Zwiers requested nominations for Vice-President of the Executive Committee. P. Stavropoulos nominated M. Atkinson as Vice-President, and M. Atkinson accepted the nomination. There were no further nominations. M. Atkinson was acclaimed as Vice-President.

(c) Election of Professional Member

N. Zwiers requested nominations for the professional member on the Executive Committee. P. Stavropoulos nominated C. Bezaire as the professional member and C. Bezaire accepted. There were no further nominations. C. Bezaire was acclaimed as the professional member.

(d) Election of Public Member – First Position

N. Zwiers requested nominations for the first public member on the Executive Committee. P. Stavropoulos nominated A. Katz and A. Katz accepted. There were no further nominations. A. Katz was acclaimed as the first public member.

(e) Election of Public Member – Second Position

N. Zwiers requested nominations for the second public member on the Executive Committee. E. Chung nominated J. Daley and J. Daley accepted. There were no further nominations. J. Daley was acclaimed as the second public member.

Following the lunch break, P. Stavropoulos took over as Chair of the meeting.

3.2.1 Motion to approve the Executive Committee’s recommendations for Committee Chairs and Composition

Committee Name	Chair	Professional Members	Public Appointees	Selected Member(s)	Non-Council Appointees
Executive Committee	Peter Stavropoulos	Melanie Atkinson Chad Bezaire	Jim Daley Allan Katz		
Inquiries, Complaints RC	Peter Stavropoulos	Donna Shewfelt Edward Chung Jannel Somerville Melanie Atkinson Chad Bezaire Matthew Andrade	Allan Katz Jim Daley Ramesh Bhandari Reshad Nazeer	Deborah Loundes	Brooke Mitchell Cesar Mendez Riaz Bagha Ruth Thompson Stephanie Shlemkevich Stephen Haber Eliot To

					Shael Weinberg
Discipline Committee	Cesar Mendez	Donna Shewfelt Edward Chung Jannel Somerville Melanie Atkinson Peter Stavropoulos Chad Bezaire Matthew Andrade	Allan Katz Jim Daley Ramesh Bhandari Reshad Nazeer	Deborah Loundes	Brooke Mitchell Peter Guy Riaz Bagha Stephen Haber Shael Weinberg Eliot To
Fitness to Practice Committee	Brooke Mitchell		Reshad Nazeer		Cesar Mendez Kimberley Resmer Pauline Looi Eliot To Matthew Doyle
Patient Relations Committee	Peter Stavropoulos		Allan Katz Jim Daley		Brooke Mitchell Pauline Looi Matthew Doyle
QA Committee	Millicent Vorkapich-Hill	Melanie Atkinson Andrew Klayman	Ramesh Bhandari		Brooke Mitchell Julie Fraser Tina Rainville Lisa Balkarran Ruth Thompson Matthew Doyle
Sedation Committee	Millicent Vorkapich-Hill	Melanie Atkinson Andrew Klayman	Ramesh Bhandari		Brooke Mitchell Julie Fraser Matthew Doyle
Registration Committee	Matthew Doyle	Matthew Andrade Melanie Atkinson Peter Stavropoulos	Ramesh Bhandari		Deepka Duggal Tejinder Sahota Ruth Thompson
Audit Committee	Jim Daley	Edward Chung Melanie Atkinson	Jim Daley		
Standards & Guidelines Committee	Brooke Mitchell	Edward Chung Chad Bezaire Peter Stavropoulos Jannel Somerville	Jim Daley	Deborah Loundes	Peter Guy Julie Fraser
Registration Examination Committee	Stephanie Shlemkevich**	Donna Shewfelt** Andrew Klayman**			Brooke Mitchell** Julie Fraser** Lisa Balkarran** Tina Rainville**
Members with the double asterisks (**) are appointed to the Exam Committee (the remaining members continue to work with the Committee as item writers)					
<ul style="list-style-type: none"> • Jacky Fu • Lisa Balkarran • Mary Kennedy-Mitchell • Nosheen Chaudhry • Nadley Seeriram • Danielle Bannerman 					
Standing Drug Committee	Peter Stavropoulos	Jannel Somerville	Jim Daley		Cesar Mendez
Technical Committee	Edward Chung	Chad Bezaire			John Lanthier Matthew Doyle
Elections Committee	Allan Katz		Jim Daley Ramesh Bhandari Allan Katz		Matthew Doyle
Strategic Planning Committee	Millicent Vorkapich-Hill	Peter Stavropoulos Edward Chung Jannel Somerville	Allan Katz Jim Daley		Peter Guy Matthew Doyle
Registrar's Performance and Compensation Committee	Allan Katz	Peter Stavropoulos Melanie Atkinson Matthew Andrade	Allan Katz		

It was moved by C. Bezaire and seconded by E. Chung that Council approve the Committee composition as recommended by the Executive Committee. Motion CARRIED.

3.3 Motion to approve the amendments to By-law 4 (Code of Conduct of Councillors and Committee Members)

D. Loundes had declared a conflict of interest for a portion this item relating to the Selected Member(s) on Council (section 4.03), and left the room.

It was moved by C. Bezaire and seconded by J. Daley that Council approve the select amendments to By-law 4, relating to section 4.03. Motion CARRIED.

D. Loundes returned to the room following the motion.

It was moved by C. Bezaire and seconded by J. Daley that Council approve the remaining amendments to By-law 4. Motion CARRIED.

3.4 Motion to approve, in principle, the amendments to By-law 2 to increase the fee for equivalency assessments of non-approved programs, and direct the amendments for circulation to registrants and other stakeholders for 60 days.

It was moved by D. Shewfelt and seconded by E. Chung that Council approve, in principle, the amendments to By-law 2 to increase the fee for equivalency assessments of non-approved programs, and direct the amendments for circulation to registrants and other stakeholders for 60 days. Motion CARRIED.

3.5 Motion to approve, in principle, the amendments to By-law 2 to levy penalty against registrants who fail to complete their CE logs in a timely fashion, and direct the amendments for circulation to registrants and other stakeholders for 60 days.

It was moved by J. Daley and seconded by A. Klayman that Council approve, in principle, the amendments to By-law 2 to levy penalty against registrants who fail to complete their CE logs in a timely fashion, and direct the amendments for circulation to registrants and other stakeholders for 60 days. Motion CARRIED.

3.6 Motion to approve the amended Patient Relations Plan – Sexual Abuse Prevention

It was moved by A. Katz and seconded by D. Shewfelt that Council approve the amended Patient Relations Plan – Sexual Abuse Prevention. Motion CARRIED.

M. Clarke explained that the Patient Relations Plan is a requirement of the College. M. Clarke has updated this document to reflect changes to the legislation, and it has been previously reviewed and approved in principle by the Patient Relations Committee and Executive Committee.

3.7 Motion to approve the Surgical Competencies Standard

It was moved by E. Chung and seconded by A. Klayman that Council approve the Surgical Competencies Standard. Motion CARRIED.

D. Loundes asked if this Standard was circulated to the membership. N. Zwiers and S. Yun explained it was not.

3.8 Motion to approve the Acupuncture Standard

Moved by J. Somerville and seconded by M. Atkinson that Council approve the Acupuncture Standard. Motion CARRIED.

P. Stavropoulos thanked the Chair of the Standards & Guidelines Committee, B. Mitchell, and staff member M. Clarke for their hard work on creating this Standard.

3.8.1 Motion to approve the amended Fees, Billing and Accounts Guideline

It was moved by J. Daley and seconded by R. Nazeer that Council approve the amended Fees, Billing and Accounts Guideline. Motion CARRIED.

3.8.2 Motion to refer the Guidelines for the Safe Use of Lasers to the Standards and Guidelines Committee for review and update

It was moved by J. Somerville and seconded by M. Atkinson that Council refer the Guidelines for the Safe Use of Lasers to the Standards and Guidelines Committee for review and update. Motion CARRIED.

P. Stavropoulos explained the background for this review and update, which stemmed from a query to the Acting Practice Advisor.

3.11 Motion to approve the implementation of EDI-based survey questions within the annual renewal.

N. Zwiers provided a background regarding the EDI work being done by HPRO and the importance of RHPA Colleges incorporating EDI initiatives. N. Zwiers explained that the proposed survey contents are anonymous and used only to gain a better understanding of the registrants of the College. The survey will be voluntary.

It was moved by A. Katz and seconded by J. Daley that Council approve the implementation of EDI-based survey questions within the annual renewal. Motion CARRIED.

4. Education Item #1 – Presentation by Dr. Allyson Harrison, Ph.D., C.Psych., Research Psychologist, Regional Assessment & Resource Centre

Dr. A. Harrison presented to Council on determining reasonable accommodations for the registration examinations.

5. Education Item #2 – Presentation by Dr. Anthony Marini, Ph.D, Martek Assessments Ltd.

Dr. A. Marini provided an update to Council on the registration examinations.

6. Discussion Items

6.1 Registrar's Report

J. Daley commended the format of the written Registrar's Report to assist Council members, as well as the inclusion of briefing notes. A. Katz asked a question regarding the format of Council materials previously and whether briefing notes were included. P. Stavropoulos agreed that the format is much improved.

6.2 President's Report (verbal)

P. Stavropoulos noted that there was little to add to the Registrar's Report, and thanked Council for its work in improving matters at the College.

6.3 Amendments to and merging of Registration Examination General Requirements Policy and Registration Examination Appeals Policy into a new Registration Examination Process, Procedures & Appeals Policy

N. Zwiers provided a background regarding the merging of the two policies to improve clarity to exam processes and procedures. N. Zwiers also noted that a related registration examination Accommodation Policy will be coming before Council in the near future.

6.4 Registration Examination Failures Policy

N. Zwiers provided a background on limiting the number of times an applicant can sit the registration exams, and how this is in line with other health regulators. This will be put before the Registration Committee for approval prior to coming back to Council. S. Yun provided some context to this policy, and explained the legislation supports the Registration Committee's ability to create a policy of this kind.

6.5 Key Performance Indicators (KPIs) Update & Dashboard

N. Zwiers explained that the Strategic Planning Committee is currently developing a dashboard from the KPIs.

6.6 Financial package

N. Zwiers explained the financial package provided to Council and that the College currently sits in a good financial position.

A. Katz asked a question about the fines and penalties to be paid by registrants, and what the College is doing to recoup its costs. N. Zwiers explained that often there are payment schedules for penalties. M. Clarke explained that one of the matters is under appeal, so that particular value is not able to be recouped at this time.

J. Daley suggested that going forward the College break down current receivables and long-term receivables to reflect longer-term payment plans such as the above.

Prior to moving in camera, D. Shewfelt asked a question about practice assessments. N. Zwiers explained the College's mechanism for practice assessments and Quality Assurance.

7. In Camera

It was moved by E. Chung and seconded by M. Andrade to move in camera pursuant to section 7(2)(b) of the Health Professions Procedural Code on the basis that financial or personal or other matters may be disclosed of such a nature that the harm created by the disclosure would outweigh the desirability of adhering to the principle that meetings be open to the public. Motion CARRIED.

Council moved in-camera at 2:44 p.m.

8. Next Meeting

8.1 Council Meeting Dates for 2024

- January 26, 2024
- May 31, 2024
- September 27, 2024

8.2 Council Survey Reminder

8.3 Proposed Agenda Items for Next Meeting

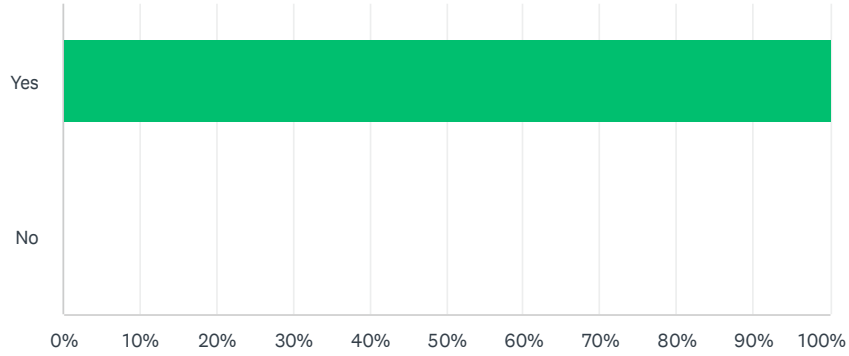
9. Adjournment

It was moved by Peter S. and seconded by Donna S. that the meeting be adjourned. Motion CARRIED.

The meeting was adjourned at 3:40 p.m.

Q1 Was the meeting effective in achieving the goals of the meeting?

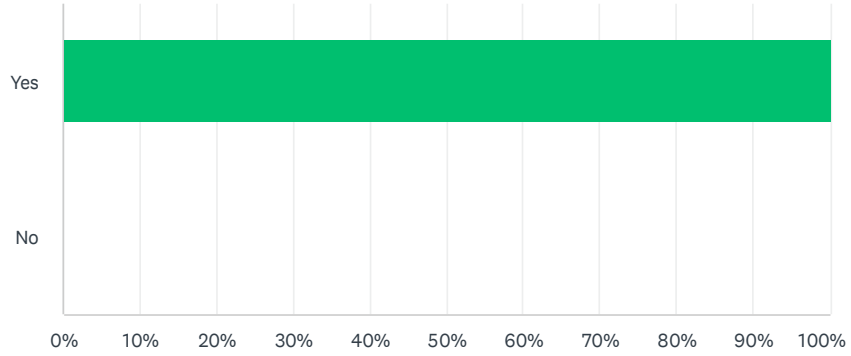
Answered: 11 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	100.00%	11
No	0.00%	0
TOTAL		11

Q2 Did the chair run an efficient and effective meeting?

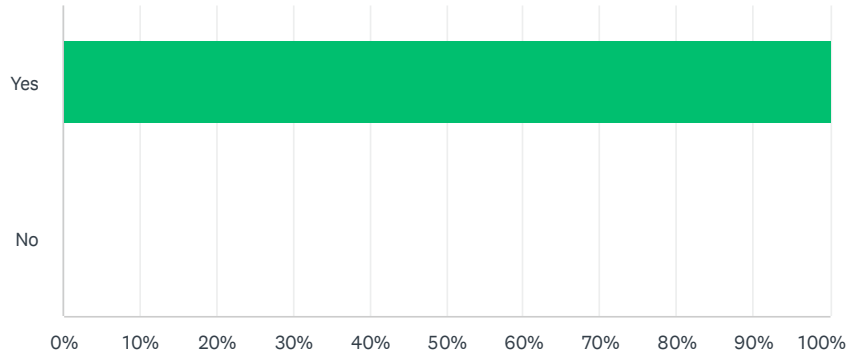
Answered: 11 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	100.00%	11
No	0.00%	0
TOTAL		11

Q3 Did you receive the materials in sufficient time to be adequately prepared for the meeting?

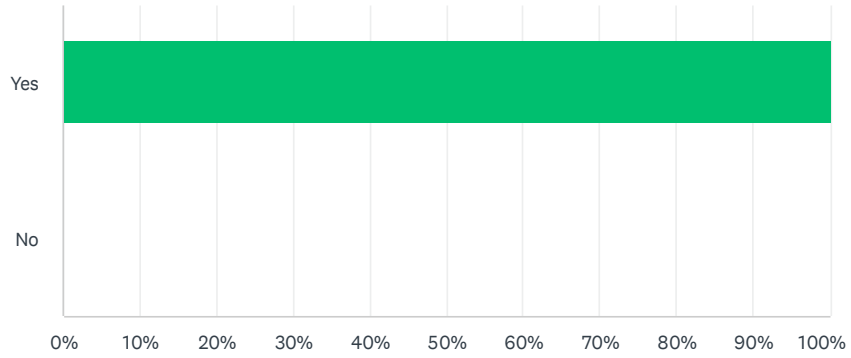
Answered: 11 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	100.00%	11
No	0.00%	0
TOTAL		11

Q4 Did all committee members appear reasonably prepared for the meeting?

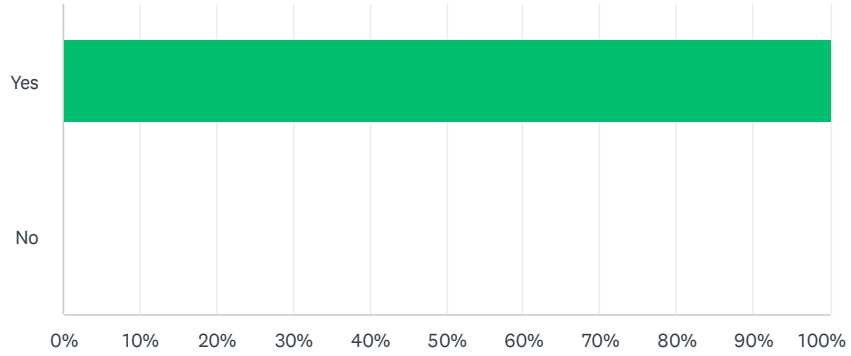
Answered: 11 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	100.00%	11
No	0.00%	0
TOTAL		11

Q5 Did all committee members participate in the meeting appropriately?

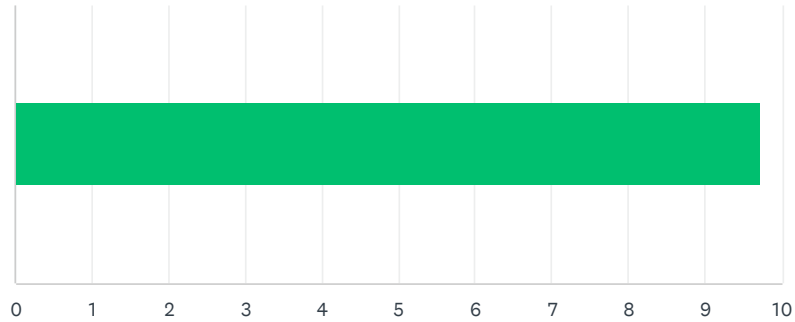
Answered: 11 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	100.00%	11
No	0.00%	0
TOTAL		11

Q6 On a scale of 1-10, how would you rate your overall experience for the meeting?

Answered: 11 Skipped: 0



ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
	10	107	11
Total Respondents: 11			

#		DATE
1	10	9/27/2023 11:50 PM
2	8	9/26/2023 12:35 PM
3	10	9/25/2023 1:06 PM
4	10	9/25/2023 9:46 AM
5	10	9/23/2023 4:14 PM
6	10	9/23/2023 2:31 PM
7	10	9/23/2023 9:38 AM
8	10	9/23/2023 7:37 AM
9	9	9/22/2023 6:01 PM
10	10	9/22/2023 5:03 PM
11	10	9/22/2023 4:18 PM

Q7 Please provide any comments, questions, concerns, or feedback that we can do differently at the next meeting.

Answered: 7 Skipped: 4

#	RESPONSES	DATE
1	Please continue to bring in guest speakers - they bring excellent outside perspective into standards and best practices in other professions and fields.	9/25/2023 1:06 PM
2	I have no additions, it was a very well structured a run Council meeting.	9/25/2023 9:46 AM
3	I find the college has an efficient staff who are organized, and the quality of the committee work is reflected in the efficiency of the council discussion. Council's efforts are set up for success largely by the committee work and staff, and I have no comments or concerns for improvements at this time.	9/23/2023 2:31 PM
4	Excellent	9/23/2023 7:37 AM
5	Everything was well organized and went smoothly	9/22/2023 6:01 PM
6	Well run meeting. Food was good and plentiful. Great collegial atmosphere among councilors	9/22/2023 5:03 PM
7	Guest speaker was great today!	9/22/2023 4:18 PM

Q8 Please provide your name

Answered: 11 Skipped: 0

#	RESPONSES	DATE
1	Reshad Nazeer	9/27/2023 11:50 PM
2	Deborah Loundes	9/26/2023 12:35 PM
3	Matthew Andrade	9/25/2023 1:06 PM
4	Allan Katz	9/25/2023 9:46 AM
5	Jim Daley	9/23/2023 4:14 PM
6	Chad Bezaire	9/23/2023 2:31 PM
7	Andrew Klayman	9/23/2023 9:38 AM
8	Donna Shewfelt	9/23/2023 7:37 AM
9	Ed Chung	9/22/2023 6:01 PM
10	Melanie Atkinson	9/22/2023 5:03 PM
11	Jannel Somerville	9/22/2023 4:18 PM



COLLEGE OF CHIROPODISTS OF ONTARIO
Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.2

PRACTICE ADVISOR REPORT
January 26, 2024 Council Meeting

Acting Practice Advisor:

Peter Stavropoulos, DPM, Registered Podiatrist

Purpose:

To provide Council with an overview of the Practice Advisor (PA) activities since the last meeting of Council. The PA provides professional practice advice on behalf of the College, supporting registrants by making sound and ethical clinical decisions that comply with legislative requirements, the Standards of Practice, and College policies and guidelines. The PA is also available to support the public with questions about the practice of chiropodists and podiatrists.

The Public Interest:

The PA service responds to inquiries from multiple stakeholders including the public. The PA is also available to support the public with questions about the practice of chiropodists and podiatrists in Ontario.

Data breakdown since the September 2023 Council meeting:

- Received 319 phone calls and emails relating to the practice advisory service between September 1 to December 31, 2023.
- Collaborated with the practice advisors of other Colleges consistent with College Performance Measurement Framework recommended best practices.
- Sources of enquiries during this cycle included: members of the public, registrants, clinic managers, other regulated health professionals (for example, pharmacists, RNs), third party insurance companies, and referrals from College staff.

Ongoing work:

Seeking to improve the PA service to registrants and stakeholders by:

- Continuing to increase awareness of the services provided by the PA.
- Enhance learning resources available on the College website.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.1

DISCIPLINE COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Cesar Mendez, Chiropodist

Professional Members (Council):

Matthew Andrade, Chiropodist
Melanie Atkinson, Chiropodist
Chad Bezaire, Chiropodist
Edward Chung, Podiatrist
Donna Shewfelt, Chiropodist
Jannel Somerville, Chiropodist
Peter Stavropoulos, Podiatrist

Professional Members (Non-Council):

Riaz Bagha, Chiropodist
Allen Frankel, Podiatrist
Peter Guy, Chiropodist
Stephen Haber, Podiatrist
Brooke Mitchell, Chiropodist
Lloyd Nesbitt, Podiatrist
Eliot To, Chiropodist
Shael Jeffrey Weinberg, Podiatrist

Public Appointees:

Ramesh Bhandari, Public Appointee
Jim Daley, Public Appointee
Allan Katz, Public Appointee
Reshad Nazeer, Public Appointee

Selected Member:

Deborah Loundes, Chiropodist

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 registrants of the College.

MEETINGS:

September 21, 2023 and January 25, 2024.

HEARINGS:

- **Completed hearings:** one hearing was completed between August and November 2023
- **Scheduled hearings:** there are two scheduled hearings.

PRE-HEARING CONFERENCES:

- **Completed pre-hearings:** One pre-hearing conference took place between August and November 2023
 - **Scheduled pre-hearings:** There is one scheduled pre-hearing conference.
-

Completed Matters – August to November 2023

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 August and November 2023, the Discipline Committee disposed of one matter.

After a contested hearing, the Registrant was found to have engaged in professional misconduct in that she:

- failed to meet or contravened a standard of practice of the profession;
- failed to keep records as required by the regulation;
- contravened the *Chiropody Act* and its regulations;
- contravened a federal, provincial or territorial law, a municipal by-law or a by-law or rule of a hospital, nursing home or other facility or agency that provides health services to the public, and;
- engaged in conduct that was disgraceful, dishonourable and unprofessional.

After finding the Registrant guilty of professional misconduct, the Panel made an order that included a:

- written reprimand
- revocation of the Registrant's certificate of registration.

The Registrant was ordered to pay \$17,298.79 in costs to the College.

Outstanding Referrals to the Discipline Committee

Between August and November 2023, there were three referrals from the ICRC to the Discipline Committee. In total, there are eight cases that have been referred to the Discipline Committee and are in progress.

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

Appeals

In 2023, one matter was appealed to the Divisional Court. An appeal was scheduled on January 16, 2024.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.2

INQUIRIES, COMPLAINTS AND REPORTS COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Peter Stavropoulos, Podiatrist

Professional Members (Council):

Matthew Andrade, Chiropodist
Melanie Atkinson, Chiropodist
Chad Bezaire, Chiropodist
Edward Chung, Podiatrist
Donna Shewfelt, Chiropodist
Jannel Somerville, Chiropodist

Professional Members (Non-Council):

Riaz Bagha, Chiropodist
Stephen Haber, Podiatrist
Cesar Mendez, Chiropodist
Brooke Erin Lee Mitchell, Chiropodist
Lloyd Nesbitt, Podiatrist
Stephanie Shlemkevich, Chiropodist
Ruth Thompson, Chiropodist
Eliot To, Chiropodist
Shael Jeffrey Weinberg, Podiatrist

Public Appointees:

Ramesh Bhandari, Public Appointee
Jim Daley, Public Appointee
Allan Katz, Public Appointee
Reshad Nazeer, Public Appointee

Selected Member:

Deborah Loundes, Chiropodist

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 chiropodists and podiatrists.

MEETINGS

The Committee held a business meeting on September 21, 2023 and January 25, 2024.

Complaints

In general, complaints arise from patients and other members of the public, but other possible sources of complaints include insurance companies, registrants, 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 request that the Registrar appoint an investigator.

Between August and November 2023, the College received 16 complaints. This number is much higher than usual. See chart 2 below for comparison.

A. *Dispositions*

Between August and November 2023, ICRC panels disposed of nine complaints matters as follows:

- 6 cases – no further action was taken
- 1 case – withdrawn
- 1 case – referral to the Discipline Committee
- 1 case – caution

The nine complaint matters that were considered by ICRC panels were disposed of in an average of 75 days (this does not include the one matter that was withdrawn). This average is lower than what was reported in September 2023 (129 days), and it is below the 150-day benchmark outlined in the *Health Professions Procedural Code*, which is Schedule 2 to the *Regulated Health Professions Act, 1991*.

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 registrants can request HPARB reviews.

Between August and November 2023 there were no appeals to HPARB.

C. *Interim Orders*

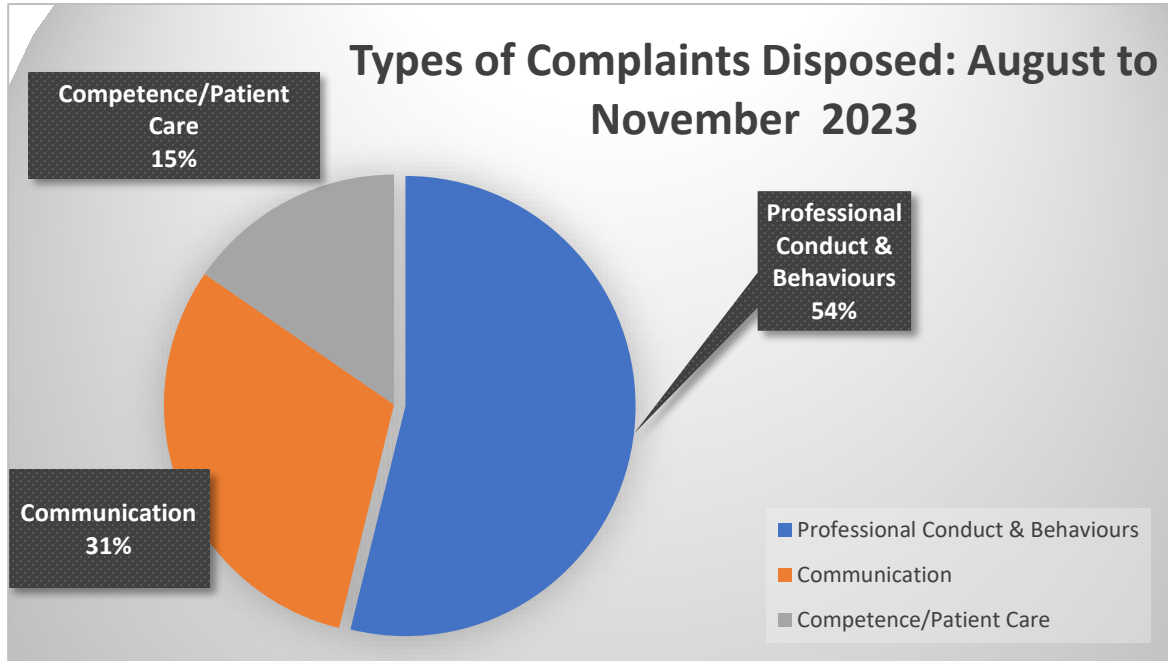
The ICRC may direct the Registrar to suspend a registrant or impose terms, conditions, or limitations on a registrant's certificate of registration if:

- The ICRC has formed the opinion that the registrant's conduct exposes or is likely to expose patients to harm or injury;
- The registrant has been provided with notice;
- The registrant has at least 14 days to make submissions on the proposed order.

The ICRC cannot impose any gender-based terms, conditions or limitations. If an interim order is made, the matter must be investigated and prosecuted expeditiously. An interim order will remain in force until it is varied by the ICRC, or the matter is withdrawn or resolved by way of an alternative dispute resolution process or otherwise finally disposed of by a committee of the College.

The ICRC did not impose any interim orders between August and November 2023 in a complaint case.

Chart 1



Reports - Registrar Investigations

Reports come from employers, facility operators, registrants, 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.

A. Investigator Appointments

Between August and November 2023, an investigator was appointed to conduct five Registrar Investigations.

B. Dispositions

Between August and November 2023, panels of the ICRC disposed of two Registrar Investigations.

C. Interim Orders

The ICRC did not impose any interim order because of a Registrar investigation August and November 2023.

Chart 2

	October 2021 – January 2022	February – May 2022	June – September 2022	October – December 2022	January – March 2023	April – July 2023	August – November 2023
Complaints	8	9	8	1	4	10	16

Registrar's Investigations	1	2	1	1	11	3	5
----------------------------	---	---	---	---	----	---	---

Reports from the Quality Assurance Committee

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

The ICRC continues to have an ongoing referral from the QAC from earlier this year.

Health Inquiries

The ICRC conducts inquiries into whether a registrant has a mental or physical condition or disorder that impacts the registrant's capacity to practice safely. The ICRC makes inquiries and may require the registrant to undergo medical examinations and suspend the registrant'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 complete any health inquiries between August and November 2023.

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.

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 registrant. The registrant may make written submissions to the ICRC within 30 days of the date of the notice.

B. Stage 2: Additional comments from complainant

The registrant's response may be provided to the complainant who may provide comments.

C. Stage 2a: Additional comments from registrant

The complainant's response is provided to the registrant 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 registrant'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 the 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 registrant, 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 November 2023

As of the end of November 2023, there were 13 active complaints.

Date Received	Days Elapsed	Stage1	Stage 2	Stage 2a	Stage 3	Stage 3a	Stage 4
April 11, 2023	234	✓	✓	✓	✓	✓	
May 26, 2023	189	✓	✓	✓	✓	✓	
June 20, 2023	164	✓	✓				
July 25, 2023	129	✓	✓	✓	✓	✓	
August 17, 2023	106	✓	✓	✓	✓	✓	
August 22, 2023	101	✓	✓	✓	✓	✓	
September 28, 2023	64	✓	✓	✓	✓	✓	
October 23, 2023	39	✓	✓	✓	✓	✓	
November 2, 2023	29	✓					
November 9, 2023	22	✓					
November 8, 2023	23	✓	✓				
November 28, 2023	3	✓					
November 28, 2023	3	✓					

Average: 85 days

ICRC Active Registrar Investigations Files

The process for Registrar Investigations differs from the complaints process. Usually, the Registrant 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 November 2023

As of the end of November 2023, there were seven ongoing Registrar's investigations.

Date Received	Days Elapsed	Stage1	Stage 2	Stage 2a	Stage 3	Stage 3a	Stage 4
February 7, 2023	297	✓	✓	✓	✓	✓	
May 23, 2023	192	✓	✓	✓	✓	✓	
August 2, 2023	121	✓	✓	✓	✓	✓	
August 14, 2023	109	✓	✓	✓	✓	✓	
October 3, 2023	59	✓	✓	✓	✓	✓	
October 10, 2023	52	✓	✓	✓	✓	✓	
October 25, 2023	37	✓	✓	✓	✓	✓	

Average: 123 days



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.3

QUALITY ASSURANCE COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Millicent Vorkapich-Hill

Professional Members (Council):

Melanie Atkinson
Andrew Klayman

Professional Members (Non-Council):

Lisa Balkarran
Matthew Doyle
Julie Fraser
Brooke Mitchell
Tina Rainville
Ruth Thompson

Public Appointees:

Ramesh Bhandari

ROLE OF THE COMMITTEE

The Quality Assurance Committee (QAC) provides regulatory oversight through annual practice assessments and continuing education opportunities to ensure that Chiropodists and Podiatrists in Ontario are practicing in accordance with the College's standards.

Practice Assessments

Practice Assessments afford the College with an opportunity to provide collegial feedback and direction to members of the profession. In addition, the practice assessments allow broader concerns to be addressed that can potentially eliminate the need for a future complaint and enhance registrants' focus on public safety.

The Committee met on December 7, 2023, and reviewed revisions to the Practice Assessment Tool and a new Surgical Suite Assessment tool. Both have been recommended for approval by Council.

Continuing Education

At their meeting on December 7, 2023, the Committee reviewed an updated Self-Assessment Tool and Continuing Education Policy. Both have been recommended for approval by Council.

The updates are in consideration of the new annual cycle for the Continuing Education Program. Within the annual cycle Registrants are required to accrue a minimum of twenty-five (25) credit hours annually. The annual cycle began on January 1, 2024, and will end on December 31, 2024.

NEXT MEETING

The next Committee meeting will be held on an as-needed basis.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.4

REGISTRATION EXAMINATION COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Stephanie Shlemkevich

Professional Members (Council):

Andrew Klayman
Donna Shewfelt

Professional Members (Non-Council):

Brooke Mitchell
Julie Fraser
Lisa Balkarran

Public Appointees:

N/A

ROLE OF THE COMMITTEE

Individuals wishing to practice as a Chiropodist in Ontario must be registered with the College of Chiropodists in accordance with the Chiropody Act, 1991 and its Regulations. New applicants wishing to register are required to sit a two-part examination. A pass standing of the exam is required by the College to fulfill a portion of the registration requirements and become a member of the College. The exam is composed of a written and a clinical (OSCE) component.

EXAMINATIONS

The supplemental OSCE took place on October 21, 2023 and the written components took place on November 2, 2023 (online proctored). A total of 11 applicants sat one or more components of the exams. 10 applicants were successful, while 1 candidate failed one or more components of the examination.

Table with 6 columns: Results by Component, Core (Pass/Fail), JP (Pass/Fail), OSCE (Pass/Fail). Values: Core Pass 7, Core Fail 0, JP Pass 1, JP Fail 1 (Michener 1), OSCE Pass 5, OSCE Fail 0.

Table with 2 columns: Results Overall, Pass (Eligible to Register) 10, Fail 1.

MEETINGS

The Committee met on November 10, 2023 to debrief about the Registration Examinations, and to continue development of content for future examinations. The Committee also engaged in education on accommodations within exam settings.

The Committee also held virtual meetings on December 1 and December 22 to review and refine Registration Examination questions.

DECISION/OUTCOMES

The Committee will continue building the exam question bank, with a goal of adding a total of 200 new multiple-choice questions and 7 new OSCE stations to the bank by the end of 2024. The Committee will also continue to focus on updating pharmacology questions.

NEXT MEETING

A Committee meeting is scheduled on February 9, 2024 to establish goals for 2024 and plan subcommittee work.

Members will have assigned committee work to complete on their own time.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.5

STANDARDS AND GUIDELINES COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Brooke Mitchell, Chiropodist

Professional Members (Council):

Chad Bezaire, Chiropodist
Ed Chung, Podiatrist
Jannel Somerville, Chiropodist
Peter Stavropoulos, Podiatrist

Public Appointees:

Jim Daley, Public Appointee

Professional Members (Non-Council):

Julie Fraser, Chiropodist
Peter Guy, Chiropodist
Brooke Mitchell, Chiropodist

Selected Member:

Deborah Loundes, Chiropodist

ROLE OF THE COMMITTEE

The Standards and Guidelines Committee is a standing committee charged with developing, reviewing, updating, and managing standards, guidelines, advisories, and other documents as requested by the Executive Committee. The Committee relies on legal expertise and advice from other committees in developing practice resources.

MEETINGS

The Committee met once since the last Council meeting.

DECISION/OUTCOMES

The Committee met to begin reviewing and updating all College standards, guidelines, policies, and advisories that it identified were in need of modernization.

NEXT MEETING

There are no meetings scheduled at this time.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.6

REGISTRATION COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Matthew Doyle, Chiropodist

Professional Members (Council):

Melanie Atkinson, Chiropodist
Matthew Andrade, Chiropodist
Peter Stavropoulos, Podiatrist

Professional Members (Non-Council):

Deepka Duggal, Chiropodist
Tejinder Singh Sahota, Chiropodist
Ruth Ellen Thompson, Chiropodist

Public Appointees:

Ramesh Bhandari, Public Appointee

ROLE OF THE COMMITTEE

The Registration Committee supports the College's public protection mandate by developing, establishing, and maintaining standards of qualification for persons to be issued certificates of registration with the College.

MEETINGS

The Registration Committee met on December 8, 2023 to review the following four policies:

- Registration Examination Failures
- Registration Examination Accommodation
- Registration Examination Process, Procedures and Appeals
- Returning to Practice

As a result of their review, the Committee recommended that all four policies be approved by Council.

NEXT MEETING

The next Committee meeting will be held on an as-needed basis.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.7

PATIENT RELATIONS COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Peter Stavropoulos, Podiatrist

Professional Members (Council):

Peter Stavropoulos, Podiatrist

Public Appointees:

Allan Katz, Public Appointee

Jim Daley, Public Appointee

Professional Members (Non-Council):

Matthew Doyle, Chiropodist

Pauline Looi, Chiropodist

Brooke Mitchell, Chiropodist

ROLE OF THE COMMITTEE

This Committee reviews and oversees the Patient Relations Program and supports the College's commitment to address concerns about a registrant's conduct. The *Regulated Health Professions Act, 1991* outlines two specific roles for the PRC:

- advise Council with respect to the patient relations program (PRP), which must include measures for preventing and dealing with patient sexual abuse;
- administer funding for therapy and counselling for patients who are named in a sexual abuse complaint or report.

MEETINGS

The Committee had one meeting since the last Council meeting.

DECISION/OUTCOMES

The Committee met to review an application for funding, and it approved a revised sexual abuse prevention plan.

NEXT MEETING

None scheduled.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.8

FITNESS TO PRACTISE COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Brooke Mitchell, Chiropodist

Professional Members (Council):

N/A

Public Appointees:

Reshad Nazeer

Professional Members (Non-Council):

Matthew Doyle, Chiropodist

Pauline Looi, Chiropodist

Cesar Mendez, Chiropodist

Kimberley Resmer, Chiropodist

Eliot To, Chiropodist

ROLE OF THE COMMITTEE

The Fitness to Practise Committee supports the College's public protection mandate by conducting hearings to assess whether a member is incapacitated, after the matter has been referred by the Inquires, Complaints and Reports Committee.

MEETINGS

None

DECISION/OUTCOMES

None

NEXT MEETING

There are no future meetings scheduled at this time.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.9

TECHNICAL COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Edward Chung, Podiatrist

Professional Members (Council):

Chad Bezaire, Chiroprapist

Professional Members (Non-Council):

Matthew Doyle, Chiroprapist

John Lanthier, Podiatrist

Public Appointees:

N/A

ROLE OF THE COMMITTEE

The Technical Committee was established by Council as an ad hoc committee. Its mandate is to support Council by responding to questions relating to the acceptability of practice modalities and emerging technologies.

MEETINGS

The Committee last met on December 21, 2023. This Committee convened upon request from the Registrar to address an enquiry from the Practice Advisor service from a Registrant who requested a clarification on Custom Accommodative inserts from a specific Shoes and Orthotics Laboratory located in the U.S.A.

DECISION/OUTCOMES

The Committee reviewed the COCOO PCFO Standards; Fees, Billing and Accounts Guidelines; documents from the specific Manufacturer. The Committee deliberated and recommended the following:

- a. Registrants ensure that orthotic laboratories are provided with all relevant information to fabricate a custom orthotic device for the benefit of the patient.
- b. Registrants ensure the equipment used in scanning and the fabrication process of custom-made orthotics, at the member's laboratory of choice, are conforming to COCOO PCFO standards.

- c. Registrants shall follow our College PCFO Standards from prescribing to dispensing, and post-dispensing follow-up of custom-made foot orthosis.
- d. Registrants should exercise their professional judgement on whether an outsource orthotics manufacturer is indeed providing a custom-made product for the member to be dispensed to the public.
- e. "Custom" orthosis must be custom made.
- f. Modification of prefabricated insoles are not "custom" or custom made.
- g. Heat mouldable prefabricated inserts are not "custom" or custom made.
- h. Foam box impressions are not compliant with COCOO PCFO Standards.
- i. Custom made Accommodative Orthosis must be custom made with precise and accurate off-loading sites to fully benefit the patient.
- j. Orthotic fees should follow the Fees, Billing and Accounts Guidelines

NEXT MEETING

The next Committee meeting will be held on an as-needed basis.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.10

STANDING DRUG COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Peter Stavropoulos, Podiatrist

Professional Members (Council):

Peter Stavropoulos, Podiatrist

Jannel Somerville, Chiropodist

Public Appointees:

Jim Daley, Public Appointee

Professional Members (Non-Council):

Cesar Mendez, Chiropodist

ROLE OF THE COMMITTEE:

With the newly amended Drug Regulation now enacted, this committee has been actively involved in the messaging to registrants and other stakeholders about the implementation of this legislation.

MEETINGS:

This Committee has not met since the Spring.

DECISION/OUTCOMES:

The Committee will serve to review applications by registrants for specific drug prescribing privileges as needed. As already identified, the Committee will also continue to work with the MOH to pursue the category approach for our Drug Regulation.

NEXT MEETING:

There are no meetings scheduled at this time.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.11

ELECTIONS COMMITTEE REPORT

January 26th, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Allan Katz, Public appointee

Professional Members (Council):

Matthew Doyle, Chiropodist

Professional Members (Non-Council):

none

Public Appointees:

Allan Katz, Public appointee

Jim Daley, Public appointee

Ramesh Bhandari, Public appointee

ROLE OF THE COMMITTEE

The Elections Committee is a standing committee of the College. This Committee is mandated by the College's General By-law. The Elections Committee deals with disputes relating to the election of Council members and other matters provided in the by-laws, other disputes or issues referred to it by Council or the Executive Committee and it studies and makes recommendations to Council for improving the election process.

MEETINGS

The Election Committee has not met since January 12, 2023.

DECISION/OUTCOMES

Following two calls for nominations, one chiropody member came forward in District 3, and **Murtuza Najmudin, D.Ch.** has been acclaimed to Council.

Following two calls for nominations to the members in Combined District 2, a general call went out to all podiatry members to fill this Council position. One podiatry member came forward, and **Andrew Klayman, DPM** will be put before Council for appointment at their September 22, 2023 meeting.

NEXT MEETING

None scheduled at this time.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.12

STRATEGIC PLANNING COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Millicent Vorkapich-Hill, Podiatrist

Professional Members (Council):

Ed Chung, Podiatrist
Peter Stavropoulos, Podiatrist

Public Appointees:

Allan Katz, Public Appointee
Jim Daly, Public Appointee

Professional Members (Non-Council):

Matt Doyle, Chiropodist
Peter Guy, Chiropodist
Jannel Somerville, Chiropodist
Millicent Vorkapich-Hill, Podiatrist

ROLE OF THE COMMITTEE

The Strategic Planning Committee's role is to ensure that the College's two main objectives of sustainability and the adoption of the podiatry model in Ontario, are attainable over the next 3 to 5 years.

MEETINGS

Key Performance Indicators (KPIs) were drafted at the November 9, 2022, Strategic Planning Committee meeting and unanimously passed at the January 2023 Council meeting. This list of ten KPIs provide a means of measurement of the College's success in meeting the stated objectives. These KPIs are a requirement as part of the College Performance Measurement Framework (CPMF) that must be submitted annually to the Ministry of Health.

The Committee will be making recommendations to Council on those goals and actions as well as reporting to the committee on the measurements of success in achieving the KPIs. In addition, the Committee will make recommendations to Council on any matter within its responsibility.

DECISION/OUTCOMES

The Committee met in August to review the KPIs and discuss the appropriate metrics to be applied to transparently measure the College's success in achieving the KPIs. The Committee has agreed to the development of a Dashboard reporting tool that will be shared with Council at all Council meetings going

forward and posted on the College's website, that will capture all relevant information about the KPIs, the metrics used to measure achievement, the result of the measurement and next steps.

The Committee has agreed to the formation of a working group consisting of the Committee members and Council member, Ed Chung, to continue to develop the competencies for each category of registrant under the proposed podiatry model and to finalize the Dashboard reporting tool.

NEXT MEETING

There are no meetings scheduled at this time.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.13

REGISTRAR'S PERFORMANCE AND COMPENSATION COMMITTEE REPORT

January 26th, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Allan Katz, Public Appointee

Professional Members (Council):

Melanie Atkinson, Chiropodist
Peter Stavropoulos, Podiatrist (ex-officio)

Professional Members (Non-Council):

None

Public Appointee Members:

Allan Katz

ROLE OF THE COMMITTEE

The Registrar's Performance and Compensation Review Committee's responsibilities include, but are not limited to:

1. Providing input and support to Council President on mid-year (May-June) performance review and annual (Dec-Jan) performance review, goal planning and compensation;
2. As required, conducting compensation and benefits market review, normally done through engagement of an external consultant, and with the prior approval of the Executive Committee;
3. Presenting to Council the results of all compensation reviews conducted by the Registrar's Performance and Compensation Review Committee, along with any recommendations it has in connection with changes to the Registrar's compensation.

MEETINGS

The Committee met on December 8, 2023.

DECISION/OUTCOMES

The Committee will make a recommendation to Council at the next meeting in-camera.

NEXT MEETING

At the Council meeting.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 2.3.14

AUDIT COMMITTEE REPORT

January 26, 2024 Council Meeting

COMMITTEE MEMBERS

Chair: Jim Daley, Public Appointee

Professional Members (Council):

Ed Chung, Podiatrist

Melanie Atkinson, Chiropodist

Professional Members (Non-Council):

None

Public Appointee:

Jim Daley

ROLE OF THE COMMITTEE

To assist Council in the consideration of the College's audited financial statements, including meeting with the College's auditors at least once before the audited annual financial statements are presented by the Committee for approval of Council.

MEETINGS

The Audit Committee met on January 4, 2024 with the Registrar to review the draft budget for 2024.

DECISION/OUTCOMES

To recommend the proposed 2024 budget to Council.

NEXT MEETING

The Audit Committee will be meeting in Q1 with respect to the auditor's recommendations for the 2023 Audit.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.1

COUNCIL BRIEFING NOTE RE: COLLEGE 2024 OPERATING BUDGET 2024 BUDGET TO BE CIRCULATED SEPARATELY

Background:

The College is now in receipt of financial statements for the 2023 Operating Budget and in a position to present the 2024 Operating Budget for Council's consideration and approval. The College will retain Hilborn LLC to conduct an audit of the 2023 financial statements and the audit will be presented at the May 2024 Council meeting for Council's consideration and approval.

Of note in the 2024 Budget:

(1) Inflation:

Once again, the high rate of inflation in 2023 impacted salaries, consulting/legal fees and equipment, which was taken into account when drafting the budget. Offsetting these inflationary increases is the anticipated increase in the College's 2024 revenue. The anticipated increase is due to a planned adjustment to the annual fee of 3.3% in keeping with the bylaw requiring an annual increase reflecting the Consumer Price Index inflation rate from July of the previous year. In addition, the College has invested funds yielding a higher rate of interest expected in 2024.

(2) Increased Number of Complaints and Reports:

In 2023, the College had a significant increase in complaints and reports. There were 52 matters in 2023, which was more than twice as many as in 2022. The budget contemplates that the number of ICRC matters will continue to increase, with a corresponding increase to legal and investigative fees. Also, the increase in 2023 ICRC files led to a high number of referrals to the Discipline Committee (12), causing increased legal fees in 2024 as those referrals proceed to pre-hearings and hearings. The College has also had its first appeal of a Discipline Committee decision, which is being heard by the Divisional Court in January 2024.

(3) Database Upgrade:

In 2024, the College will transition iMIS, its database, to the cloud-based version of the program as the current version is no longer being supported/updated by ASI. In addition, the College will continue to customize iMIS, our Registrant platform, as such customization is required for this type of off-the-shelf platform. Ultimately, the improvements to iMIS are expected to create greater efficiencies, reducing the drain on College resources.

(4) Staffing:

The College anticipates a need for greater staffing to ensure sufficient human resources for operationalizing proposed changes to registrants' scope of practice (podiatry mode) and in meeting the needs of the registrant and application numbers as they continue to grow.

Public Interest Rationale for Decision:

The College must remain financially stable to fulfil its legislative mandate to protect the public. In addition to the operating budget, the College has funds that can be accessed to cover operating expenses should the annual revenue be insufficient to cover necessary expenses or unexpected costs. There is no requirement that the College’s Operating Budget be restricted to its revenues for any given year, particularly where there are needed expenditures identified. While it will likely be feasible in future operating budgets for the College to meet its obligations within the limits of its annual revenue, it is critically important that the College have the financial resourcing to address past years of underfunding. This includes ensuring the College has sufficient resources within its Reserve Fund to meet any unexpected costs. With the introduction of the CPMF and the additional costs and obligations stemming from it, the College must align with the MOH’s expectations. These expectations, and their costs consequences, have been included in the 2024 Operating Budget.

Recommended Motion:

That the proposed 2024 Budget be approved by Council.

Mover: _____

Secunder: _____



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.2

COUNCIL BRIEFING NOTE RE: REGISTRATION EXAMINATION FAILURES POLICY

Background:

The Registration Regulation states that, among other things, an applicant must successfully complete and pass the College's set of approved examinations. The Registration Examinations include three components: the core competencies examination (written), the Objective Structured Clinical Examination (OSCE) and the jurisprudence examination (written) (collectively Registration Examinations).

The core competencies examination and the OSCE test an applicant's clinical competence. Where an applicant attempts an examination multiple times, there is a reasonable concern that the applicant does not have the knowledge, skill and judgment to practice chiropody but has instead gained mastery of the examination itself. The written examination draws from a limited bank of questions and the OSCE contains a limited number of stations and scenarios that can test clinical competence.

Accordingly, to allow an applicant to attempt the examinations multiple times, after having failed each time, without additional training, potentially puts the public at risk. Therefore, where an applicant fails an examination twice, the Registration Committee shall determine whether additional training or experience is required of the applicant before allowing the applicant to take the examination again.

The Registration Committee and Executive Committee have reviewed the Examination Failures Policy and recommend that it be approved by Council.

Public Interest Rationale for Decision:

It is in the public interest that an applicant demonstrates the knowledge, skill and judgement to practice chiropody by receiving a passing grade for the Registration Examinations. It is further in the public interest that the College maintain the academic rigour of the Registration Examinations and protect against any potential lessening of such rigour.

Recommended Motion:

The motion before Council is to approve the Registration Examination Failures Policy, attached as Appendix A.

Mover: _____

Seconder: _____



COLLEGE OF CHIROPODISTS OF ONTARIO
Regulating Chiropodists and Podiatrists in Ontario

Policy: Registration Examination Failures

Date Created: December 2023

Review Dates:

Approved By: Registration Committee

Purpose of the Policy:

The College of Chiropodists of Ontario (“College”) issues certificates of registration to those who meet the qualifications set out in its Registration Regulation, made under the *Chiropody Act, 1991*.

The Registration Regulation states that, among other things, an applicant must successfully complete the College’s set of approved examinations. These examinations are: the written examination, the OSCE (clinical) examination and the jurisprudence examination.

The written examination and the OSCE examination test an applicant’s clinical competence. It is in the public interest that an applicant demonstrate the knowledge, skill and judgement to practice chiropody by receiving a passing grade for these examinations. Where an applicant attempts an examination multiple times, there is a reasonable concern that the applicant does not have the knowledge, skill and judgment to practice chiropody but has instead learned how to pass the examination. The written examination draws from a limited bank of questions and the OSCE examination contains a limited number of stations and scenarios that can test clinical competence.

Accordingly, to allow an applicant to attempt the examinations multiple times, after having failed each time, without additional training puts the public at risk. Therefore, where an applicant fails an examination twice, the Registration Committee shall determine whether additional training or experience is required of the applicant before allowing the applicant to take the examination again. It is in the public interest to ensure applicants who attempt the examination have sufficient training such that they can demonstrate the knowledge, skill and judgement to practice chiropody.

Authority for the Policy:

Section 6 of the Examinations Regulation, made under the *Chiropractic Act, 1991*, provides:

6. (1) Where an applicant fails the examinations conducted by the College and is eligible to try the supplemental examinations, the College shall notify the applicant of his or her eligibility and shall notify every eligible applicant of the time and place fixed for the supplemental examinations. O. Reg. 679/93, s. 6 (1).

(2) Where an applicant fails the supplemental examinations conducted by the College, he or she is not entitled to try further supplemental examinations but is eligible to try the examinations the following year. O. Reg. 679/93, s. 6 (2).

(3) Despite subsection (2), the Registration Committee may require an applicant who has failed the supplemental examinations to submit proof of remediation and upgrading in accordance with policy guidelines issued by the Committee before the applicant may be readmitted to the examination process. O. Reg. 679/93, s. 6 (3).

Accordingly, the Registration Committee has the authority under subsection 6(3) of the Examinations Regulation to require applicants who failed the examinations twice to complete additional remediation and upgrading before attempting the examination again.

Furthermore, on April 17, 2023, Council of the College approved regulatory amendments for submission to the Ministry of Health, which amendments required that an applicant who failed any registration examination three times must obtain additional education, upgrading and/or remediation, as appropriate to the examination failure, before proceeding with further examination attempts. This Registration Examination Failures Policy fills this regulatory gap prior to the coming into force of such amendments.

Procedure following Failure of Supplemental Examinations:

An applicant who has failed the supplemental examinations and who would like to attempt the examination again must meet the requirements set out by a panel of the Registration Committee.

The Registration Committee can require any one or combination of the following:

- (a) graduation from an approved educational program;
- (b) completion of remedial training; and/or
- (c) completion of upgrading.

An applicant must submit proof, in the form and timeframe required, that the applicant has met the requirements that were ordered by a panel of the Registration Committee.

References:

[O. Reg. 830/93: Registration Regulation](#)

[O. Reg. 679/93: Examinations Regulation](#)

Related Policies: None

Review of Policy: This policy will be reviewed every two years.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.3

COUNCIL BRIEFING NOTE

RE: REGISTRATION EXAMINATION ACCOMMODATION POLICY

Background:

The Registration Regulation states that, among other things, an applicant must successfully complete and pass the College's set of approved examinations. The Registration Examinations include three components: the core competencies examination (written), the Objective Structured Clinical Examination (OSCE) and the jurisprudence examination (written) (collectively Registration Examinations).

Part of the College's mandate is to ensure that its Registration Examinations are rigorous and fairly test the competency of applicants to practice chiropody. The College is also committed to providing accommodation in accordance with its obligations under the *Human Rights Code*, and to ensuring an inclusive registration process, in which all applicants are treated with respect and dignity.

The Registration Committee and Executive Committee have reviewed the Accommodations Policy and recommend that it be approved by Council.

Public Interest Rationale for Decision:

It is in the public interest that an applicant demonstrate the knowledge, skill and judgement to practice chiropody by receiving a passing grade for the Registration Examinations. It is further in the public interest that the College maintain the academic rigour of the Registration Examinations, while ensuring that those requiring accommodation receive a fair and equal chance to demonstrate the required knowledge, skill, and judgement.

Recommended Motion:

The motion before Council is to approve the Registration Examination Accommodation Policy, attached as Appendix A.

Mover: _____

Seconder: _____



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

Policy: Registration Examination Accommodation

Date Created: December 2023

Review Date:

Approved By: Registration Committee

Preamble:

The College of Chiropodists of Ontario (the “College”) is committed to fulfilling its mandate of protection of the public. A critical component of the College’s operations in fulfilling its mandate is to ensure that its registration examination, including collectively or individually: the written registration examination, the jurisprudence examination and the OSCE, (collectively, the “Registration Examination”) that applicants applying to become registrants of the College must successfully complete, is rigorous and fairly tests the competency of applicants to practice chiropody. Only applicants who have completed a chiropody program approved by the College’s Council, and who have satisfied other requirements by the College may sit the Registration Examination.

The College is also committed to providing accommodation in accordance with its obligations under the *Human Rights Code*, and to ensuring an inclusive registration process, in which all applicants are treated with respect and dignity. The purpose of this policy is to establish guidelines for the provision of accommodation in both the written and oral components of the Registration Examination.

Policy Statement:

The College will consider requests for accommodation on a case-by-case basis to ensure that applicants requesting accommodation receive a fair and equal chance to demonstrate the required knowledge, skills and abilities for entry to practice, without compromising the exam’s reliability, validity or security, or the College’s public protection mandate. The College will consider all accommodation requests by applicants applying to sit the Registration Examination, where the applicant has complied with the College’s time limits, in accordance with the College’s public protection mandate, and its obligations under the *Human Rights Code* and the *Regulated Health Professions Act*. The College will work cooperatively, and in a spirit of respect, with all parties in the accommodation process. The College reserves the right to deny any accommodation request in consultation with the College’s accommodations expert, including

where there is insufficient supporting documentation , or for which the College is not required to provide accommodation at law.

Procedure:

1. Upon applying to sit the Registration Examination, an applicant requesting accommodation in respect of the Registration Examination must submit a written request for accommodation, along with supporting documentation, not less than 60 days in advance of the Registration Examination.
2. Supporting documentation will vary depending on the accommodation that is requested. For requests based on disability, an applicant's supporting documentation must:
 - a. be authored by a qualified health professional;
 - b. be current;
 - c. describe the functional limitation(s) resulting from the applicant's disability;
 - d. specify the accommodation being requested; and
 - e. be signed by the qualified health professional.
3. The College will share the applicant's request for accommodation and supporting documentation confidentially with its external accommodations expert for the purpose of making a determination in respect of the request for accommodation.
4. The College may request further documentation from the applicant in support of the requested accommodation. Any additional supporting documentation must be provided within the time limits set by the College.
5. Where an applicant requests accommodation but does not provide supporting documentation to the College within the time limits set by the College, the College reserves the right to refuse the request for accommodation. Applicants wishing to provide additional supporting documentation but who do not do so within the time limits set by the College, for any reason, may have their accommodation request considered for the next sitting of the Registration Examination.
6. In consultation with its external accommodation expert, the College will determine whether the applicant will be provided with accommodation in respect of the Registration Examination, and if so, the nature of the accommodation that will be provided. The College will promptly advise the applicant of its determination in writing.

Consent to Disclosure and Confidentiality:

Any applicant who requests an accommodation in respect of the Registration Examination consents to the College sharing the applicant's request and supporting documentation, including personal information such as medical documentation, with the College's external accommodation expert. Such information will be shared on a confidential basis for the sole purpose of making a determination in respect of the applicant's request for accommodation. Such information will not

be disclosed to persons other than College personnel and the external accommodation expert, except when such disclosure is reasonably necessary for the effective implementation of the accommodation, or where disclosure is required by law.

Related Policies: None

Review of Policy: The policy will be reviewed every two years.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.4

COUNCIL BRIEFING NOTE RE: REGISTRATION EXAMINATIONS PROCESS, PROCEDURES AND APPEALS POLICY

Background:

The Registration Regulation states that, among other things, an applicant must successfully complete and pass the College's set of approved Registration Examinations.

Part of the College's mandate is to ensure that applicants have fair access to its Registration Examinations, while testing the competency of applicants to practice chiropody. The Registration Examinations Process, Procedures and Appeals policy updates and combines the current "General Requirements" Policy and "Registration Examination Appeals" Policies into one document.

The Registration Committee and Executive Committee have reviewed the Registration Examinations Process, Procedures and Appeals Policy and recommend that it be approved by Council.

Public Interest Rationale for Decision:

It is in the public interest that an applicant demonstrate the knowledge, skill and judgement to practice chiropody by receiving a passing grade for the Registration Examinations. It is further in the public interest that the College maintain the academic rigour of the Registration Examinations, while ensuring that applicants receive a fair and equal chance to demonstrate the required knowledge, skill and judgement.

Recommended Motion:

The motion before Council is to approve the Registration Examinations Process, Procedures and Appeals Policy, attached as Appendix C.

Mover: _____

Seconder: _____



Registration Examination

Information in Relation to Grades

Appeals

Appeals for the written component of the examination relates to:

1. Rescoring of the examination; or
2. Matters relating to administrative issues (e.g. water hammers, flickering lights, unreasonably cold).

Failure alone is not grounds for appeal. Winning an appeal means that the candidate is able to retake the examination at no cost to them. An appeal board cannot deem professional competency.

Withdrawal **Before** the Start of an Examination

If you withdraw before the start of an exam, it does not count as one of your attempts at the exam. Once you have begun an exam sitting, it does count as one of your attempts, even if you must leave the exam early – unless you are granted a “no standing” status based on a sudden event (see below).

Candidates are strongly encouraged not to attempt the exam and to make an appropriate withdrawal if, prior to the exam, they are ill or have extraordinary circumstances, including bereavement, that may affect their performance on the exam.

Withdrawal **During** the Course of an Examination

If a person is experiencing health or other difficulties during the course of the examination, he or she must immediately bring the problem forward to an invigilator in the room. The invigilator will prepare a written report outlining the circumstances surrounding the candidate’s withdrawal during the examination. The candidate’s examination will not be graded. The examination fee will not be refunded. Once you have begun the examination it counts as one of the candidate’s attempts unless the candidate is granted a no standing status.

“No Standing” Status

If you must leave the examination early due to sudden illness or another sudden emergency situation and are unable to complete the examination, you may be granted a “no standing” status. The decision will be based on your written request and explanation, and this must be accompanied by valid documentation acceptable to the Registrar. In such circumstances, the sitting may be waived and not counted as an attempt. The examination fee will not be refunded.



College of Chiropodists of Ontario

Candidate requests for an additional attempt or a “no standing” status on the basis of medical conditions or compassionate grounds (such as bereavement) will NOT be considered, unless received by the Registrar within seven calendar days after the close of the examination. In order for the request to be considered, the appropriate official documentation must be provided. A causal link must be made between the serious medical condition or compassionate circumstances and the effect on the candidate’s performance on the examination.

Note: Petitions for special consideration received more than seven calendar days after the examination (e.g. upon receipt of a notice of an unsuccessful examination result) will NOT be considered.

Processes and Procedures

Improper Conduct During or After the Examination

It is assumed that every candidate taking the College of Chiropodists Registration examination is doing so for legitimate purposes (to become licensed as a chiropodist in Ontario) and will make their best effort when attempting the examination.

Candidates may be removed from the examination and held under supervision until the end when all candidates are permitted to leave, or have other action taken, including possible legal prosecution, for any of the following reasons:

- giving or receiving help during an examination
- attempting to take the examination for someone else
- using notes, books, personal calculators, digital devices of any kind including watches, non-digital watches/timepieces, any unauthorized notations or other aid. In addition, the conduct may impact the candidate’s ability to be registered at the College
- failure to follow the Presiding invigilator or examination staff's instructions, after a warning
- possession or use of photographic, recording or transmission devices in an examination
- writing on any material other than what is provided by the College for that purpose (i.e. examination booklet)
- removal of examination materials or notations of any kind from the examination room
- refusal to comply with time allotments or examination administration procedures
- disruption of the examination for other candidates
- reproduction or disclosure of examination content in any manner (including unauthorized notations, engaging in discussion of examination content with anyone other than examination personnel during or after an examination, whether verbally, in writing or through any blogs or chat rooms, or other means)
- behaving in an unprofessional or discourteous manner, when interacting with staff or invigilators
- any other breach of conduct



In any such case, an incident report will be filed by the Presiding Invigilator and the candidate will be told of this action. The candidate may provide an independent explanation in writing to the College office, no later than 7 calendar days following the close of the examination.

Note: If, after consideration of evidence of improper conduct, a candidate is found by the College to have committed a breach of the above or any stated examination instructions or procedural guidelines, the College may:

- cancel the candidate's examination score
- bar the candidate from one or more future examination sessions
- take such other action as deemed appropriate, including possible legal prosecution

A candidate may be held responsible for all damages and cost-recovery in the event that the examination or any component of it is compromised by his/her action.

Comments, Complaints and Requests for Further Consideration

Any comment or complaint concerning any aspect of the examination (e.g., process, examination facilities, examination administration) should be made verbally to the Presiding Invigilator(s) for immediate attention and correction, if possible. Candidates must document such comments and complaints **in writing, immediately** after the examination.

For the written examination, any candidate who feels that a specific matter requires further consideration or review must make such a request, in writing, outlining the reason(s) for the request. The written request and the accompanying information must be received by the Registrar of the College **within 7 calendar days** after the close of the examination. Requests which are received after this time period will **NOT** be considered.

For the OSCE, any comments or complaints must be documented in writing **before leaving the examination site**. Complaints which are not made on the examination day will **NOT** be considered.

Please note that the content, methodology, standards or assessment criteria of the OSCE examinations are **NOT** subject to review or appeal by candidates or their agents.

Examination Centre Conditions/Environment

Although the College attempts to ensure the comfort of all candidates and personnel, you are advised to dress for fluctuating temperatures in examination rooms.

Note: There is **no smoking** on examination premises.

Please **do not wear scented cosmetics, perfumes or clothing** as some individuals are very sensitive to such substances and you may be refused entry to the examination.

Candidate Materials

The examination is closed-book (no aids are permitted).



College of Chiropractors of Ontario

No watches or timepieces are permitted. The Invigilators will make regular announcements about the time remaining throughout the examination.

If you must take any medication during the examination time, bring it with you and show it to the presiding Invigilators before the examination begins. Any packaging, inserts or related written material must be left at home or handed in to examination personnel.

Do NOT bring or wear valuables such as jewellery to the exam site. Examination personnel have the authority to inspect and request that you remove these items. The College will NOT be responsible for possible loss or damage to these items. Coats, large bags and other belongings must be stored in the location designated by examination personnel.

During the examination period, you will **NOT** be permitted to have **anything** on your desk.

Surfaces of desks and all candidate materials and belongings are subject to inspection by examination personnel, at any time.

You Must NOT Bring into the Examination: (these items are strictly prohibited):

- books, notes, envelopes, or reference materials of any kind
- calculators, rulers, pencil cases
- • data organizers or other digital or electronic storage devices
- communication devices of any kind including pagers or cellular telephones
- computers of any kind, including hand-held devices
- photographic, recording or transmission devices of any kind or
- paper items of any kind, whether blank, printed or written upon, including similar items such as wrappers on food or beverages

Note:

The presiding Invigilator has the authority to inspect any materials brought into the examination and/or to request that candidates remove outerwear, roll up their sleeves and empty all pockets to permit inspection for any prohibited items.

Any materials that may compromise the administration or security of the examination will be confiscated and the candidate in possession of such materials may not be permitted to begin the examination, or to continue if it has already begun. Confiscated items will be sent to the College for inspection, together with a report of the incident, and will be kept until any inspection or investigation is completed.

During the Examination

You and other candidates **MUST NOT** converse or communicate with one another in any manner whatsoever, or speak or read out loud while the examination is underway. Violation of this rule may result in the cancellation of your examination score in the session.



College of Chiropodists of Ontario

You may converse with presiding invigilators if required, in a discrete and confidential manner. If you wish to use the washroom or when you are ready to hand in your examination materials, you must raise your hand to indicate this to examination personnel.

Candidates should behave in a professional and courteous manner when interacting with invigilators.

At the End of the Examination

At the end of the examination, you must leave the examination premises immediately after handing in your Examination Booklet, answer sheet and other examination materials.

Emergency Procedures

Emergency Building Evacuation

If the need arises for building evacuation due to fire or other emergency during an examination, the Presiding Invigilators, in cooperation with emergency personnel, has full authority to direct and supervise candidates and examination personnel in the emergency evacuation of a building.

The guidelines and procedures established by the College are based on two underlying principles: 1) personal safety, and 2) security of examination content and materials.

Note: Remember that at all times during an emergency evacuation, candidates must NOT converse or otherwise communicate with one another. Candidates continue to be subject to all rules of the examination.

Other Extraordinary Circumstances

If at any time before an upcoming examination administration, there should arise **any circumstances** including such factors as weather, transportation, strikes, public health issues, or other reasons which may affect the scheduling arrangements and admission procedures for examinations, advisory information will be promptly posted on the College's website: www.cocoo.on.ca. You are advised to check the website before attending an examination, to look for any special notices which may affect your arrangements.

You will be required to comply with any health, safety, and security screening procedures, as posted in the examination centre or outlined verbally by examination personnel.

The College reserves the right to cancel or reschedule any examination administration, if circumstances require that a scheduled examination cannot be administered.

Approved by Council on October 17, 2014



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

REGISTRATION EXAMINATION **APPEALS POLICY**

Applicants who are unsuccessful on the College of Chiropodists of Ontario written exam and/or the OSCE have the right to appeal their results based on rescoring of the examination or on matters relating to administrative issues (e.g., flickering lights, unreasonably cold or hot) to confirm that the reported score was accurate.

Written appeals or requests for rescoring must be received by e-mail to info@cocoo.on.ca **no later than thirty days (30) after the date appearing on the results letter or e-mail**. A fee of one hundred fifty dollars (\$150.00) will be charged for an appeal or re-scoring request. The fee will be reimbursed in full should the appeal be successful.

An examination result may only be appealed based on administration or procedural irregularities. The fact that irregularities occur is not in itself grounds for a successful appeal. There must be evidence that the irregularity resulted in unfairness that adversely and materially affected the performance of the candidate.

The following are not subject to appeal:

1. Examination content
2. Examination methodology
3. Performance standards
4. Assessment criteria
5. Scoring criteria of the College Examinations

All appeals must be submitted in writing and contain all grounds and reasons for the appeal.

Appeals will not be accepted from third parties on behalf of any candidate.

Documentation such as character references or testimonials, training program, grades, faculty recommendations or the opinions of other 'experts' should not be included as they will not be taken into consideration.

The appeal process is not intended to allow a challenge or review of the content of the exam. Neither is it intended as a means for the applicant to obtain feedback regarding the applicant's specific performance on the examination. Applicants will not be permitted to review exams, either written or OSCE.

The Registrar will hear all appeals received within 30 days following the deadline date. A written ruling will be provided to all applicants.

In the event a written exam paper is rescored resulting in a passing score being awarded, the candidate's file will be amended to reflect a successful examination.

Applicants whose appeal is granted as a result of conditions that existed during an exam sitting or OSCE session which, in the opinion of the Registrar, attributed to the candidate being unsuccessful, may have the unsuccessful attempt removed from their file and will be allowed another attempt on the written exam or OSCE, as the case may be, at no cost.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

Policy: Registration Examination Process, Procedures and Appeals

Date Created: December 2023

Review Dates:

Approved By: Registration Committee

EXAMINATION PROCESS & PROCEDURES

Conduct

It is assumed that applicants taking the College of Chiropodists Registration examination are doing so for legitimate purposes (to become licensed as a Chiropodist in Ontario) and will make their best effort when attempting the examination.

Applicants may be removed from the examination and held under supervision until the end when all applicants are permitted to leave, or have other action taken, including possible legal prosecution, for any of the following reasons:

- giving or receiving help during an examination;
- attempting to take the examination for someone else;
- using notes, books, personal calculators, digital devices of any kind including smart or digital watches, non-digital watches/timepieces, any unauthorized notations or other aid;
- failure to follow instructions from examination personnel;
- possession or use of photographic, recording or transmission devices;
- writing on any material other than what is provided by the College for that purpose (i.e. examination booklet);
- removal of examination materials or notations of any kind from the examination areas;
- refusal to comply with time allotments or examination administration procedures;
- disruption of the examination for other applicants;
- reproduction or disclosure of examination content in any manner (including unauthorized notations, engaging in discussion of examination content with anyone other than examination personnel during or after an examination, whether verbally, in writing, or by other means);
- behaving in an unprofessional or discourteous manner, when interacting with examination personnel; and/or
- any other breach of conduct.

In any such case, an Incident Report will be filed by examination personnel and the applicant will be informed of this action. The applicant may provide an independent explanation in writing to the College, no later than 7 calendar days following the close of the examination.

Note: Conduct of this nature may impact an applicant’s ability to be registered at the College. If, after consideration of evidence of improper conduct, an applicant is found by the College to have committed a breach of the above or any stated examination instructions or procedural guidelines, the College may:

- cancel the applicant’s examination score;
- bar the applicant from one or more future examination sessions; and/or
- take such other action as deemed appropriate, including possible legal prosecution.

An applicant may be held responsible for all damages and cost-recovery in the event that the examination or any component of it is compromised by their actions.

Conduct During the Examination

Applicants MUST NOT converse or communicate with one another in any manner whatsoever, or speak or read out loud while the examination is underway. Violation of this rule may result in the cancellation of an applicant’s examination score in the session.

Applicants may converse with examination personnel if required, in a discrete and confidential manner. If an applicant wishes to use the washroom or when an applicant is ready to hand in their examination materials, they must raise their hand to indicate this to examination personnel.

Applicants should behave in a professional and courteous manner when interacting with examination personnel.

Conduct Following the Examination

At the end of the examination, applicants must leave the examination premises immediately after handing in their examination booklet, answer sheet, and any other examination materials.

Withdrawals

Withdrawal Before the Start of an Examination

If an applicant withdraws before the start of an examination, it will not count as an attempt at the exam. Once an applicant has begun an examination sitting, it will count as an attempt, even if the applicant must leave the examination early – unless the applicant is granted a “no standing” status (see below).

Applicants are strongly encouraged not to attempt the examination(s) and to make an appropriate withdrawal if, prior to the exam, they are ill or have extraordinary circumstances, including bereavement, that may affect their performance on the examination.

Withdrawal During the Course of an Examination

If an applicant is experiencing health or other difficulties during the course of the examination(s), they must immediately bring the problem forward to examination personnel. Examination personnel will prepare an Incident Report outlining the circumstances surrounding the applicant’s withdrawal during the examination. The applicant’s examination will not be graded. The examination fee will not be refunded. Once an applicant has begun the examination it counts as an attempt, unless the candidate is granted a “no standing” status (see below).

“No Standing” Status

If an applicant must leave the examination(s) early due to sudden illness or another sudden emergency situation and are unable to complete the examination, following completion of an Incident Report by the applicant and/or examination personnel, they may be granted a “no standing” status. The decision for “no standing” status will be based on an applicant’s written appeal (see Examination Appeals), and this must be accompanied by valid documentation acceptable to the Registrar. In such circumstances, the sitting may be waived and not counted as an attempt. The examination fee will not be refunded.

Applicant requests for a “no standing” status on the basis of medical conditions or compassionate grounds (such as bereavement) will only be considered if received by the Registrar according to the timelines specified in the Examination Appeals section of this policy.

Incidents & Incident Reports

Incidents concerning any aspect of the written or OSCE examination (e.g., process, examination facilities, examination administration) should be made verbally to examination personnel for immediate attention and correction, if possible.

Applicants must document such incidents in writing, by completing and submitting an Incident Report **before leaving the examination**, outlining the reason(s) for filing the report. Incident Reports cannot be completed once the applicant has left the examination.

Examination Centre Conditions/Environment

Although the College attempts to ensure the comfort of all applicants and examination personnel, applicants are advised to dress for fluctuating temperatures in examination rooms.

Note: There is no smoking on examination premises. Examination premises are also scent-free environments.

Candidate Materials

The examination is closed-book (no aids are permitted).

No watches or timepieces are permitted. Examination personnel will make regular announcements regarding time remaining throughout the examination.

If an applicant must take any medication during the examination time, this must be disclosed and arranged with examination personnel before the examination begins. Any packaging, inserts or related written material must be left at home or handed in to examination personnel.

Do NOT bring or wear valuables such as jewellery to the exam site. Examination personnel have the authority to inspect and request that applicants remove these items. The College will NOT be responsible for possible loss or damage to these items. Coats, large bags and other belongings must be stored in the location designated by examination personnel.

During the examination period, applicants will NOT be permitted to have anything on their desk.

Surfaces of desks and all applicant materials and belongings are subject to inspection by examination personnel, at any time.

Applicants are NOT permitted to bring the following into the examination: (these items are strictly prohibited):

- books, notes, envelopes, or reference materials of any kind;
- calculators, rulers, pencil cases;
- data organizers or other digital or electronic storage devices;
- communication devices of any kind (including cell phones, pagers, tablets, etc.)
- computers of any kind, including hand-held devices;
- photographic, recording or transmission devices of any kind; and/or
- paper items of any kind, whether blank, printed or written upon, including similar items such as wrappers on food or beverages.

Note: Examination personnel have the authority to inspect any materials brought into the examination and/or to request that applicants remove outerwear, roll up their sleeves and empty all pockets to permit inspection for any prohibited items.

Any materials that may compromise the administration or security of the examination will be confiscated and the applicant in possession of such materials may not be permitted to begin the examination, or to continue if it has already begun. Confiscated items will be sent to the College for inspection, together with an Incident Report (to be completed by examination personnel), and will be kept until any inspection or investigation is completed.

Emergency Procedures

If the need arises for building evacuation due to fire or other emergency during an examination, the examination personnel, in cooperation with emergency personnel, have full authority to direct and supervise applicants and examination personnel in the emergency evacuation of a building.

The guidelines and procedures established by the College are based on two underlying principles:

1. personal safety, and
2. security of examination content and materials.

Note: At all times during an emergency evacuation, applicants must NOT converse or otherwise communicate with one another. Applicants continue to be subject to all rules of the examination.

Other Extraordinary Circumstances

If at any time before an upcoming examination administration, there should arise any circumstances including such factors as weather, transportation, strikes, public health issues, or other reasons which may affect the scheduling arrangements and admission procedures for examinations, advisory information will be promptly posted on the College's website (www.cocoo.on.ca). Applicants are advised to check the website before attending an examination, to look for any special notices which may affect their arrangements.

Applicants will be required to comply with any health, safety, and security screening procedures, as posted in the examination centre or outlined verbally by examination personnel.

The College reserves the right to cancel or reschedule any examination administration, if circumstances require that a scheduled examination cannot be administered.

EXAMINATION APPEALS

Applicants who are unsuccessful on the College of Chiropractors of Ontario written exam and/or the OSCE (clinical) exam have the right to appeal their results based on the following:

1. Re-scoring of the examination;
2. Matters relating to administrative or procedural irregularities (e.g., flickering lights, unreasonably cold or hot, etc.);
3. Personal sickness/illness¹; and/or
4. Personal or family emergency².

Written appeals must be received by e-mail to info@cocoo.on.ca **no later than thirty days (30) after the date appearing on the results letter or e-mail**. A fee of one hundred fifty dollars (\$150.00) will be charged for each appeal, payable upon request of the appeal. The fee will be reimbursed in full should the appeal be successful.

An appeal based on re-scoring of the examination may result in a change to the applicant's overall score; however, applicants are informed that there are multiple levels of quality assurance that go into scoring the examinations, and the odds of error are very low.

An examination result may only be appealed based on administration or procedural irregularities. The fact that irregularities occur is not in itself grounds for a successful appeal. There must be evidence that the irregularity resulted in unfairness that adversely and materially affected the performance of the candidate. While an appeal can be submitted in the absence of an Incident Report (completed on the day of the examination), it is expected that any administrative or procedural irregularities would have been reported by the applicant on the day of the examination.

The following are not subject to appeal:

1. Examination content;
2. Examination methodology;
3. Performance standards;
4. Assessment criteria; and/or
5. Scoring criteria of the College Examinations.

All appeals must be submitted in writing and contain all grounds and reasons for the appeal.

Appeals will not be accepted from third parties on behalf of any applicant.

¹ In this instance, an Incident Report must be completed and submitted on the day of the examination, and an original note from a physician must be obtained and provided to the College within 3 days of the date of the examination.

² In this instance, an Incident Report must be completed and submitted on the day of the examination, and the Registrar must be provided with proof of personal or family emergency must be provided, to their satisfaction.

Documentation such as character references or testimonials, training program, grades, faculty recommendations or the opinions of other 'experts' should not be included as they will not be taken into consideration.

The appeal process is not intended to allow a challenge or review of the content of the exam. Neither is it intended as a means for the applicant to obtain feedback regarding the applicant's specific performance on the examination. Applicants will not be permitted to review exams, either written or OSCE.

The Registrar will hear all appeals received within 30 days following the date appearing on the results letter or e-mail to the applicant. A written ruling will be provided to all applicants.

In the event an exam component is re-scored resulting in a passing score being awarded, the applicant's file will be amended to reflect a successful examination.

Applicants whose appeal is granted as a result of administrative or procedural irregularities that existed during an exam sitting or OSCE session which, in the opinion of the Registrar, attributed to the candidate being unsuccessful, may have the unsuccessful attempt removed from their file and will be allowed another attempt on the written exam or OSCE, as the case may be, at no cost.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.5

COUNCIL BRIEFING NOTE RE: RETURNING TO PRACTICE POLICY

Background:

The College issues certificates of registration to those who meet the qualifications set out in its Registration Regulation, made under the *Chiropody Act, 1991*.

Section 4(1)3 of Ontario Regulation 830/93 under the *Chiropody Act, 1991*, S.O. 1991 c. 20 (“Chiropody Act”) states that to obtain a General certificate of registration, an applicant “must have engaged in clinical practice for a total of at least three months during the two years immediately preceding” the date of application.

Section 8(1)(1) of Ontario Regulation 830/93 requires that Registrants who have not engaged in clinical practice as a Chiropodist for a period or periods of at least three months during the previous two years shall not engage in the practice of chiropody until the Registrant satisfies the Registration Committee that they are competent to do so.

Section 15.1 of Ontario Regulation 830/93 outlines that former Registrants, who at the time of resignation held a General certificate of registration, may be reinstated if they meet the clinical practice requirement in section 4(1)3, among other things.

The Returning to Practice policy sets out the requirements for those who have been absent from practice and wish to return. The Registration Committee and Executive Committee have reviewed the Returning to Practice Policy and recommend that it be approved by Council.

Public Interest Rationale for Decision:

It is in the public interest to ensure that current or former Registrants who wish to return to practice demonstrate the knowledge, skill and judgement required to practice chiropody in a safe and effective manner.

Recommended Motion:

The motion before Council is to approve the Returning to Practice Policy, attached as Appendix A.

Mover: _____

Seconder: _____



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

Policy: Returning to Practice

Date Created: December 2023

Review Dates:

Approved By: Registration Committee

Purpose of the Policy:

The College of Chiropodists of Ontario (“College”) issues certificates of registration to those who meet the qualifications set out in its Registration Regulation, made under the *Chiropody Act, 1991*.

Currency of Practice requirements for obtaining and maintaining a General Certificate of registration require that Registrants “must have engaged in clinical practice for a total of at least three months during the two years immediately preceding” the date of application or renewal (“Currency of Practice”). Criteria related to assessing Currency of Practice can be found in the College’s [Declaring Clinical Practice Hours Guideline](#).

When individuals do not meet the Currency of Practice requirement and wish to return to practice, they must satisfy the Registration Committee that they are competent to return to practice.

It is in the public interest to ensure that current or former Registrants who wish to return to practice demonstrate the knowledge, skill and judgement required to practice chiropody in a safe and effective manner.

Authority for the Policy:

Section 4(1)3 of Ontario Regulation 830/93 under the *Chiropody Act, 1991*, S.O. 1991 c. 20 (“Chiropody Act”) states that to obtain a General certificate of registration, an applicant “must have engaged in clinical practice for a total of at least three months during the two years immediately preceding” the date of application.

Section 8(1)(1) of Ontario Regulation 830/93 requires that Registrants who have not engaged in clinical practice as a Chiropodist for a period or periods of at least three months during the previous two years shall not engage in the practice of chiropody until the Registrant satisfies the Registration Committee that they are competent to do so.

Section 15.1 of Ontario Regulation 830/93 outlines that former Registrants, who at the time of resignation held a General certificate of registration, may be reinstated if they meet the clinical practice requirement in section 4(1)3, among other things.

Requirements related to an application to return to practice:

In addition to the other qualifications set out in the Registration Regulation, made under the *Chiropractic Act, 1991*, the Currency of Practice requirements for those applying to return to practice are outlined below.

Current Registrants:

For current Registrants of the College, the Registration Committee will consider the successful completion of the following requirements to establish competence:

Years absent from practice	Requirements
Under 2 years	None (Currency of Practice requirements are met)
2 – 5 years	200 hours of Supervised Clinical Practice
5 – 10 years*	Successfully complete the College’s OSCE Examination, and 200 hours of Supervised Clinical Practice
10 – 15 years*	Successfully complete all components of the College’s Registration Examination, and 200 hours of Supervised Clinical Practice

*Successful completion of applicable examinations is required prior to completion of the Supervised Clinical Practice requirement.

Former Registrants:

For former Registrants of the College, the Registration Committee will consider the successful completion of the following requirements to establish competence:

Years absent from practice	Requirements
Under 2 years	None (Currency of Practice requirements are met)
2 – 5 years	200 hours of Supervised Clinical Practice
5 – 7 years*	Successfully complete the College's OSCE Examination, and 200 hours of Supervised Clinical Practice
7 – 15 years*	Successfully complete all components of the College's Registration Examination, and 200 hours of Supervised Clinical Practice

*Successful completion of applicable examinations is required prior to completion of the Supervised Clinical Practice requirement.

Finding a suitable Supervisor:

Those who are required to complete hours of Supervised Clinical Practice are responsible for finding a suitable Supervisor, to be approved by the College.

The general requirements for those acting as a Supervisor are as follows:

- Meets the Currency of Practice requirements;
- Is up-to-date with College requirements, including fees and applicable Quality Assurance Program requirements;
- Has never been charged with an offence in any jurisdiction under a federal, provincial, or municipal law;
- Has never been found guilty of any offence relevant to the suitability to practice the profession;
- Is not the subject of any current investigation, inquiry or proceeding for professional misconduct, incompetence or incapacity or any similar investigation or proceeding in relation to any profession in any jurisdiction;
- Has never been found guilty of professional misconduct or been found to be incompetent or incapacitated or any similar finding in relation to any profession in any jurisdiction; and,
- Does not have any current Terms, Conditions, or Limitations placed on their certificate that would impact their ability to fulfil a supervisory role.

The Supervisor will be required to submit reports to the College attesting to the competence and suitability of the supervised individual returning to practice.

Completing the College's Examinations

To better understand what is required to successfully complete components of the College's Registration Examinations, please refer to the College's [Registration Examination webpage](#) and its applicable resources.

Financial Considerations

Individuals applying to return to practice are responsible for the payment of any related application fees, examination fees, or fees that may be incurred with respect to Supervised Clinical Practice.

Current and former Registrants with 15+ years absent from practice

Individuals who have not been engaged in clinical practice as a Chiropractor for over 15 years should contact the College for information about making a submission to the Registration Committee related to the requirements that they must complete to be eligible for a General Certificate. The Registration Committee may determine that new Chiropractic/Podiatry education must be completed.

References:

[O. Reg. 830/93: Registration Regulation](#)

Related Policies:

Related Guidelines: [Declaring Clinical Practice Hours](#)



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.6.01

COUNCIL BRIEFING NOTE RE: CONTINUING EDUCATION & SELF-ASSESSMENT POLICY

Background:

The *Regulated Health Professions Act, 1991*, mandates that each Chiropodist/Podiatrist registered (the “Registrant”) with the College of Chiropodists of Ontario (the “College”) participate in a Quality Assurance Program that includes continuing education and self-assessment components.

On June 24, 2022, Council approved an update to the College’s Continuing Education & Self-Assessment Policy, which outlined moving the Continuing Education requirements from a two-year cycle to an annual cycle, beginning January 1, 2024. On October 28, 2022, Council approved the inclusion of the requirement for Registrants to obtain Equity, Diversity, Inclusivity (EDI) training as part of their Category B Continuing Education requirements within the 2022-2023 Continuing education cycle.

This update brings the EDI continuing education requirement into the policy approved on June 24, 2022, with an adjustment to the number of credit hours required, to fit within the annual cycle.

The Quality Assurance Committee and Executive Committee have reviewed the Continuing Education & Self-Assessment Policy and recommend that it be approved by Council.

Public Interest Rationale for Decision:

It is in the public interest that Registrants of the College engage in Continuing Education to maintain currency in the profession. Registrants are obligated to comply with the College’s Continuing Education requirements which are intended to promote the safety of the public. The College is committed to promoting EDI in our approach to professional regulation, including patients, registrants, and other stakeholders.

Recommended Motion:

The motion before Council is to approve the amendment to the Continuing Education & Self-Assessment Policy, as follows:

“As part of a Registrant’s Category B continuing education requirements, each Registrant shall complete **2 hours** of continuing education relating to Equity, Diversity & Inclusivity (“EDI”). Registrants can choose the EDI program that best suits their continuing education objectives as identified in their Self-Assessment Tool.”

Mover: _____

Seconder: _____



COLLEGE OF CHIROPODISTS OF ONTARIO
Regulating Chiropodists and Podiatrists in Ontario

Policy: Continuing Education and Self-Assessment

Date Created: June 21, 2019

Review Dates: June 24, 2022, October 28, 2022, December 7, 2023

Approved By: Quality Assurance Committee

In this Policy:

“College” means the College of Chiropodists of Ontario;

“Committee” and “QA Committee” means the Quality Assurance Committee;

“Registrant” means a member of the College; and

“QA” means Quality Assurance.

Authority for the Policy:

The *Regulated Health Professions Act, 1991*, mandates that each Chiropodist/Podiatrist registered (the “Registrant”) with the College of Chiropodists of Ontario (the “College”) participate in a Quality Assurance Program that includes continuing education and self-assessment components.

Continuing Education Requirements:

All Registrants are required to complete a minimum of **25 Continuing Education (CE) hours annually**, commencing on January 1st. These hours are to be documented by each Registrant on a CE Log with a description of the CE activity, the course provider, and a brief evaluation of the CE activity’s value to the Registrant’s practice. Registrants are required to retain the CE Log as well as proof of completion of the activities referred to in the Log.

CE activities must relate directly to the practice of Chiropody or Podiatry. As a general guideline, one hour of credit will be accepted for one hour of participation in an educational activity. Each Registrant is required to complete a total minimum of 25 hours in the annual cycle.

Educational activities must be completed in two categories:

Category A – Structured Programs

Category A relates to lecture style programs provided by a recognized educational institution or other regulated health professional group or association. A **minimum of ten (10) credit hours** must be completed in this category. Registrants can obtain their Category A credits from participation in

electronically delivered programs, such as webinars and podcasts, if there is either an evaluative component or some other satisfactory evidence of the completion of the program.

Recognized providers in Category A include:

- Accredited universities and hospitals,
- The Michener Institute,
- The American Podiatric Medical Association’s approved providers,
- The Ontario Society of Chiropractors,
- The Ontario Podiatric Medical Association,
- The Canadian Federation of Podiatric Medicine,
- The Canadian Podiatric Medical Association, and its provincial member associations (BC, AB, ON and PQ), and
- The Ontario Hospital Association.

A maximum of **5 hours** of the total required in this category may be claimed for teaching students enrolled in the Chiropractic program at the Michener Institute, and/or working on College Committees and/or working as a College Assessor or Monitor.

Category B – Other Educational Activities

Category B includes lectures, workshops, supplier/provider programs and self-directed independent learning activities such as journal reviews, recorded materials, mentorships, presentations, on-line courses and professional readings. Members may claim a **maximum of fifteen (15) credit hours** in this category per cycle.

As part of a Registrant’s Category B continuing education requirements, each Registrant shall complete 2 hours of continuing education relating to Equity, Diversity & Inclusion (“EDI”). Registrants can choose the EDI program that best suites their continuing education objectives as identified in their Self-Assessment Tool.

Self-Assessment Requirements:

Prior to the commencement of the annual Continuing Education cycle, a Registrant must complete a Self-Assessment Tool (the “SAT”).

The SAT is to be used in conjunction with the Continuing Education log to encourage and guide a Registrant’s continuous learning. It is a document that will help the Registrant summarize strengths and identify opportunities to enhance the skills, knowledge and competence required to practice the Chiropractic/Podiatry profession.

The SAT has been developed with consideration of the Standards of Practice, Competencies, Code of Ethics, Provincial and College Regulations and Guidelines. Registrants are asked to compare their performance to other Registrants within the same membership class in the areas of communication skills, record keeping, collaboration, research principles, and clinical and theoretical knowledge. An action plan can be developed from this self-assessment.

This SAT is not a test, but a guide to define individual learning objectives. All Registrants should expect that some areas require educational growth, regardless of their experience, education, or competence.

Each Registrant must complete one (1) SAT during each Continuing Education cycle and retain the completed SAT in their files. This form is not to be returned to the College unless it is requested by the Committee.

Continuing Education Audit:

Each year 10% of Registrants are randomly selected for evaluation of their Continuing Education requirements.

Each selected Registrant will be contacted directly by College staff and be required to provide a completed Continuing Education Log. The CE Log must be submitted along with supporting documentation (ie. Completion certificates, itineraries, receipts, etc.).

Each selected Registrant's Log and SAT will be reviewed by the Quality Assurance Committee. Registrants either meet the CE requirements or are provided with direction from the QAC to meet their regulatory requirements.

The Continuing Education and Self-Assessment requirements are contained in [Regulation 203/94](#).

Non-Compliance

The deadline for submission of the CE Log will align with the College's annual renewal. All selected Registrants will be required to upload their CE Log and supporting documentation no later than February 14th.

Failure to comply with this deadline will result in a penalty fee, in accordance with [College By-Law No. 2: Fees](#), to be paid by the Registrant before they are able to renew the following year.

Failure to comply with the CE Audit or the QAC's direction may result in a referral to the ICRC for failing to comply with the requirements of the Quality Assurance Program.

A Registrant who fails to comply or meet the requirements of the continuing education requirements will be subject to the action identified in section 29 (1), (2) and (3) of the Regulation as follows:

- Section 29(1) - A member shall maintain a record of his or her self-assessments and continuing education activities and submit them to the College upon request.
- Section 29(2) - If a member fails to submit the records referred to in subsection (1) when requested to do so, the Registrar shall refer the matter to the Committee and notify the

member in writing that this has been done and that the member may make written submissions to the Committee within 30 days after receiving the notice.

- Section 29(3) - After considering the member's written submissions, if any, the Committee may,
 - a) grant the member an extension for a specified period of time during which the member shall submit their records;
 - b) require the member to undergo a practice assessment by an Assessor in accordance with section 30.

Request for Deferral

A request for a deferral of the Continuing Education Audit must be submitted in writing to the College within 15 days of notice of selection.

The Quality Assurance Committee authorizes the Registrar, and/or the Registrar's delegate, to evaluate each request for deferral on a case-by-case basis and advise the Registrant of the decision, in writing, within 15 days of receipt of the deferral request.

A request for a deferral from a Continuing Education Audit may be granted for, but is not limited to, the following reasons:

- Not currently practicing;
- Illness (of the Registrant or an immediate family member where the Registrant is the primary caregiver);
- Bereavement; and/or
- Personal crisis or other extenuating circumstances.

References:

[Regulation 203/94](#)

[College By-Law No. 2: Fees](#)



COLLEGE OF CHIROPODISTS OF ONTARIO
Regulating Chiropodists and Podiatrists in Ontario

Policy: Continuing Education and Self-Assessment

Date Created: June 21, 2019

Review Dates: June 24, 2022, October 28, 2022, December 7, 2023

Approved By: Quality Assurance Committee

In this Policy:

“College” means the College of Chiropodists of Ontario;

“Committee” and “QA Committee” means the Quality Assurance Committee;

“Registrant” means a member of the College; and

“QA” means Quality Assurance.

Authority for the Policy:

The *Regulated Health Professions Act, 1991*, mandates that each Chiropodist/Podiatrist registered (the “Registrant”) with the College of Chiropodists of Ontario (the “College”) participate in a Quality Assurance Program that includes continuing education and self-assessment components.

Continuing Education Requirements:

All Registrants are required to complete a minimum of **25 Continuing Education (CE) hours annually**, commencing on January 1st. These hours are to be documented by each Registrant on a CE Log with a description of the CE activity, the course provider, and a brief evaluation of the CE activity’s value to the Registrant’s practice. Registrants are required to retain the CE Log as well as proof of completion of the activities referred to in the Log.

CE activities must relate directly to the practice of Chiropody or Podiatry. As a general guideline, one hour of credit will be accepted for one hour of participation in an educational activity. Each Registrant is required to complete a total minimum of 25 hours in the annual cycle.

Educational activities must be completed in two categories:

Category A – Structured Programs

Category A relates to lecture style programs provided by a recognized educational institution or other regulated health professional group or association. A **minimum of ten (10) credit hours** must be completed in this category. Registrants can obtain their Category A credits from participation in

electronically delivered programs, such as webinars and podcasts, if there is either an evaluative component or some other satisfactory evidence of the completion of the program.

Recognized providers in Category A include:

- Accredited universities and hospitals,
- The Michener Institute,
- The American Podiatric Medical Association’s approved providers,
- The Ontario Society of Chiropodists,
- The Ontario Podiatric Medical Association,
- The Canadian Federation of Podiatric Medicine,
- The Canadian Podiatric Medical Association, and its provincial member associations (BC, AB, ON and PQ), and
- The Ontario Hospital Association.

A maximum of **5 hours** of the total required in this category may be claimed for teaching students enrolled in the Chiropody program at the Michener Institute, and/or working on College Committees and/or working as a College Assessor or Monitor.

Category B – Other Educational Activities

Category B includes lectures, workshops, supplier/provider programs and self-directed independent learning activities such as journal reviews, recorded materials, mentorships, presentations, on-line courses and professional readings. Members may claim a **maximum of fifteen (15) credit hours** in this category per cycle.

As part of a Registrant’s Category B continuing education requirements, each Registrant shall complete **2 hours** of continuing education relating to Equity, Diversity & Inclusion (“EDI”). Registrants can choose the EDI program that best suites their continuing education objectives as identified in their Self-Assessment Tool.

Self-Assessment Requirements:

Prior to the commencement of the annual Continuing Education cycle, a Registrant must complete a Self-Assessment Tool (the “SAT”).

The SAT is to be used in conjunction with the Continuing Education log to encourage and guide a Registrant’s continuous learning. It is a document that will help the Registrant summarize strengths and identify opportunities to enhance the skills, knowledge and competence required to practice the Chiropody/Podiatry profession.

The SAT has been developed with consideration of the Standards of Practice, Competencies, Code of Ethics, Provincial and College Regulations and Guidelines. Registrants are asked to compare their performance to other Registrants within the same membership class in the areas of communication skills, record keeping, collaboration, research principles, and clinical and theoretical knowledge. An action plan can be developed from this self-assessment.

This SAT is not a test, but a guide to define individual learning objectives. All Registrants should expect that some areas require educational growth, regardless of their experience, education, or competence.

Each Registrant must complete one (1) SAT during each Continuing Education cycle and retain the completed SAT in their files. This form is not to be returned to the College unless it is requested by the Committee.

Continuing Education Audit:

Each year 10% of Registrants are randomly selected for evaluation of their Continuing Education requirements.

Each selected Registrant will be contacted directly by College staff and be required to provide a completed Continuing Education Log. The CE Log must be submitted along with supporting documentation (ie. Completion certificates, itineraries, receipts, etc.).

Each selected Registrant's Log and SAT will be reviewed by the Quality Assurance Committee. Registrants either meet the CE requirements or are provided with direction from the QAC to meet their regulatory requirements.

The Continuing Education and Self-Assessment requirements are contained in [Regulation 203/94](#).

Non-Compliance

The deadline for submission of the CE Log will align with the College's annual renewal. All selected Registrants will be required to upload their CE Log and supporting documentation no later than February 14th.

Failure to comply with this deadline will result in a penalty fee, in accordance with [College By-Law No. 2: Fees](#), to be paid by the Registrant before they are able to renew the following year.

Failure to comply with the CE Audit or the QAC's direction may result in a referral to the ICRC for failing to comply with the requirements of the Quality Assurance Program.

A Registrant who fails to comply or meet the requirements of the continuing education requirements will be subject to the action identified in section 29 (1), (2) and (3) of the Regulation as follows:

- Section 29(1) - A member shall maintain a record of his or her self-assessments and continuing education activities and submit them to the College upon request.
- Section 29(2) - If a member fails to submit the records referred to in subsection (1) when requested to do so, the Registrar shall refer the matter to the Committee and notify the

member in writing that this has been done and that the member may make written submissions to the Committee within 30 days after receiving the notice.

- Section 29(3) - After considering the member's written submissions, if any, the Committee may,
 - a) grant the member an extension for a specified period of time during which the member shall submit their records;
 - b) require the member to undergo a practice assessment by an Assessor in accordance with section 30.

Request for Deferral

A request for a deferral of the Continuing Education Audit must be submitted in writing to the College within 15 days of notice of selection.

The Quality Assurance Committee authorizes the Registrar, and/or the Registrar's delegate, to evaluate each request for deferral on a case-by-case basis and advise the Registrant of the decision, in writing, within 15 days of receipt of the deferral request.

A request for a deferral from a Continuing Education Audit may be granted for, but is not limited to, the following reasons:

- Not currently practicing;
- Illness (of the Registrant or an immediate family member where the Registrant is the primary caregiver);
- Bereavement; and/or
- Personal crisis or other extenuating circumstances.

References:

[Regulation 203/94](#)

[College By-Law No. 2: Fees](#)



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.7.01

COUNCIL BRIEFING NOTE RE: RECOMMENDED AMENDMENTS TO BYLAW 2: FEES Penalty Fee for Non-Compliance with CE Log Submission

Background:

The *Regulated Health Professions Act, 1991*, mandates that each Chiropodist/Podiatrist registered (the “Registrant”) with the College of Chiropodists of Ontario (the “College”) participate in a Quality Assurance Program that includes continuing education and self-assessment components. Note – the term “Registrant” and “Member” are used interchangeably within the briefing note and the bylaws.

On June 24, 2022, Council approved updates to the College’s Continuing Education & Self-Assessment Policy, which outlined moving the Continuing Education requirements to an annual cycle, beginning January 1, 2024. The updated policy included a fee of \$250.00 for non-compliance, to be levied when Registrants who have been selected to submit their CE Log fail to do so by the February 14 deadline. To fully implement the fee, By-Law 2 requires an update to include this information.

Council is being asked to approve, the following inclusions to By-Law No. 2: Fees:

- (1) Implement a penalty fee of \$250.00 for failure to submit a Continuing Education Log and supporting documentation on or before February 14th.

Public Interest Rationale for Decision:

It is in the public interest that Registrants of the College engage in Continuing Education to maintain currency in the profession. Registrants are obligated to comply with the College’s Continuing Education requirements which are intended to promote the safety of the public. A penalty fee acts as a deterrent, thereby encouraging timely completion of Continuing Education requirements. In addition, the public interest is served when the College remains financially stable and maintains proper funding and resources to fulfill its mandate of protection of the public. One of the ways the College maintains financial stability is by ensuring that the costs incurred as a result of Registrant non-compliance with College requirements are recovered.

Consultation Feedback:

After Council approved the amendment to Bylaw 2, in principle at its September 2023 meeting, the proposed change was circulated to registrants and other stakeholders for 60 days. The College received feedback that was in support of the proposed Bylaw change. The feedback is attached at Appendix C.

Recommended Motion:

That Council approve the amendments to By-law 2, attached as Appendix A, as follows:

CONTINUING EDUCATION

5.06 Where a member who is required to submit their Continuing Education Log and supporting documentation fails to do so on or before February 14th, the member shall pay a fee of \$250.00.

Mover: _____

Secunder: _____



BY-LAW NO. 2: FEES

1.01 In this by-law,

“certificate of registration” means a certificate of registration in any class unless otherwise indicated;

“fee” includes a required fee(s) or charge, an administrative fee(s) or an administration charge(s);

“Inhalation Certificate” is the authorization issued by the College to a member to permit the member to administer a substance to a patient by inhalation, as permitted by the *Chiroprody Act, 1991* and its regulations;

“member” includes a former member.

2.01 Fees described in this by-law are exclusive of any applicable taxes and are not refundable either in whole or in part.

3.01 A person who submits an application for a certificate of registration shall pay an application fee, which fee shall be submitted along with the application of

(a) \$200.00 where the application is based upon the applicant having completed an educational program which was approved by Council at the time the application is submitted; and

(b) \$500.00 where the application is based upon the applicant having been completed an education program which has not been approved by Council and therefore must, in accordance with Council policy, be assessed before Council considers approving the program.

3.02 A person who is entitled to the issuance of a certificate of registration shall pay a registration fee of \$100.00 and an annual fee calculated in accordance with Article 3.03, which fees are due prior to the issuance of the certificate of registration.

3.03 Subject to Article 4.03.1, the annual fee for the year in which a member is first issued a certificate of registration is

(a) \$1,800.00 if the certificate of registration is issued on or after February 14th but before July 1st; and

(b) \$900.00 if the certificate of registration is issued on or after July 1st provided the applicant had not previously been a member of the College.



- 3.04** The annual fee for a member who previously held a certificate of registration issued by the College is that fee set out in Article 4.03.
- 4.01** Every member shall pay an annual fee in accordance with this by-law.
- 4.02** Subject to article 4.03.1, the annual fee is due and payable on or before February 14th for the year commencing on January 1st of that calendar year and ending on December 31st of that calendar year.
- 4.03** Subject to article 4.03.1, the annual fee is \$1,800.00 if paid on or before February 14th in the calendar year in which the fee is due and \$2,000.00 if paid thereafter.
- 4.03.1** Commencing with the annual fee for the 2023 calendar year, the annual fee otherwise payable shall automatically be increased by the annual increase in the Consumer Price Index (“CPI”), as published by Statistics Canada or any successor organization, for the year ending in July of the previous calendar year, rounded up to the nearest ten dollars. By way of example and for greater clarity the CPI increase for the 2023 annual fee will be the CPI increase from July 2021 to July 2022.
- 4.04** The Registrar shall notify each member of the amount of the fee and the day on which the fee is due.

FEES RELATED TO INHALATION CERTIFICATE

- 4.1.01** A member who submits an application for an Inhalation Certificate shall pay a fee of \$100 which fee shall be submitted along with the application.
- 4.1.02** A member who is entitled to the issuance of an Inhalation Certificate shall pay a fee of \$100 which fee is due prior to the issuance of the Inhalation Certificate.
- 4.1.03** A member seeking to renew his or her Inhalation Certificate shall pay an annual fee of \$350 which fee is due on or before February 14th.

FEES RELATED TO EXAMINATIONS

- 5.01** A person who applies to attempt the College’s jurisprudence exam without applying to attempt the other examinations required for a certificate of registration shall pay a fee of \$750.00.
- 5.02** A person who applies to attempt an examination which is a requirement for a certificate of registration but is not the jurisprudence examination referred to in Article 5.01 or the supplemental examination referred to in Article 5.03, shall pay a fee of \$3,600.00.



- 5.03** Where a person fails the examination referred to in Article 5.02 and the person applies for and is eligible to take a supplemental examination, the person shall pay a fee of
- (a) \$750.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the jurisprudence portion of the written examination;
 - (b) \$750.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the core competencies portion of the written examination;
 - (c) \$1,500.00 for the written examination, if the requirement to take a supplemental examination was due to the applicant being unsuccessful on both the jurisprudence and core competencies portions of the written examination; and
 - (d) \$2,100.00 if the requirement to take a supplemental examination was due to the applicant being unsuccessful on the clinical (OSCE) examination.
- 5.04** A person who applies to have the results of an examination referred to in Article 5.02 or 5.03 rescored shall pay a fee of \$75.00.
- 5.05** A separate fee is applicable for each application referred to in Articles 5.01, 5.02, 5.03 and 5.04 and shall be paid at the time the application is submitted.

CONTINUING EDUCATION

- 5.06** Where a member who is required to submit their Continuing Education Log and supporting documentation fails to do so on or before February 14th, the member shall pay a fee of \$250.00.

PRACTICE ASSESSMENTS AND EVALUATION

- 5.1.01** Where a member is required by a panel of the Quality Assurance Committee to undergo a practice assessment, other than one which was required as a result of the member's random selection, or a practice reassessment, the member shall pay a fee of \$475.00.
- 5.1.02** The fee referred to in Article 5.1.01 shall be payable for each assessment or reassessment and shall be payable immediately upon receipt of notice from the College that an assessment or reassessment has been required by the panel of the Quality Assurance Committee.



- 5.1.03** Where a member is required by a panel of the Quality Assurance Committee to undergo an evaluation or re-evaluation, the member shall pay a fee of \$750.00.
- 5.1.04** The fee referred to in Article 5.1.03 shall be payable for each evaluation or re-evaluation and shall be payable immediately upon receipt of notice from the College that the evaluation or re-evaluation has been required by the panel of the Quality Assurance Committee.

FEE FOR ASSESSMENT

- 5.2.01** Where a person or applicant wishes Council to assess whether he or she meets the Standard of Practice to permit that person to inject a substance into the foot or prescribe a drug, the member or applicant shall pay a fee of:
- (a) \$1,250.00 if the assessment relates to whether he or she meets the standard of practice to both inject a substance into the foot and to prescribe a drug;
 - (b) \$625.00 if the assessment relates to whether he or she meets the standards of practice to either inject a substance into the foot or to prescribe a drug, *but not both*.

FEES RELATED TO REINSTATEMENT

- 6.01** A person who applies pursuant to section 72 of the Health Professions Procedural Code of the *Regulated Health Professions Act, 1991* for the reinstatement of his or her certificate of registration shall pay an application fee of \$6,000 which fee shall be payable at the time the person makes such application.
- 6.02** Where a certificate of registration was suspended for failure to pay a fee either prescribed by the Regulations or required by the by-laws and the applicant is otherwise entitled to have the suspension lifted, the applicant shall pay
- (a) a reinstatement fee of \$150.00;
 - (b) the fee(s) the applicant failed to pay which gave rise to the suspension;
 - (c) the annual fee payable for the year in which the suspension is to be lifted; and
 - (d) any other monies owed to the College.
- 6.03** A former member who is otherwise entitled to reinstatement of his or her certificate of registration shall pay
- (a) a reinstatement fee of \$100.00;



- (b) if not previously paid, the annual fee payable for any and all years in which the member practised in Ontario;
- (c) if not previously paid, the annual fee payable for the year in which the former member is to be reinstated; and
- (d) any other monies owed to the College.

REPLACEMENT CERTIFICATES

- 7.01** Where a certificate of registration was damaged, a member may request from the Registrar and the Registrar may provide a replacement certificate of registration upon return to the Registrar of the damaged certificate of registration and payment of a fee of \$50.00.
- 7.02** The Registrar may issue a replacement certificate of registration to a member who satisfies the Registrar that his or her certificate was lost or destroyed upon payment of a fee of \$50.00.

GENERAL – RULES RESPECTING PAYMENT

- 8.01** A fee or money shall be considered paid
- (a) if payment is made in cash, on the date upon which the money is actually received at the offices of the College;
 - (b) if payment is made by VISA, MasterCard or other credit card accepted by the College, on the date upon which appropriate authorization is actually received at the offices of the College;
 - (c) if payment is made by cheque, the date of the cheque or the date the cheque is actually received at the offices of the College, whichever is later, provided that the cheque is ultimately honoured on first presentation to the financial institution of the payer; and
 - (d) if payment is made by money order, on the date upon which the money order is actually received at the offices of the College.
- 8.02** Payment by any other means other than those specified in Article 8.01 is not to be considered payment under this by-law.



OTHER FEES

- 9.01** A fee of \$50.00 shall be payable by a member where
- (a) the member purports to make payment by VISA, MasterCard or other credit card accepted by the College and payment is refused by the credit card provider on first submission by the College; or
 - (b) payment is made by cheque and the cheque is not honoured on first presentation to the financial institution of the payer.
- 9.02** A fee of \$35.00 shall be payable by a member or applicant where the member or applicant makes payment by VISA, Mastercard or other credit card accepted by the College. Such fee shall apply to each credit card transaction made by a member or applicant.

Approved and amended by Council as of ~~May 12, 2023~~January 26, 2024.



BY-LAW NO. 2: FEES

1.01 In this by-law,

“certificate of registration” means a certificate of registration in any class unless otherwise indicated;

“fee” includes a required fee(s) or charge, an administrative fee(s) or an administration charge(s);

“Inhalation Certificate” is the authorization issued by the College to a member to permit the member to administer a substance to a patient by inhalation, as permitted by the *Chiroprody Act, 1991* and its regulations;

“member” includes a former member.

2.01 Fees described in this by-law are exclusive of any applicable taxes and are not refundable either in whole or in part.

3.01 A person who submits an application for a certificate of registration shall pay an application fee, which fee shall be submitted along with the application of

(a) \$200.00 where the application is based upon the applicant having completed an educational program which was approved by Council at the time the application is submitted; and

(b) \$500.00 where the application is based upon the applicant having been completed an education program which has not been approved by Council and therefore must, in accordance with Council policy, be assessed before Council considers approving the program.

3.02 A person who is entitled to the issuance of a certificate of registration shall pay a registration fee of \$100.00 and an annual fee calculated in accordance with Article 3.03, which fees are due prior to the issuance of the certificate of registration.

3.03 Subject to Article 4.03.1, the annual fee for the year in which a member is first issued a certificate of registration is

(a) \$1,800.00 if the certificate of registration is issued on or after February 14th but before July 1st; and

(b) \$900.00 if the certificate of registration is issued on or after July 1st provided the applicant had not previously been a member of the College.



- 3.04** The annual fee for a member who previously held a certificate of registration issued by the College is that fee set out in Article 4.03.
- 4.01** Every member shall pay an annual fee in accordance with this by-law.
- 4.02** Subject to article 4.03.1, the annual fee is due and payable on or before February 14th for the year commencing on January 1st of that calendar year and ending on December 31st of that calendar year.
- 4.03** Subject to article 4.03.1, the annual fee is \$1,800.00 if paid on or before February 14th in the calendar year in which the fee is due and \$2,000.00 if paid thereafter.
- 4.03.1** Commencing with the annual fee for the 2023 calendar year, the annual fee otherwise payable shall automatically be increased by the annual increase in the Consumer Price Index (“CPI”), as published by Statistics Canada or any successor organization, for the year ending in July of the previous calendar year, rounded up to the nearest ten dollars. By way of example and for greater clarity the CPI increase for the 2023 annual fee will be the CPI increase from July 2021 to July 2022.
- 4.04** The Registrar shall notify each member of the amount of the fee and the day on which the fee is due.

FEES RELATED TO INHALATION CERTIFICATE

- 4.1.01** A member who submits an application for an Inhalation Certificate shall pay a fee of \$100 which fee shall be submitted along with the application.
- 4.1.02** A member who is entitled to the issuance of an Inhalation Certificate shall pay a fee of \$100 which fee is due prior to the issuance of the Inhalation Certificate.
- 4.1.03** A member seeking to renew his or her Inhalation Certificate shall pay an annual fee of \$350 which fee is due on or before February 14th.

FEES RELATED TO EXAMINATIONS

- 5.01** A person who applies to attempt the College’s jurisprudence exam without applying to attempt the other examinations required for a certificate of registration shall pay a fee of \$750.00.
- 5.02** A person who applies to attempt an examination which is a requirement for a certificate of registration but is not the jurisprudence examination referred to in Article 5.01 or the supplemental examination referred to in Article 5.03, shall pay a fee of \$3,600.00.



- 5.03** Where a person fails the examination referred to in Article 5.02 and the person applies for and is eligible to take a supplemental examination, the person shall pay a fee of
- (a) \$750.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the jurisprudence portion of the written examination;
 - (b) \$750.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the core competencies portion of the written examination;
 - (c) \$1,500.00 for the written examination, if the requirement to take a supplemental examination was due to the applicant being unsuccessful on both the jurisprudence and core competencies portions of the written examination; and
 - (d) \$2,100.00 if the requirement to take a supplemental examination was due to the applicant being unsuccessful on the clinical (OSCE) examination.
- 5.04** A person who applies to have the results of an examination referred to in Article 5.02 or 5.03 rescored shall pay a fee of \$75.00.
- 5.05** A separate fee is applicable for each application referred to in Articles 5.01, 5.02, 5.03 and 5.04 and shall be paid at the time the application is submitted.

CONTINUING EDUCATION

- 5.06** Where a member who is required to submit their Continuing Education Log and supporting documentation fails to do so on or before February 14th, the member shall pay a fee of \$250.00.

PRACTICE ASSESSMENTS AND EVALUATION

- 5.1.01** Where a member is required by a panel of the Quality Assurance Committee to undergo a practice assessment, other than one which was required as a result of the member's random selection, or a practice reassessment, the member shall pay a fee of \$475.00.
- 5.1.02** The fee referred to in Article 5.1.01 shall be payable for each assessment or reassessment and shall be payable immediately upon receipt of notice from the College that an assessment or reassessment has been required by the panel of the Quality Assurance Committee.



- 5.1.03** Where a member is required by a panel of the Quality Assurance Committee to undergo an evaluation or re-evaluation, the member shall pay a fee of \$750.00.
- 5.1.04** The fee referred to in Article 5.1.03 shall be payable for each evaluation or re-evaluation and shall be payable immediately upon receipt of notice from the College that the evaluation or re-evaluation has been required by the panel of the Quality Assurance Committee.

FEE FOR ASSESSMENT

- 5.2.01** Where a person or applicant wishes Council to assess whether he or she meets the Standard of Practice to permit that person to inject a substance into the foot or prescribe a drug, the member or applicant shall pay a fee of:
- (a) \$1,250.00 if the assessment relates to whether he or she meets the standard of practice to both inject a substance into the foot and to prescribe a drug;
 - (b) \$625.00 if the assessment relates to whether he or she meets the standards of practice to either inject a substance into the foot or to prescribe a drug, *but not both*.

FEES RELATED TO REINSTATEMENT

- 6.01** A person who applies pursuant to section 72 of the Health Professions Procedural Code of the *Regulated Health Professions Act, 1991* for the reinstatement of his or her certificate of registration shall pay an application fee of \$6,000 which fee shall be payable at the time the person makes such application.
- 6.02** Where a certificate of registration was suspended for failure to pay a fee either prescribed by the Regulations or required by the by-laws and the applicant is otherwise entitled to have the suspension lifted, the applicant shall pay
- (a) a reinstatement fee of \$150.00;
 - (b) the fee(s) the applicant failed to pay which gave rise to the suspension;
 - (c) the annual fee payable for the year in which the suspension is to be lifted; and
 - (d) any other monies owed to the College.
- 6.03** A former member who is otherwise entitled to reinstatement of his or her certificate of registration shall pay
- (a) a reinstatement fee of \$100.00;



- (b) if not previously paid, the annual fee payable for any and all years in which the member practised in Ontario;
- (c) if not previously paid, the annual fee payable for the year in which the former member is to be reinstated; and
- (d) any other monies owed to the College.

REPLACEMENT CERTIFICATES

- 7.01** Where a certificate of registration was damaged, a member may request from the Registrar and the Registrar may provide a replacement certificate of registration upon return to the Registrar of the damaged certificate of registration and payment of a fee of \$50.00.
- 7.02** The Registrar may issue a replacement certificate of registration to a member who satisfies the Registrar that his or her certificate was lost or destroyed upon payment of a fee of \$50.00.

GENERAL – RULES RESPECTING PAYMENT

- 8.01** A fee or money shall be considered paid
- (a) if payment is made in cash, on the date upon which the money is actually received at the offices of the College;
 - (b) if payment is made by VISA, MasterCard or other credit card accepted by the College, on the date upon which appropriate authorization is actually received at the offices of the College;
 - (c) if payment is made by cheque, the date of the cheque or the date the cheque is actually received at the offices of the College, whichever is later, provided that the cheque is ultimately honoured on first presentation to the financial institution of the payer; and
 - (d) if payment is made by money order, on the date upon which the money order is actually received at the offices of the College.
- 8.02** Payment by any other means other than those specified in Article 8.01 is not to be considered payment under this by-law.



OTHER FEES

- 9.01** A fee of \$50.00 shall be payable by a member where
- (a) the member purports to make payment by VISA, MasterCard or other credit card accepted by the College and payment is refused by the credit card provider on first submission by the College; or
 - (b) payment is made by cheque and the cheque is not honoured on first presentation to the financial institution of the payer.
- 9.02** A fee of \$35.00 shall be payable by a member or applicant where the member or applicant makes payment by VISA, Mastercard or other credit card accepted by the College. Such fee shall apply to each credit card transaction made by a member or applicant.

Approved and amended by Council as of January 26, 2024.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.7.04

RE: RECOMMENDED AMENDMENTS TO BYLAW 2: FEES Penalty Fee for Non-Compliance with CE Log Submission

Feedback Received:

“I am writing to express my support for this proposed bylaw: **2. Penalty Fee for Non-Compliance with CE Log Submission.**

As past chair of QA, it was extremely frustrating to have selected members not reply to College requests for the submission of their CE hours.

I just want to ensure though, that this penalty fee does **not** apply to a member who responds and submits their CE Log on time but subsequently is deemed not to have met the required QA criteria, since the QA process is not meant to be punitive.”



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.8.01

COUNCIL BRIEFING NOTE RE: SELF-ASSESSMENT TOOL

Background:

The *Regulated Health Professions Act, 1991*, mandates that each Chiropodist/Podiatrist registered (the “Registrant”) with the College of Chiropodists of Ontario (the “College”) participate in a Quality Assurance Program that includes continuing education and self-assessment components.

Registrants are required to complete the Self-Assessment Tool during each continuing education cycle and retain it in their files. If selected as part of the random audit, a Registrant is to provide their completed Self-Assessment Tool to the College along with their Continuing Education Log.

With the transition to an annual Continuing Education cycle, the Quality Assurance Committee has revised the Self-Assessment Tool to provide a simplified and meaningful way to help Registrant’s self-identify strengths and opportunities for improvement, in an effort to help guide a Registrant’s continuous learning goals.

The Quality Assurance Committee and Executive Committee have reviewed the Self-Assessment Tool and recommend that it be approved by Council.

Public Interest Rationale for Decision:

It is in the public interest that Registrants of the College engage in Continuing Education to maintain currency in the profession. Registrants are obligated to comply with the College’s Continuing Education requirements which are intended to promote the safety of the public.

Recommended Motion:

The motion before Council is to approve the implementation of the updated Self-Assessment Tool, attached as Appendix B.

Mover: _____

Seconder: _____



Self-Assessment Tool (SAT)

Name: _____ Date: _____

Interpretation of the Rating Scale

The following statements describe professional behaviors. Rate yourself on these statements using the scale to the right.

Compared to others you know in your membership class (Chiropodists or Podiatrists), rate your performance for each statement.

Please circle the most appropriate response for each statement.

Table with 7 columns: Statement, Among the Worst, Bottom Half, Average, Top Half, Among the Best, Unable To Assess. 13 rows of statements and ratings.



The College of Chiropodists of Ontario

Form No. 02

	Among the Worst	Bottom Half	Average	Top Half	Among the Best	Unable To Assess
14. Within the range of services provided by me, I perform technical procedures skillfully.	1	2	3	4	5	UA
15. I take appropriate action at all times to minimize the risk of cross infection.	1	2	3	4	5	UA
16. I maintain quality medical records.	1	2	3	4	5	UA
17. I document information accurately in the medical records.	1	2	3	4	5	UA
18. I document information in the medical records in a timely manner.	1	2	3	4	5	UA
19. I refer patients when necessary.	1	2	3	4	5	UA
20. I maintain appropriate ethical professional boundaries with patients.	1	2	3	4	5	UA
21. I show compassion for patients.	1	2	3	4	5	UA
22. I maintain the confidentiality of patients.	1	2	3	4	5	UA
23. I respect the rights of patients.	1	2	3	4	5	UA
24. I collaborate with medical colleagues on difficult cases.	1	2	3	4	5	UA
25. I am involved with professional development.	1	2	3	4	5	UA
26. I review research literature and assess what it means for my practice.	1	2	3	4	5	UA
27. I evaluate the effectiveness of continuing educational programs I attend.	1	2	3	4	5	UA
28. I recommend changes to improve the effectiveness of continuing educational programs I attend.	1	2	3	4	5	UA
29. I help with student learning.	1	2	3	4	5	UA
30. I am recognized by my peers for having developed an area of expertise.	1	2	3	4	5	UA
31. I accept responsibility for my professional action.	1	2	3	4	5	UA
32. I manage personal stress.	1	2	3	4	5	UA
33. I know the limits of my knowledge.	1	2	3	4	5	UA
34. I implement an education plan to manage my shortcomings.	1	2	3	4	5	UA
35. I am an active member of a professional interest group.	1	2	3	4	5	UA

Note: Please keep the SAT form in your file. Do not return it to the College.



Self-Assessment Tool (SAT)

Name: _____

Date: _____

Rate your performance for each statement:

	Needs Improvement	Average	Proficient
1. I communicate effectively with patients and healthcare professionals.			
2. I have the knowledge and skills to assess the needs of my patients.			
3. I select the appropriate treatment based on the assessment of findings for each case.			
4. I follow up with patients to ensure the appropriate treatment is being provided.			
5. I perform technical procedures skillfully and always demonstrate appropriate judgement.			
6. I always take appropriate action to minimize risk of infection.			
7. I maintain accurate medical records and document in a timely manner.			
8. I maintain appropriate ethical professional boundaries and am compassionate with patients.			
9. I respect the rights and maintain confidentiality of patients.			
10. I collaborate with medical colleagues and refer patients when necessary.			

Note: Please keep your completed Self-Assessment Tool in your files.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.9.01

COUNCIL BRIEFING NOTE RE: RECOMMENDED AMENDMENTS TO BYLAW 2: FEES Application Fee for Non-Approved Programs

Background:

Individuals applying to the College from a non-approved program are required to pay a fee to have their program assessed. The College retains an expert to conduct an equivalency assessment by comparing the non-approved program to the Chiropody program at the Michener at UHN. The expert prepares a written report and presents the report to Council. Over time, the expert fee to conduct program equivalency evaluations has increased, but the applicant fee has not. As a result, the College has been offsetting the cost of the program equivalency evaluations.

Council is being asked to approve the following revisions to Bylaw 2:

- (1) increase the fee for equivalency assessment of non-approved programs from \$500 to \$750; and
- (2) correct a typographical error to align the wording with the previous subsection.

Public Interest Rationale for Decision:

It is in the public interest that the College remains financially stable and has the proper funding and resources to fulfill its mandate of protection of the public. One of the ways the College maintains financial stability is by increasing fees to align with inflation, and by ensuring that the fees being charged to external parties are sufficient to cover the actual cost to the College.

Consultation Feedback:

After Council approved the amendment to Bylaw 2, in principle at its September 2023 meeting, the proposed change was circulated to registrants and other stakeholders for 60 days. The College received feedback that was in support of the proposed amendment. The feedback is attached as Appendix C.

Recommended Motion:

That Council approve the amendments to By-law 2, attached as Appendix A, as follows:

3.01 A person who submits an application for a certificate of registration shall pay an application fee, which fee shall be submitted along with the application of

- (a) \$200.00 where the application is based upon the applicant having completed an educational program which was approved by Council at the time the application is submitted; and
- (b) ~~\$500.00~~750.00 where the application is based upon the applicant having ~~been~~ completed an education program which has not been approved by Council and therefore must, in accordance with Council policy, be assessed before Council considers approving the program.

Mover: _____

Secunder: _____



BY-LAW NO. 2: FEES

1.01 In this by-law,

“**certificate of registration**” means a certificate of registration in any class unless otherwise indicated;

“**fee**” includes a required fee(s) or charge, an administrative fee(s) or an administration charge(s);

“**Inhalation Certificate**” is the authorization issued by the College to a member to permit the member to administer a substance to a patient by inhalation, as permitted by the *Chiropody Act, 1991* and its regulations;

“**member**” includes a former member.

2.01 Fees described in this by-law are exclusive of any applicable taxes and are not refundable either in whole or in part.

3.01 A person who submits an application for a certificate of registration shall pay an application fee, which fee shall be submitted along with the application of

(a) \$200.00 where the application is based upon the applicant having completed an educational program which was approved by Council at the time the application is submitted; and

(b) ~~\$500.00~~ ~~\$750.00~~ where the application is based upon the applicant having ~~been~~ completed an education program which has not been approved by Council and therefore must, in accordance with Council policy, be assessed before Council considers approving the program.

3.02 A person who is entitled to the issuance of a certificate of registration shall pay a registration fee of \$100.00 and an annual fee calculated in accordance with Article 3.03, which fees are due prior to the issuance of the certificate of registration.

3.03 Subject to Article 4.03.1, the annual fee for the year in which a member is first issued a certificate of registration is

(a) \$1,800.00 if the certificate of registration is issued on or after February 14th but before July 1st; and

(b) \$900.00 if the certificate of registration is issued on or after July 1st provided the applicant had not previously been a member of the College.



- 3.04** The annual fee for a member who previously held a certificate of registration issued by the College is that fee set out in Article 4.03.
- 4.01** Every member shall pay an annual fee in accordance with this by-law.
- 4.02** Subject to article 4.03.1, the annual fee is due and payable on or before February 14th for the year commencing on January 1st of that calendar year and ending on December 31st of that calendar year.
- 4.03** Subject to article 4.03.1, the annual fee is \$1,800.00 if paid on or before February 14th in the calendar year in which the fee is due and \$2,000.00 if paid thereafter.
- 4.03.1** Commencing with the annual fee for the 2023 calendar year, the annual fee otherwise payable shall automatically be increased by the annual increase in the Consumer Price Index (“CPI”), as published by Statistics Canada or any successor organization, for the year ending in July of the previous calendar year, rounded up to the nearest ten dollars. By way of example and for greater clarity the CPI increase for the 2023 annual fee will be the CPI increase from July 2021 to July 2022.
- 4.04** The Registrar shall notify each member of the amount of the fee and the day on which the fee is due.

FEES RELATED TO INHALATION CERTIFICATE

- 4.1.01** A member who submits an application for an Inhalation Certificate shall pay a fee of \$100 which fee shall be submitted along with the application.
- 4.1.02** A member who is entitled to the issuance of an Inhalation Certificate shall pay a fee of \$100 which fee is due prior to the issuance of the Inhalation Certificate.
- 4.1.03** A member seeking to renew his or her Inhalation Certificate shall pay an annual fee of \$350 which fee is due on or before February 14th.

FEES RELATED TO EXAMINATIONS

- 5.01** A person who applies to attempt the College’s jurisprudence exam without applying to attempt the other examinations required for a certificate of registration shall pay a fee of \$750.00.
- 5.02** A person who applies to attempt an examination which is a requirement for a certificate of registration but is not the jurisprudence examination referred to in Article 5.01 or the supplemental examination referred to in Article 5.03, shall pay a fee of \$3,600.00.



- 5.03** Where a person fails the examination referred to in Article 5.02 and the person applies for and is eligible to take a supplemental examination, the person shall pay a fee of
- (a) \$750.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the jurisprudence portion of the written examination;
 - (b) \$750.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the core competencies portion of the written examination;
 - (c) \$1,500.00 for the written examination, if the requirement to take a supplemental examination was due to the applicant being unsuccessful on both the jurisprudence and core competencies portions of the written examination; and
 - (d) \$2,100.00 if the requirement to take a supplemental examination was due to the applicant being unsuccessful on the clinical (OSCE) examination.
- 5.04** A person who applies to have the results of an examination referred to in Article 5.02 or 5.03 rescored shall pay a fee of \$75.00.
- 5.05** A separate fee is applicable for each application referred to in Articles 5.01, 5.02, 5.03 and 5.04 and shall be paid at the time the application is submitted.

PRACTICE ASSESSMENTS AND EVALUATION

- 5.1.01** Where a member is required by a panel of the Quality Assurance Committee to undergo a practice assessment, other than one which was required as a result of the member's random selection, or a practice reassessment, the member shall pay a fee of \$475.00.
- 5.1.02** The fee referred to in Article 5.1.01 shall be payable for each assessment or reassessment and shall be payable immediately upon receipt of notice from the College that an assessment or reassessment has been required by the panel of the Quality Assurance Committee.
- 5.1.03** Where a member is required by a panel of the Quality Assurance Committee to undergo an evaluation or re-evaluation, the member shall pay a fee of \$750.00.
- 5.1.04** The fee referred to in Article 5.1.03 shall be payable for each evaluation or re-evaluation and shall be payable immediately upon receipt of notice from the College that the evaluation or re-evaluation has been required by the panel of the Quality Assurance Committee.



FEE FOR ASSESSMENT

- 5.2.01** Where a person or applicant wishes Council to assess whether he or she meets the Standard of Practice to permit that person to inject a substance into the foot or prescribe a drug, the member or applicant shall pay a fee of:
- (a) \$1,250.00 if the assessment relates to whether he or she meets the standard of practice to both inject a substance into the foot and to prescribe a drug;
 - (b) \$625.00 if the assessment relates to whether he or she meets the standards of practice to either inject a substance into the foot or to prescribe a drug, *but not both*.

FEES RELATED TO REINSTATEMENT

- 6.01** A person who applies pursuant to section 72 of the Health Professions Procedural Code of the *Regulated Health Professions Act, 1991* for the reinstatement of his or her certificate of registration shall pay an application fee of \$6,000 which fee shall be payable at the time the person makes such application.
- 6.02** Where a certificate of registration was suspended for failure to pay a fee either prescribed by the Regulations or required by the by-laws and the applicant is otherwise entitled to have the suspension lifted, the applicant shall pay
- (a) a reinstatement fee of \$150.00;
 - (b) the fee(s) the applicant failed to pay which gave rise to the suspension;
 - (c) the annual fee payable for the year in which the suspension is to be lifted; and
 - (d) any other monies owed to the College.
- 6.03** A former member who is otherwise entitled to reinstatement of his or her certificate of registration shall pay
- (a) a reinstatement fee of \$100.00;
 - (b) if not previously paid, the annual fee payable for any and all years in which the member practised in Ontario;
 - (c) if not previously paid, the annual fee payable for the year in which the former member is to be reinstated; and
 - (d) any other monies owed to the College.



REPLACEMENT CERTIFICATES

- 7.01** Where a certificate of registration was damaged, a member may request from the Registrar and the Registrar may provide a replacement certificate of registration upon return to the Registrar of the damaged certificate of registration and payment of a fee of \$50.00.
- 7.02** The Registrar may issue a replacement certificate of registration to a member who satisfies the Registrar that his or her certificate was lost or destroyed upon payment of a fee of \$50.00.

GENERAL – RULES RESPECTING PAYMENT

- 8.01** A fee or money shall be considered paid
- (a) if payment is made in cash, on the date upon which the money is actually received at the offices of the College;
 - (b) if payment is made by VISA, MasterCard or other credit card accepted by the College, on the date upon which appropriate authorization is actually received at the offices of the College;
 - (c) if payment is made by cheque, the date of the cheque or the date the cheque is actually received at the offices of the College, whichever is later, provided that the cheque is ultimately honoured on first presentation to the financial institution of the payer; and
 - (d) if payment is made by money order, on the date upon which the money order is actually received at the offices of the College.
- 8.02** Payment by any other means other than those specified in Article 8.01 is not to be considered payment under this by-law.

OTHER FEES

- 9.01** A fee of \$50.00 shall be payable by a member where
- (a) the member purports to make payment by VISA, MasterCard or other credit card accepted by the College and payment is refused by the credit card provider on first submission by the College; or
 - (b) payment is made by cheque and the cheque is not honoured on first presentation to the financial institution of the payer.



- 9.02** A fee of \$35.00 shall be payable by a member or applicant where the member or applicant makes payment by VISA, Mastercard or other credit card accepted by the College. Such fee shall apply to each credit card transaction made by a member or applicant.

Approved and amended by Council as of ~~May 12, 2023~~ January 26, 2024.



BY-LAW NO. 2: FEES

1.01 In this by-law,

“certificate of registration” means a certificate of registration in any class unless otherwise indicated;

“fee” includes a required fee(s) or charge, an administrative fee(s) or an administration charge(s);

“Inhalation Certificate” is the authorization issued by the College to a member to permit the member to administer a substance to a patient by inhalation, as permitted by the *Chiroprody Act, 1991* and its regulations;

“member” includes a former member.

2.01 Fees described in this by-law are exclusive of any applicable taxes and are not refundable either in whole or in part.

3.01 A person who submits an application for a certificate of registration shall pay an application fee, which fee shall be submitted along with the application of

(a) \$200.00 where the application is based upon the applicant having completed an educational program which was approved by Council at the time the application is submitted; and

(b) \$750.00 where the application is based upon the applicant having completed an education program which has not been approved by Council and therefore must, in accordance with Council policy, be assessed before Council considers approving the program.

3.02 A person who is entitled to the issuance of a certificate of registration shall pay a registration fee of \$100.00 and an annual fee calculated in accordance with Article 3.03, which fees are due prior to the issuance of the certificate of registration.

3.03 Subject to Article 4.03.1, the annual fee for the year in which a member is first issued a certificate of registration is

(a) \$1,800.00 if the certificate of registration is issued on or after February 14th but before July 1st; and

(b) \$900.00 if the certificate of registration is issued on or after July 1st provided the applicant had not previously been a member of the College.



- 3.04** The annual fee for a member who previously held a certificate of registration issued by the College is that fee set out in Article 4.03.
- 4.01** Every member shall pay an annual fee in accordance with this by-law.
- 4.02** Subject to article 4.03.1, the annual fee is due and payable on or before February 14th for the year commencing on January 1st of that calendar year and ending on December 31st of that calendar year.
- 4.03** Subject to article 4.03.1, the annual fee is \$1,800.00 if paid on or before February 14th in the calendar year in which the fee is due and \$2,000.00 if paid thereafter.
- 4.03.1** Commencing with the annual fee for the 2023 calendar year, the annual fee otherwise payable shall automatically be increased by the annual increase in the Consumer Price Index (“CPI”), as published by Statistics Canada or any successor organization, for the year ending in July of the previous calendar year, rounded up to the nearest ten dollars. By way of example and for greater clarity the CPI increase for the 2023 annual fee will be the CPI increase from July 2021 to July 2022.
- 4.04** The Registrar shall notify each member of the amount of the fee and the day on which the fee is due.

FEES RELATED TO INHALATION CERTIFICATE

- 4.1.01** A member who submits an application for an Inhalation Certificate shall pay a fee of \$100 which fee shall be submitted along with the application.
- 4.1.02** A member who is entitled to the issuance of an Inhalation Certificate shall pay a fee of \$100 which fee is due prior to the issuance of the Inhalation Certificate.
- 4.1.03** A member seeking to renew his or her Inhalation Certificate shall pay an annual fee of \$350 which fee is due on or before February 14th.

FEES RELATED TO EXAMINATIONS

- 5.01** A person who applies to attempt the College’s jurisprudence exam without applying to attempt the other examinations required for a certificate of registration shall pay a fee of \$750.00.
- 5.02** A person who applies to attempt an examination which is a requirement for a certificate of registration but is not the jurisprudence examination referred to in Article 5.01 or the supplemental examination referred to in Article 5.03, shall pay a fee of \$3,600.00.



- 5.03** Where a person fails the examination referred to in Article 5.02 and the person applies for and is eligible to take a supplemental examination, the person shall pay a fee of
- (a) \$750.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the jurisprudence portion of the written examination;
 - (b) \$750.00 for the written examination, if the requirement to take a supplemental examination was due solely to the applicant being unsuccessful on the core competencies portion of the written examination;
 - (c) \$1,500.00 for the written examination, if the requirement to take a supplemental examination was due to the applicant being unsuccessful on both the jurisprudence and core competencies portions of the written examination; and
 - (d) \$2,100.00 if the requirement to take a supplemental examination was due to the applicant being unsuccessful on the clinical (OSCE) examination.
- 5.04** A person who applies to have the results of an examination referred to in Article 5.02 or 5.03 rescored shall pay a fee of \$75.00.
- 5.05** A separate fee is applicable for each application referred to in Articles 5.01, 5.02, 5.03 and 5.04 and shall be paid at the time the application is submitted.

PRACTICE ASSESSMENTS AND EVALUATION

- 5.1.01** Where a member is required by a panel of the Quality Assurance Committee to undergo a practice assessment, other than one which was required as a result of the member's random selection, or a practice reassessment, the member shall pay a fee of \$475.00.
- 5.1.02** The fee referred to in Article 5.1.01 shall be payable for each assessment or reassessment and shall be payable immediately upon receipt of notice from the College that an assessment or reassessment has been required by the panel of the Quality Assurance Committee.
- 5.1.03** Where a member is required by a panel of the Quality Assurance Committee to undergo an evaluation or re-evaluation, the member shall pay a fee of \$750.00.
- 5.1.04** The fee referred to in Article 5.1.03 shall be payable for each evaluation or re-evaluation and shall be payable immediately upon receipt of notice from the College that the evaluation or re-evaluation has been required by the panel of the Quality Assurance Committee.



FEE FOR ASSESSMENT

- 5.2.01** Where a person or applicant wishes Council to assess whether he or she meets the Standard of Practice to permit that person to inject a substance into the foot or prescribe a drug, the member or applicant shall pay a fee of:
- (a) \$1,250.00 if the assessment relates to whether he or she meets the standard of practice to both inject a substance into the foot and to prescribe a drug;
 - (b) \$625.00 if the assessment relates to whether he or she meets the standards of practice to either inject a substance into the foot or to prescribe a drug, *but not both*.

FEES RELATED TO REINSTATEMENT

- 6.01** A person who applies pursuant to section 72 of the Health Professions Procedural Code of the *Regulated Health Professions Act, 1991* for the reinstatement of his or her certificate of registration shall pay an application fee of \$6,000 which fee shall be payable at the time the person makes such application.
- 6.02** Where a certificate of registration was suspended for failure to pay a fee either prescribed by the Regulations or required by the by-laws and the applicant is otherwise entitled to have the suspension lifted, the applicant shall pay
- (a) a reinstatement fee of \$150.00;
 - (b) the fee(s) the applicant failed to pay which gave rise to the suspension;
 - (c) the annual fee payable for the year in which the suspension is to be lifted; and
 - (d) any other monies owed to the College.
- 6.03** A former member who is otherwise entitled to reinstatement of his or her certificate of registration shall pay
- (a) a reinstatement fee of \$100.00;
 - (b) if not previously paid, the annual fee payable for any and all years in which the member practised in Ontario;
 - (c) if not previously paid, the annual fee payable for the year in which the former member is to be reinstated; and
 - (d) any other monies owed to the College.



REPLACEMENT CERTIFICATES

- 7.01** Where a certificate of registration was damaged, a member may request from the Registrar and the Registrar may provide a replacement certificate of registration upon return to the Registrar of the damaged certificate of registration and payment of a fee of \$50.00.
- 7.02** The Registrar may issue a replacement certificate of registration to a member who satisfies the Registrar that his or her certificate was lost or destroyed upon payment of a fee of \$50.00.

GENERAL – RULES RESPECTING PAYMENT

- 8.01** A fee or money shall be considered paid
- (a) if payment is made in cash, on the date upon which the money is actually received at the offices of the College;
 - (b) if payment is made by VISA, MasterCard or other credit card accepted by the College, on the date upon which appropriate authorization is actually received at the offices of the College;
 - (c) if payment is made by cheque, the date of the cheque or the date the cheque is actually received at the offices of the College, whichever is later, provided that the cheque is ultimately honoured on first presentation to the financial institution of the payer; and
 - (d) if payment is made by money order, on the date upon which the money order is actually received at the offices of the College.
- 8.02** Payment by any other means other than those specified in Article 8.01 is not to be considered payment under this by-law.

OTHER FEES

- 9.01** A fee of \$50.00 shall be payable by a member where
- (a) the member purports to make payment by VISA, MasterCard or other credit card accepted by the College and payment is refused by the credit card provider on first submission by the College; or
 - (b) payment is made by cheque and the cheque is not honoured on first presentation to the financial institution of the payer.



- 9.02** A fee of \$35.00 shall be payable by a member or applicant where the member or applicant makes payment by VISA, Mastercard or other credit card accepted by the College. Such fee shall apply to each credit card transaction made by a member or applicant.

Approved and amended by Council as of January 26, 2024.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

Item 3.09.04

RE: RECOMMENDED AMENDMENTS TO BYLAW 2: FEES Application Fee for Non-Approved Programs

Feedback Received:

“I am writing to indicate our support for the proposed amendment to subsection 3.01 of the College By-Laws whereby the fee for applicants from non-approved education programs would be increased from \$500 to \$750. The amount strikes us as being completely reasonable; the costs of the assessment of nonapproved programs should not be borne by existing members; and the increase is justifiable in terms of the prudent financial management of the College. We trust that the Ministry of Health understands and supports this increase and does not perceive it to be, in any way, an obstacle imposed on the registration of foreign-trained applicants”.



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.10.01

COUNCIL BRIEFING NOTE RE: PRACTICE ASSESSMENT TOOL

Background:

The *Regulated Health Professions Act, 1991*, mandates that each Chiropodist/Podiatrist registered (the “Registrant”) with the College of Chiropodists of Ontario (the “College”) participate in a Quality Assurance Program that includes a practice assessment component.

Throughout 2023, the Quality Assurance Committee worked towards updating the checklist tools that are used in the practice assessment process. With input from Assessors, the Quality Assurance Committee sought to update language in the assessment tools where necessary and avoid duplication.

The Quality Assurance Committee and Executive Committee have reviewed the Practice Assessment Tool and recommend that it be approved by Council.

Public Interest Rationale for Decision:

It is in the public interest that Registrants of the College engage in the Quality Assurance program. In addition, it is part of the College’s mandate to ensure that the components of the Quality Assurance program are updated to remain relevant to effectively provide the opportunity to enhance a Registrant’s knowledge and encourage excellence in the delivery of care to the public.

Recommended Motion:

The motion before Council is to approve the Practice Assessment tool for implementation, attached as Appendix B.

Mover: _____

Seconder: _____

Practice Assessment Tool

Member Name: _____

Practice Name and Address: _____

Assessor Name: _____

Assessment Date: _____

A. Administration - Patient Records

	YES	NO	N/A
A1. Is a patient scheduling system maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A2. Are patient records kept in a secure space at the site of practice?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A3. Are records kept at an alternative site away from the Member's practice?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A4. If YES, where are they kept?			
A5. Are patient records organized for easy retrieval?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A6. How long are patient records maintained?			
A7. How are patient records destroyed?			

Overall Summary for Patient Records

COLLEGE OF CHIROPODISTS OF ONTARIO
QUALITY ASSURANCE COMMITTEE
PRACTICE ASSESSMENT PROGRAM

B. Administration - Office

	YES	NO	N/A
B1. Is an office manual maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B2. Does it include equipment safety and service logs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B3. Does it include official clinic policies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B4. Does it include clinical procedures and practices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B5. Does it include a Sharps Policy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B6. Does it include a procedure to dispose of expired hazardous chemicals or medications?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B7. Are WHMIS labels or documentation maintained and available? Such as for any material transferred from a large bottle into a smaller bottle.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B8. Are MSDS documentation maintained and readily available for cleaning /disinfecting products and materials found in large quantities? Such as 4L alcohol jugs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B9. Are College regulations and documents maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B10. Are hazardous materials or prescription items securely stored?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B11. Are hazardous materials maintained and labeled according to WHMIS?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B12. Are flammable materials stored in an approved storage cabinet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B13. Are expiration dates current?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall Summary for Office Administration

C. Administration - Related to Member

	YES	NO	N/A
C1. Is there proof of valid/current CPR Registration/Certification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C2. Is College Certificate of Registration displayed visibly to patients?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C3. Does signage clearly present Member's name and title?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C4. Do prescription pads clearly and accurately present Member's name, address, telephone, title?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C5. Are prescription pads kept secure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C6. Does billing clearly present Member's name, address, title, fee?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C7. Does letterhead clearly present Member's name, address, title?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C8. Are fee schedules clearly presented or available on request?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall Summary for Administration - Related to Member

D. Clinical Areas - Reprocessing

	YES	NO	N/A
D1. Is there one-way workflow (dirty to clean) to prevent cross-contamination?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D2. Is a surface disinfectant available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D3. Is there a sink or hand washing station?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D4. Is alcohol-based hand rub (ABHR) or liquid soap and water (for use if hands are visibly soiled) available and accessible at each point of care?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D5. Is there an ultrasonic cleaner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D6. Is steam sterilization available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D7. Is there a system to verify sterilization?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COLLEGE OF CHIROPODISTS OF ONTARIO
QUALITY ASSURANCE COMMITTEE
PRACTICE ASSESSMENT PROGRAM

	YES	NO	N/A
D8. If not built into the pouch/package, are Chemical Indicators (CIs) placed in (internal – minimum Type 4) and on (external – Type 1) each package?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D9. Are sterilizer mechanical displays, print outs or USBs checked, verified and signed for each cycle by the person sterilizing the medical equipment/devices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D10. If the sterilizer does not have a printer, are Type 5 CIs placed in each package and are times and temperatures recorded at intervals during each cycle?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D11. Sterilized medical equipment/devices are not used until the CIs are checked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D12. If a failed CI is found, are the contents of the package reprocessed again, before use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D13. Are sterilizers tested with a Biological Indicator (BI) in a process challenge device (PCD) each day the sterilizer is used and with each type of cycle used that day?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D14. Is a Biological Indicator (BI) in a PCD included in every load containing implantable devices and these devices not released until the result of the BI is available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D15. Are sterilized instruments kept in a non-contaminated area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D16. Are clean instruments kept secure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D17. Are soiled instruments kept secure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Sterilization test logs/verification:</u>			
D18. Are contaminated medical equipment/devices kept separate from clean medical equipment/devices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D19. Are packaged, sterilized critical medical equipment/devices stored securely in a manner that keeps them clean, dry and prevents contamination (e.g., not under a sink, kept away from potential splashing)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D20. Load control label (sterilizer number, load number and date of sterilization)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D21. Chart/printout of physical parameters of the sterilization cycle?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D22. Load contents?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D23. Person responsible for the sterilization cycle?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COLLEGE OF CHIROPODISTS OF ONTARIO
QUALITY ASSURANCE COMMITTEE
PRACTICE ASSESSMENT PROGRAM

	YES	NO	N/A
D24. Chemical Indicator (CI) monitoring results?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D25. Biological Indicator (BI) monitoring results?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall Summary for Clinical Areas - Reprocessing

E. Clinical Areas - Patient Treatment Room(s)

	YES	NO	N/A
E1. Is there a clean treatment area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E2. Is treatment area safe, private and confidential?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E3. Is there adequate light source?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E4. Is there an exam chair (plinth, gurney, table)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E5. Are facilities clean?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall Summary for Clinical Areas - Patient Treatment Room(s)

COLLEGE OF CHIROPODISTS OF ONTARIO
QUALITY ASSURANCE COMMITTEE
PRACTICE ASSESSMENT PROGRAM

F. Clinical Areas - Treatment Area/Cleaning Procedures

	YES	NO	N/A
F1. Is there a procedure for daily routine cleaning of facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F2. Is there a procedure for daily routine cleaning of treatment area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F3. Are surfaces/items (e.g. exam/procedure table/chair) that come into direct contact with the patient, their blood and/or body fluids cleaned and disinfected between patients?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F4. Are sharps stored away from patient harm?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F5. Is there a procedure for disposal of sharps?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F6. Are biohazardous materials appropriately stored?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F7. Is there a procedure for disposal of biohazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F8. Is waste disposed of in accordance with provincial regulations and local bylaws, with attention to sharps and biomedical waste?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F9. Do the facilities comply with the Healing Arts Radiation Protection Act?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall Summary for Clinical Areas - Treatment Area/Cleaning Procedures

G. Clinical Areas - Personal Protective Equipment

	YES	NO	N/A
G1. Are non-sterile exam gloves available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G2. Are sterile procedural gloves available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G3. Are treatment gowns/coats available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G4. Are sterile surgical gowns available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G5. Are clean towels available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G6. Are sterile towels available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G7. Are eye shields available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G8. Are face masks available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall Summary for Clinical Areas - Personal Protective Equipment

H. Emergency Procedures

	YES	NO	N/A
H1. Is accessible oxygen available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H2. Is accessible injectable adrenaline available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H3. Is an eye wash station available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H4. Is staff trained in emergency procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H5. Is an emergency policy and manual maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H6. Is a univalve mask available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall Summary for Emergency Procedures

I. Orthotic Manufacture

	YES	NO	N/A
I1. Is orthotic manufacture area separate from treatment area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I2. Is there proper and separate ventilation of manufacture area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I3. Is a fume hood type device available as per specifications?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I4. Are specified quality respirators in use at manufacture area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I5. Is specified quality eye protection in use at manufacture area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I6. Is separate protective clothing in use at manufacture area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I7. Are specified quality rubber gloves in use at manufacture area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I8. Is a fire extinguisher available in the building?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall Summary for Orthotic Manufacture

THE COLLEGE OF CHIROPODISTS OF ONTARIO

Practice Assessment Tool

1.0 Administration - Patient Records

		Yes	No	N/A
1.1	Is a patient scheduling system maintained?			
1.2	Are patient records organized and kept in a secure space at the site of practice?			
1.3	If NO, where are they kept?			
1.4	Are patient records retained according to College Standards? (LINK)			
1.5	Are patients' records destroyed appropriately?			
1.6	If using EMR, is appropriate security/password protection in place?			

ADDITIONAL COMMENTS/INFORMATION:

2.0 Administration - Office

		Yes	No	N/A
2.1	Does the office manual include:			
a	Clinical policies and procedures according to College Standards?			
b	Equipment safety and service logs?			
c	Sharps policy and safe handling?			
d	A procedure to dispose of expired biohazardous chemicals or medications?			
2.2	Are WHIMIS labels for hazardous materials maintained?			
2.3	Is MSDS documentation maintained?			
2.4	Are hazardous materials or prescription items securely stored when not in use?			
2.5	Are expiration dates current?			

ADDITIONAL COMMENTS/INFORMATION:

THE COLLEGE OF CHIROPODISTS OF ONTARIO

Practice Assessment Tool

3.0 Administration - Member Documents/Forms

		Yes	No	N/A
3.1	Does signage and office stationery clearly present member’s name, credentials, and designation?			
3.2	Do prescription pads accurately present member’s name, address, telephone, credentials, and designation?			
3.3	Are prescription pads kept outside of patient treatment area?			
3.4	Are fee schedules clearly presented or available on request?			

ADDITIONAL COMMENTS/INFORMATION:

4.0 Clinical Areas - Reprocessing

		Yes	No	N/A
4.1	In the reprocessing area, is there a dirty-to-clean workflow?			
4.2	Is a surface disinfectant available?			
4.3	Is there a sink in/near the reprocessing area?			
4.4	Is steam sterilization available?			
a	If NOT, how are instruments sterilized?			
4.5	Is there a system to verify sterilization?			
4.6	If not built into package/pouch, are Chemical Indicators (CIs) placed in and on each package			
4.7	Are sterilizer displays, print outs or USBs checked and signed for by person processing the load?			
4.8	Are the CIs checked prior to using the contents of the sterilized package?			
4.9	If a failed CI is noted, is the package reprocessed?			
4.10	Are sterilizers tested with Biological Indicators (BIs) in a process challenge device (PCD) each day the sterilizer is used?			
4.11	Are sterilized packages stored in a clean, dry area?			
4.12	Does the sterilization log include:			
a	load control label (sterilizer number, load number, date)?			
b	parameters of the sterilization cycle?			
c	load contents?			

THE COLLEGE OF CHIROPODISTS OF ONTARIO

Practice Assessment Tool

d	person responsible for the sterilization cycle?			
e	CI and BI monitoring results?			

ADDITIONAL COMMENTS/INFORMATION:

5.0 Clinical Areas - Treatment Rooms

		Yes	No	N/A
5.1	Is the office and treatment area clean, safe, and private?			
5.2	Is there an exam chair/table with adequate lighting?			
5.3	Is hand sanitizer or sink accessible near the treatment areas?			
5.4	If surgical procedures done onsite, is the suite/room cleaned and disinfected prior to each procedure?			
5.5	If surgical procedures done onsite, is proper sterile technique used when gowning and gloving and while performing the procedure(s)?			
5.6	If surgical procedures done onsite, is hair cover and mask worn while performing the procedure(s)?			

ADDITIONAL COMMENTS/INFORMATION:

6.0 Clinical Areas - Treatment/Facility Cleaning Procedures

		Yes	No	N/A
6.1	Is there a procedure for daily cleaning of treatment areas and facility?			
6.2	Are surfaces/items that come into direct contact with the patient disinfected between patients?			
6.3	Are sharps stored away from patient reach?			
6.4	Is waste disposed of in accordance with provincial regulations and local bylaws?			
6.5	If the member has X-Ray facilities onsite, do the facilities comply with HARP?			

HARP (Healing Arts Radiation Protection Act) "A member of the College of Chiropractors of Ontario who has been continuously registered as a chiropractor under the Chiropractic Act and the Chiropractic Act, 1992 since before November 1, 1980 or who is a graduate of a four-year course of instruction in chiropractic."

ADDITIONAL COMMENTS/INFORMATION:

THE COLLEGE OF CHIROPODISTS OF ONTARIO

Practice Assessment Tool

7.0 Clinical Areas - Personal Protective Equipment

		Yes	No	N/A
7.1	Are the following items available in the office:			
a	sterile and non-sterile gloves?			
b	sterile and non-sterile gowns?			
c	towels?			
d	eye protection?			
e	face masks/shields?			

ADDITIONAL COMMENTS/INFORMATION:

8.0 Emergency Preparedness

		Yes	No	N/A
8.1	Is oxygen available?			
8.2	Are the emergency medications available in accordance with the Emergency Standard?			
8.3	Is an eye wash station available?			
8.4	Is a univalve mask available?			
8.5	Is a fire extinguisher available?			
8.6	Is an emergency manual maintained?			
8.7	Are staff members trained in emergency procedures?			

ADDITIONAL COMMENTS/INFORMATION:

THE COLLEGE OF CHIROPODISTS OF ONTARIO

Practice Assessment Tool

9.0 Chart Review - Organization & Content

		Yes	No	N/A
9.1	Are the charts presented in a logical format?			
9.2	Are charts legibly written in ink/computerized, corrected appropriately, and signed?			
9.3	Does the chart include:			
a	the patient's name, address, and date of visit?			
b	the patient's health card number (podiatry members)?			
c	consent forms?			
d	patient history?			
e	medications & allergies?			
9.4	Do the Objective findings include:			
a	information regarding pertinent systems (dermatological, vascular, neurological, musculoskeletal)?			
b	information regarding diagnosis/assessment?			
c	reports from other health care professionals or services?			
9.5	Does the Plan include:			
a	detailed information about controlled acts or procedures performed?			
b	documented prescriptions with dosage and duration?			
c	appropriate treatment for the primary complaint?			
d	periodic re-assessment of patient?			

ADDITIONAL COMMENTS/INFORMATION:



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.11

COUNCIL BRIEFING NOTE RE: SURGICAL SUITE ASSESSMENT TOOL

The *Regulated Health Professions Act, 1991*, mandates that each Chiropodist/Podiatrist registered (the “Registrant”) with the College of Chiropodists of Ontario (the “College”) participate in a Quality Assurance Program that includes a practice assessment component.

The Quality Assurance Committee has developed a tool to be used in the practice assessment program for Registrants who are conducting surgical procedures in their practice. The Quality Assurance Committee sought to develop the tool with a goal of providing additional and quality feedback to Registrants who perform these procedures in their practice. As a new tool to the practice assessment program, it is the Quality Assurance Committee’s intent that the surgical suite assessment tool will continue to be improved upon after its implementation and feedback on its use is received.

The Quality Assurance Committee and Executive Committee have reviewed the Surgical Suite Assessment Tool and recommend that it be approved by Council.

Public Interest Rationale for Decision:

It is in the public interest that Registrants of the College engage in the Quality Assurance program. In addition, it is part of the College’s mandate to ensure that the components of the Quality Assurance program are updated to remain relevant to the profession to effectively provide the opportunity to enhance a Registrant’s knowledge and encourage excellence in the delivery of care to the public.

Recommended Motion:

The motion before Council is to approve the Surgical Suite Assessment tool for implementation, attached as Appendix A.

Mover: _____

Seconder: _____

THE COLLEGE OF CHIROPODISTS OF ONTARIO

Practice Assessment Tool

****UPDATED ASSESSMENT CRITERIA FOR SURGICAL SUITE**

10.0 Surgical Suite – Infection Control

		Yes	No	N/A
10.1	Is there an autoclave onsite and used in compliance as per Reprocessing Guidelines?			
10.2	Is there a system to verify sterilization?			
10.3	If not built into package/pouch, are Chemical Indicators (CIs) placed in and on each package?			
10.4	Are sterilizer displays, print outs or USBs checked and signed for by person processing the load?			
10.5	Are the CIs checked prior to using the contents of the sterilized package?			
10.6	If a failed CI is noted, is the package reprocessed?			
10.7	Are sterilizers tested with Biological Indicators (BIs) in a process challenge device (PCD) each day the sterilizer is used?			
10.8	Are sterilized packages stored in a clean, dry area?			
10.9	Does the sterilization log include:			
a	load control label (sterilizer number, load number, date) and contents?			
b	parameters of the sterilization cycle?			
c	person responsible for the sterilization cycle?			
d	CI and BI monitoring results?			
10.10	Is a sink accessible for proper pre-operative surgical scrub?			
10.11	Is the suite/room cleaned and disinfected prior to each procedure and has a hard surfaced floor for easy cleaning (not carpeted)?			
10.12	Is sterile technique used:			
a	during gowning and gloving?			
b	for surgical tray set-up?			
c	for the duration of the procedure?			
10.13	Is hair cover and mask worn during set-up and while performing the procedure?			

ADDITIONAL COMMENTS/INFORMATION:

11.0 Surgical Suite – Safety/Risk Management

		Yes	No	N/A
11.1	Is there adequate room for:			
a	treatment chair, surgical trays, surgical equipment?			
b	movement of practitioner/assistants during procedure while maintaining the sterile field?			
11.2	Is equipment in good working order (oxygen, power equipment, X-Ray, chair)?			
11.3	Are supplies/disposables readily available and sterilized (sutures, drapes, gowns, gloves)?			
11.4	Is equipment/medication required for emergency situations readily available and log maintained?			

ADDITIONAL COMMENTS/INFORMATION:



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.13

COUNCIL BRIEFING NOTE **RE: RECOMMENDED AMENDMENTS TO BYLAW 1: GENERAL** **Adding Registration Numbers to the Public Register**

Background:

Section 23(2) of the *Health Professions Procedural Code* sets out certain information about registrants the College is required to post on its public register. Additional information is set out in By-law 1, section 42.05. In October 2019, the Council passed a motion to remove registration numbers from the public register, and it was removed from By-law 1. To be transparent, and to align the College with other RHPA colleges, the Council is being asked to reconsider its 2019 decision and to revise By-law 1 to require that registration numbers be posted on the public register.

Public Interest Rationale for Decision:

It is in the public interest that the College be transparent and that the public have access to registrants' registration numbers. It is also in the public interest that the College align its practices with other RHPA colleges for consistency.

Recommended Motion:

That Council approve, in principle, the amendment to By-law 1, as follows:

42.06 In accordance with the authorization provided by paragraph 20 of subsection 23(2) of the Code and subject to Articles 42.07, 42.08, 42.08.01, and 42.08.02, the following additional information shall be kept in the register of the College:

1. Any change to each member's name which has been made in the register of the College since he or she first became registered with the College.
2. The classes of certificate of registration held by each member and the date on which each was issued.
3. The college, university or school from which the member received the member's degree or diploma used to support the member's current registration and the year in which the degree or diploma was obtained.
4. A list of the languages in which each member is capable of working.
5. The date on which each certificate of authorization was issued by the College.
6. Where a certificate of authorization is revised, a notation of the effective date of the revision.

7. Where a member is engaged in the practice of chiropody in Ontario, the name and address of the person or business for whom or through which the member primarily engages in the practice of chiropody in Ontario, if applicable.
8. Where a member resigned, the date upon which the resignation took effect.
- 9.1 Where a decision of a panel of the Inquiries, Complaints and Reports Committee made on or after October 1, 2015 includes a requirement that the member attend before a panel of that committee to be cautioned (as is authorized by paragraph 3 of subsection 26(1) of the Code),
 - a) a notation of that fact including a summary of the caution;
 - b) the date of the panel's decision;
 - c) once the member has received the caution, a notation to that effect and the date the member received the caution; and
 - d) if applicable, a notation that the panel's decision is subject to a review or appeal and therefore not yet final.
- 9.2 Where a decision of a panel of the Inquiries, Complaints and Reports Committee made on or after October 1, 2015 includes a requirement that the member complete a specified continuing education or remediation program (as is authorized by paragraph 4 of subsection 26(1) and subsection 26(3) of the Code),
 - a) a notation of that fact including the specified continuing education or remediation program(s);
 - b) the date of the panel's decision;
 - c) upon completion of the specified continuing education or remediation program(s), a notation to that effect and the date of completion; and
 - d) if applicable, a notation that the panel's decision is subject to a review or appeal and therefore not yet final.
10. Where a member has any terms, conditions or limitations in effect on his or her certificate of registration, the effective date of those terms, conditions and limitations, whether the terms, conditions and limitations were imposed or voluntary and where applicable, the committee responsible for the imposition of those terms, conditions and limitations.
- 10.1 A summary of any existing restriction on the member's right to practise that has been imposed by a Court or other lawful authority, if the College is aware of the restriction, including the name of the Court or other lawful authority that imposed the restriction, the date the restriction was imposed and where the restriction is under appeal, a notation of that fact, which notation shall be removed once the appeal is finally disposed of.
- 10.2 Where a member resigned while a fitness to practise proceeding was outstanding, a notation of that fact.

- 10.3 A summary of any existing restriction on the member's right to practise that has resulted from an undertaking given by the member to the College or an agreement entered into between the member and the College.
11. Where a member has terms, conditions or limitations on his or her certificate of registration varied, the effective date of the variance of those terms, conditions and limitations and where applicable, the committee responsible for the variance of those terms, conditions and limitations.
12. Where a member's certificate of registration is reinstated, the effective date of the reinstatement and where reinstated by a panel of the Discipline or Fitness to Practise Committee, the name of the committee responsible for the reinstatement.
13. Where a suspension on a member's certificate of registration is lifted or otherwise removed, the effective date of the lifting or removal of that suspension and where applicable, the committee responsible for the lifting or removal of the suspension.
14. Where a certificate of registration or a certificate of authorization is revoked, suspended, cancelled or otherwise terminated, a notation of the effective date of the revocation, suspension, cancellation or other termination.
 - 14.1 Where a member's certificate of registration is suspended for non-payment of a fee, a notation of that fact and the date upon which the suspension took effect.
 - 14.2 Where a member's certificate of registration is suspended for failure to submit to a physical or mental examination as required by the Inquiries, Complaints and Reports Committee, a notation of that fact and the date upon which the suspension took effect and, if applicable, the date upon which the suspension was lifted.
15. Where the Inquiries Complaints and Reports Committee has imposed an interim term, condition or limitation on the certificate of registration of a member in connection with an investigation which did not result in a referral to the Discipline Committee or the Fitness to Practise Committee, a notation of that fact, the nature of the order and its effective date, until the matter which was the subject of the investigation is finally concluded by the Inquiries, Complaints and Reports Committee.
 - 15.1 Where the Inquiries, Complaints and Reports Committee has imposed an interim term, condition or limitation on the certificate of registration of a member in connection with an investigation which resulted in a referral to the Discipline Committee or the Fitness to Practise Committee, a notation of that fact, the nature of the order and its effective date, until the referral is finally concluded by the Discipline Committee or the Fitness to Practise Committee.
16. Where one or more allegations of professional misconduct or incompetence has been referred to the Discipline Committee in respect of the member on or after October 1, 2015 and have not yet been disposed of,
 - a) the date of the referral;
 - b) a copy of the specified allegations;

- c) the status of the hearing including the hearing date, if one has been set;
 - d) the next scheduled date for the continuation of the hearing if the hearing was adjourned to a specific date or, if the hearing was adjourned without a specific date, a notation to that effect; and
 - e) the Notice of Hearing.
17. Where the question of the member's capacity has been referred to the Fitness to Practise Committee and not yet decided,
- a) a notation of that fact; and
 - b) the date of the referral.
18. Where the results of a disciplinary proceeding are contained in the College's register, the date on which the panel of the Discipline Committee made its decision including, if applicable, the date on which the panel ordered any penalty.
19. Where a decision of the Discipline Committee has been published by the College with the member's name included in any medium and the decision included a finding of professional misconduct or incompetence,
- a) a notation of that fact; and
 - b) identification of the specific publication of the College which contains that information.
- 19.1 Where a decision of the Discipline Committee has been published by the College with the member's name included in any medium but the decision did not make a finding of professional misconduct or incompetence,
- a) a notation of that fact; and
 - b) identification of the specific publication of the College which contains that information.
20. Where the result of an incapacity proceeding is contained in the College's register, the date on which the panel made the finding of incapacity and the effective date of any order made by the panel.
21. A summary of any finding of guilt of which the College is aware if made by a Court on or after January 1, 2015 against a member, in respect of any offence, in any jurisdiction, that the Registrar believes is in the public interest to be posted on the register.
22. Any information the College and the member have agreed should be included in the register.
23. Any information the College and a health profession corporation to which the College has issued a certificate of authorization have agreed should be included in the register.

24. Where a member holds an Inhalation Certificate,
- a) a notation that the member is authorized by the College to administer a substance by inhalation; and
 - b) the date on which the Inhalation Certificate was first issued.
25. Where a member's Inhalation Certificate has been cancelled or voluntarily surrendered,
- a) a notation that the Inhalation Certificate has been cancelled or voluntarily surrendered, whichever the case may be; and
 - b) the date it was cancelled or voluntarily surrendered, whichever the case may be.
26. [Each registrant's certificate of registration number.](#)

And that Council direct that the proposed amendments be circulated to registrants and other stakeholders for comment for 60 days before the matter is returned to Council.

Mover: _____

Seconder: _____



COLLEGE OF CHIROPODISTS OF ONTARIO

Regulating Chiropodists and Podiatrists in Ontario

ITEM 3.14

**COUNCIL BRIEFING NOTE
RE: EMERGENCY CLASS POLICY AND STANDARD OF PRACTICE**

Background:

In August 2023, the College's registration regulation, *Ontario Regulation 830/93*, was amended to include an Emergency Class of registration. The Emergency Class exists to allow qualified registrants to provide care during an emergency. The Emergency Class Policy outlines the circumstances in which Council, or the Executive Committee acting as Council, may open the Emergency Class.

All registrants in the Emergency Class must practice under the supervision of a registrant in the general class. The Supervision in the Emergency Class Standard of Practice outlines the criteria to act as a mentor, and the process to be approved as a mentor.

Public Interest Rationale for Decision:

It is in the public interest that the College provide clear guidance to registrants about how to operationalize legislative changes.

Recommended Motion:

That Council approve the Emergency Class Policy.

That Council approve the Supervision in the Emergency Class Standard of Practice.

Mover: _____

Seconder: _____

Emergency Class Policy

Approved by Council:



College of Chiropractors of Ontario

180 Dundas St. West, Suite 1901
Toronto, ON M5G 1Z8
T: **416.542.1333** F: **416.542.1666**
Toll-Free: **1.877.232.7653** www.cocoo.on.ca

Background

In August 2023, the College's registration regulation, [Ontario Regulation 830/93](#), was amended to include an Emergency Class of registration. The Emergency Class exists for the sole purpose of allowing qualified registrants to provide care during an emergency.

The ability to open the Emergency Class comes into effect when the Government of Ontario or Council determines that it is in the public interest to register qualified chiropractors¹ to address emergency circumstances.² This policy outlines the circumstances in which Council, or the Executive Committee acting as Council, may open the Emergency Class.

Opening the Emergency Class

For Council, or the Executive Committee acting as Council, to open the Emergency Class, it must be satisfied that all the below criteria are met.

1. There must be a current or imminent public health threat that requires an urgent increased supply of qualified registrants to serve the needs of the public.
2. The public and/or healthcare system is negatively impacted by the emergency circumstances.
3. Immediate action is required to remedy the emergency circumstances.
4. Council, or the Executive Committee acting as Council, must be satisfied, after considering possible solutions, that opening the Emergency Class is appropriate in the circumstances.
5. It would be in the public interest to open Emergency Class registration.

If the Emergency Class is opened, the College must take appropriate measures to inform the public about the emergency circumstances.

Continuous Assessment

Once the Emergency Class is activated, the Registration Committee will monitor the situation and provide regular updates to Council. An assessment of the emergency circumstances will be made at each Council and Executive Committee meeting while the Emergency Class is in effect.

Closing the Emergency Class

If it is determined that the criteria which justified the opening of the Emergency Class are no longer met, the Registration Committee will recommend that Council, or the Executive Committee acting as Council, pass a motion to close the Emergency Class.

All Emergency Class certificates are automatically revoked 60 days after Council, or the Executive Committee acting as Council, determines the circumstances that led to opening the Emergency Class have ended.³

¹ Note that individuals trained as podiatrists in jurisdictions approved by Council would be eligible to be registered in the Emergency Class. These individuals would be registered as chiropractors. See O. Reg. 830/93, s. 6.1(3).

² O. Reg. 830/93, s. 6.1(1)(1).

³ O. Reg. 830/93, s. 10.1(1)(3).

SUPERVISION IN THE EMERGENCY CLASS

**Standard of Practice for Registrants of the
College of Chiropractors of Ontario**

Approved by Council:



College of Chiropractors of Ontario

**180 Dundas St. West, Suite 1901
Toronto, ON M5G 1Z8**

T: 416.542.1333 F: 416.542.1666

Toll-Free: 1.877.232.7653 www.cocoo.on.ca

INDEX

Introduction.....	3
Supervisor Qualifications.....	3
Restrictions on Supervision	3
Accountability and Responsibility.....	4
Determining the Level of Supervision	4
Record Keeping.....	4
Supervision Requirements.....	5
Ending the Supervisor/Supervisee Relationship.....	6

Introduction

This Standard of Practice applies to all registrants who provide supervision or mentorship (the “**Supervisor**”) to another registrant of the College who practices chiropody in Ontario pursuant to a certificate of registration in the Emergency Class in accordance with [O. Reg. 830/93](#) (the “**Supervisee**”).

Supervisor Qualifications

To act as a Supervisor, a registrant must have written approval from the Registrar in advance of commencing supervision. To obtain approval, the following eligibility criteria applies:

- The registrant must hold a General Class certificate of registration in good standing.¹
- The registrant must have experience practicing chiropody in Ontario or another regulated jurisdiction for a minimum of five (5) years.
- The registrant must not have any disciplinary or conduct history with the College, other than a decision by the Inquiries, Complaints and Reports Committee to take no action on a complaint or report.
- The registrant must not be currently under investigation by the College.
- The registrant must not have any terms, conditions, or limitations on their certificate of registration that prevents them from supervising another registrant.

The Registrar has the discretion to determine that it would not be appropriate for a registrant to act as a Supervisor if, in the Registrar’s opinion and based on reasonable and probable grounds, it is not in the public interest for the registrant to be approved as a Supervisor. Such considerations may include, but are not limited to, the registrant having been charged with or found guilty of an offence in any jurisdiction, or the registrant having a finding of professional misconduct, incompetence, or incapacity in another jurisdiction or in another profession, or the circumstances that may rise to a conflict of interest.

If a Supervisor ceases to meet the qualifications in this Standard of Practice, the Registrar will remove their authority to provide supervision.

Restrictions on Supervision

A Supervisor is not permitted to supervise any Supervisee that may give rise to a conflict of interest. A Supervisor has a conflict of interest for the purposes of this standard where the Supervisor (or a relative

¹ Being in “good standing” shall include, but not limited to, the fact that the registrant is not the subject of any discipline or fitness to practise order or any proceeding or ongoing investigation or any interim order or agreement as a result of a complaint, investigation or proceeding, and is also in compliance with all continuing competency and quality assurance requirements.

or a related corporation to the Supervisor) has a relationship as a result of which a reasonable person could conclude that the personal interests of the Supervisor (or the relative or related corporation of the Supervisor) could improperly influence the Supervisor's professional judgment or conflict with their duty to engage in supervision in the best interests of patients or in the public interest. . These restrictions would include, but are not limited to, the supervision of a relative or a person they have a close or intimate relationship with.

A relative is a person who is related to another person in one of the following ways:

- Spouse or common-law partner*;
- Parent;
- Child;
- Sibling (brother or sister);
- Through marriage (father-in-law, mother-in-law, son- or daughter-in-law, brother- or sister-in-law, stepfather, stepmother, stepchildren, stepbrothers, or stepsisters); or
- Through adoption (adoptive parents or siblings, adopted children).

*Common-law partners are people who have lived together as a couple for at least one (1) year, or who have a child together, or who have entered into a cohabitation agreement.

Accountability and Responsibility

The Supervisor is responsible and accountable for ensuring that all Standards of Practice of the profession are upheld where a Supervisee is involved in providing patient care and/or working within the practice of chiropractic.

When assigning care, the Supervisor must do the following:

- Assign only activities that the Supervisee has the knowledge, skill, and judgment to perform.
- Ensure that the Supervisee has the knowledge, skill, and judgment to deliver safe and competent care.

The College's [Assignment, Orders and Delegation Policy](#) should be read in conjunction with this Standard of Practice.

Determining the Level of Supervision

The Supervisor must adjust the level of supervision in accordance with patient needs – i.e., closer supervision is required in situations with higher patient risk. Some factors that may influence patient risk are the patient's condition, the clinical environment, and the abilities and experience of the Supervisee. Supervision may include direct observation, periodic chart review and discussions about the patient's condition, among other things.

Record Keeping

Supervisors are responsible for ensuring that all records, including but not limited to patient records and financial records, are completed in accordance with the [Records Standard of Practice](#) and the [Fee, Billing, and Accounts Guideline](#).

Supervision Requirements

- The Supervisee and their proposed Supervisor must sign the **Emergency Class Supervision Agreement**. The College will provide confirmation that the proposed Supervisor meets the requirements in this Standard of Practice; supervision must not begin until the Supervisee receives this written confirmation from the College.
- The Supervisee is responsible for ensuring that their patients are:
 - Informed that the Supervisee must practise under supervision, and
 - Provided with the Supervisor's contact information so they can report any concerns.
- The Supervisor must always be onsite when the Supervisee is providing chiropody services.
- A consultation between the Supervisor and the Supervisee must occur at least once every day when the Supervisee provides chiropody services. These consultations must include a review of treatments provided since the last consultation.

(a) Roles and Responsibilities of Supervisors and Supervisees

Supervisors must do all of the following:

- Comply with relevant legislation, regulations, by-laws, and standards.
- Ensure that they are available to assist/consult the Supervisee as needed.
- Ensure that the Supervisee has the knowledge, skill, and judgment to deliver safe and competent care.
- Report any concerns about a Supervisee to the College. Supervisors must report to the College if the privileges of a Supervisee are revoked, suspended, or have imposed restrictions on them for reasons of professional misconduct, incompetence, or incapacity.
- Provide supervision for no more than five (5) Supervisees at any given time.
- Notify the College within five (5) days if the Supervisor is no longer able to fulfill their supervisory responsibilities and immediately advise the Supervisee to stop practising unless/until they secure a new Supervisor approved by the College.

Supervisees must do all of the following:

- Comply with relevant legislation, regulations, by-laws, and standards.

Supervision Standard of Practice

DATE

- Secure a Supervisor for approval by the College; the Supervisee may only have one (1) Supervisor per workplace.
- Notify the College within five (5) days if their Supervisor is no longer able to fulfill their supervisory responsibilities and immediately stop practising unless/until they secure a new Supervisor approved by the College.
- Practice in accordance with the terms, conditions, and limitations on their certificate of registration.
- Inform patients that they are practising under supervision as an emergency class registrant, and obtain consent from every patient that they are comfortable receiving treatment from a supervised chiropodist prior to initiating treatment.
- Only practice chiropody when competent to do so safely and effectively, and within the limits of their knowledge, skills and judgment.

(b) Accountability

If a Supervisee is the subject of a complaint or investigation, the College will investigate the Supervisee for that practice concern and may also investigate the Supervisor to determine if their supervision was appropriate.

Ending the Supervisor/Supervisee Relationship

In accordance with the Emergency Class Policy, all Emergency Class certificates are automatically revoked 60 days after Council, or the Executive Committee acting as Council, determines the circumstances that led to opening the Emergency Class have ended.

When that happens, Supervisors are responsible for notifying patients that the Supervisee will no longer be able to practice and for ensuring continuity of care in accordance with the [Discontinuation of Services Advisory](#).

Registrar's Report
January 26, 2024, Council Meeting

2023: A Year in Reflection

2023 proved to be another very busy year for the College of Chiropodists of Ontario. The focus continued to be on increasing the effectiveness of the College's oversight through Right Touch Regulation, working with Registrants through Quality Assurance to help them provide the best care to patients, and elevating the College's profile with speaking engagements, increased social media presence and outreach to stakeholders. Importantly, the College has continued to work towards fulfilling Council's strategic plan in moving towards the adoption of the podiatry model and ensuring the sustainability of the College. Below is an overview of some of the highlights of the work we've done in 2023.

Stakeholder Outreach and Engagement:

We have continued to engage with key stakeholders in various positive ways. I attended as a guest speaker at association conferences and enjoyed the opportunity to speak directly with registrants. The College held our third Townhall meeting in December 2023 and had very good engagement and questions from attendees.

I meet bi-weekly with the Health Profession Regulators of Ontario (HPRO) and have collaborated on working groups within HPRO on matters, including feedback to the Ministry of Health (MOH). Currently I am sitting on the MOH working group of the College Performance Measurement Framework (CPMF), providing input and contributing to the review of the CPMF tools submitted by the health regulators in Ontario. I am also sitting on a Prescribing Committee comprised of other health regulators and member associations for those healthcare providers with prescribing privileges, working towards the goal of recommending best practices in prescribing to the MOH.

We continue to work collaboratively with the member associations – the Ontario Society of Chiropodists and the Ontario Podiatric Medical Association. As well, we are in regular contact with the educational institution in the province responsible for training chiropodists – Michener at UHN. To date, the College has hosted recent graduates and, more recently, I met directly with first year chiropody students, introducing them to professional regulation.

The College engages with the Ministry of Health, the Ontario Medical Association, and the Ontario Hospital Association, to name a few.

We are continuing to edit and improve our website to ensure our messaging and resources are in plain language to optimize accessibility by members of the public as well as other stakeholders.

We are reviewing the College's standards and guidelines to streamline them and remove duplication. The aim is to ensure our standards and guidelines are readily understandable and provide clear, helpful guidance to registrants as well as other stakeholders. Additionally, I have tasked the College's Standards and Guidelines Committee to review our current Standards, Guidelines and Policies documents and to make recommendations to update them where required to better reflect the current day standard of care.

Modernized Regulation:

The College's modernization of regulatory operations has evolved with the implementation of fulsome orientation for new Council members as well as regular education sessions for Council and Committee members.

We have made significant strides in modernizing the College's Quality Assurance measures to best help registrants practice as safely and effectively as possible. We moved the Continuing Education cycle to a 1-year cycle without increasing the obligations of registrants but with the desired effect of ensuring registrants maintain currency in chiropody and podiatry. We have increased the number of practice assessments and provided training for assessors to ensure those registrants who are assessed have a positive, informative experience with their assessment and assessor.

The College wants to better know and understand who our registrants are! We have a new survey for registrants to complete as part of their annual renewal that will help us learn about the registrants we regulate. The practice of asking a regulator's registrants about themselves to learn the make-up of a profession is a long-standing practice that most regulators have engaged in for some time. This helps the College fulfill its commitment to Truth and Reconciliation as well as its commitment to Equity, Diversity and Inclusivity. We encourage registrants to answer the anonymous survey.

Communications and Engagement:

The College has increased its social media presence and is upgrading its website content to include video content as a vehicle to deliver important messaging. Including video content is a vital means to increase stakeholder engagement with the College, all with a view to aiding the College in protecting the public. Those attending the College's Council Meeting on January 26th will be able to see our first video which will be unveiled at that time. Watch the College's website for new video content coming soon.

Truth and Reconciliation:

Upon reviewing data showing that certain First Nations communities experience triple the rates of lower limb amputations in the province compared to other Ontarians, I took steps to understand how we, as a health profession regulator, could help reduce the harm experienced in those communities. Understanding that our Registrants provide critical footcare to Ontarians that can dramatically reduce the rates of lower limb amputations and further understanding that the only path forward for the evolution of footcare in the province is the adoption of the podiatry model, I have championed the connection between Truth and Reconciliation and effective healthcare strategies. The College's strategic plan offers a solution to markedly reduce the rates of lower limb amputations and that is found in the adoption of the podiatry model. I remain hopeful that we can work with our First Nations community partners who endorse the podiatry model, as well as other stakeholders to increase Ontarian's access throughout the province to chiropodists and podiatrists to reduce rates of preventable lower limb amputations.

2024 will undoubtedly offer further opportunities for improvement to College operations and I look forward to continuing to meet the challenge of remaining vigilant in our efforts to best protect the public.

Nicole Zwiers



STRATEGIC PLANNING COMMITTEE KEY PERFORMANCE INDICATOR (KPI) DASHBOARD

KEY PERFORMANCE INDICATOR (KPI)	METRIC	RESULT	NEXT STEPS	STATUS
Annual review of financial reserves to determine sufficiency	Actions taken to determine sufficiency of reserve fund.	Regular review of financial statements, including reserve funds with no deficit or unexpected deficit noted.		
Continuous improvement of the College's performance in the College Performance Measurement Framework (CPMF) metrics	A comparator of the previous year to ensure that more or all metrics are satisfied.	The College has demonstrated improvement year after year, with a reporting tool capturing the response from the College.		
Financial reporting by the Registrar at each Council Meeting	Regular reporting to Council.	A financial report at every Council meeting by the Registrar.		
Annual onboarding and orientation of new Councilors, Chairs and Committee Members prior to the first Council Meeting	Delivery of onboarding and orientation.	Better prepared Council and committee members as well as chairs demonstrating effective meetings. Reflected in post meeting surveys.		
Maximize membership in the Health Professions Regulators of Ontario (HPRO) with regular engagement by Registrar and Staff	Regular attendance by the Registrar and staff at HPRO meetings and events.	Produce a document (dashboard) annually of HPRO meetings and events, who has attended and when.		
Engagement and follow-up in advancing the Full Scope Podiatry Model (FSPM) as identified in the Position Paper	The Registrar's meetings with government officials and other stakeholders towards supporting the position paper and the FSPM.	Documenting the number of meetings the Registrar has had of this nature, with whom and when. For public reporting purposes, reporting only the number of meetings, without details where there are confidentiality concerns, at the discretion of the Registrar.		
Finalize and maintain the competencies for FSPM	Comparators with the competencies in other jurisdictions with the FSPM that reflect alignment of the College's competencies for FSPM. The work done under the HPRAC submission can be used as a guide.	Sub-group formed to develop a fulsome list of competencies required for the FSPM and a roadmap to operationalizing registration and regulation of registrants practicing FSPM.		
Engagement of academic institutions that can fulfil the FSPM and with Ministry of Colleges and Universities as required	Engagement and outreach to interested post-secondary institutions.	Monitor meetings and outreach that the Registrar has with interested post-secondary institutions.		
Present the FSPM to HPRO for endorsement	Engagement and outreach to HPRO to present to RHPA Registrars about the FSPM.	Include any such presentations as a Dashboard item to report.		
Develop an ongoing strategy for implementation by November 2023 to ensure Members have the requisite knowledge, skill, and training to provide care according to evidence-based best practices	A workable strategy to operationalize the FSPM and ensure the public is protected.	Development of a strategy by November 2023 that identifies different types of registrants, their scopes of practice as well as their education and training and bridging paths.		



College of Chiropractors of Ontario

DISCIPLINE COMMITTEE GUIDE

Information for Registrants



Regulating Chiropractors and Podiatrists in Ontario

www.cocoo.on.ca

PURPOSE OF DISCIPLINE HEARINGS

As part of the College's mandate to regulate chiropractors and podiatrists in the public interest, the Inquiries, Complaints and Reports Committee may refer allegations of professional misconduct or incompetence to the College's Discipline Committee for a hearing.

A hearing is a formal proceeding, similar to a trial in a court, conducted by a Panel of members of the Discipline Committee. The Discipline Committee will consider evidence and determine if, based on the evidence, the Registrant committed an act or acts of professional misconduct or is incompetent. If the Discipline Committee finds that the Registrant committed acts of professional misconduct or is incompetent, it will then determine what penalty should be imposed. In hearings before the Discipline Committee, the parties are the College and the Registrant against whom the allegations have been made.

The purpose of disciplinary hearings is to help the College ensure that its mandate of public protection is carried out. Discipline hearings ensure that Registrants govern themselves in accordance with the *Regulated Health Professions Act, 1991* and the *Chiroprody Act, 1991* in addition to other statutes and regulations governing the profession. This includes maintaining standards of practice of the profession.

Disciplinary hearings also help the College preserve public confidence in the profession by:

- Providing public access to the discipline process through a public complaints and reports process;
- Allowing the public access to discipline proceedings by way of open hearings; and
- Publishing the Discipline Committee's decisions in the College's publications and on its website.

It is always strongly recommended that you retain a lawyer to represent you at a discipline hearing.





NOTICE OF HEARING

After a referral to the Discipline Committee in relation to specified allegations of professional misconduct or incompetence has been made, the matter will be assigned to the College's lawyer (the "**Prosecutor**"). The Prosecutor will prepare a **Notice of Hearing** to be sent to you. The Prosecutor will also provide you with a copy of all relevant information within the College's possession, which is called disclosure.

The Notice of Hearing contains the allegations of professional misconduct or incompetence that have been made against you. The College has the burden of proving the allegations set out in the Notice of Hearing. The standard of proof that the College must meet is the civil standard of proof, on a **balance of probabilities**. The Discipline Committee must decide whether it is more likely than not that you engaged in the conduct that you are alleged to have engaged in, and the Discipline Committee must also determine that the conduct you have engaged in is in fact professional misconduct or incompetence.

Once you receive the Notice of Hearing, you or your lawyer should contact the Prosecutor assigned to the case to discuss how you intend to proceed.

RIGHT TO LEGAL REPRESENTATION

A discipline hearing is a serious matter. If you face allegations of professional misconduct or incompetence before the Discipline Committee, you should consider whether you want to retain a lawyer, paralegal or an agent (in compliance with the requirements of the Law Society Act). You are not required to retain a legal practitioner (you can represent yourself) but the College is represented by a lawyer at hearings.

4

DISCLOSURE

Any party who wants to rely on evidence at the hearing must disclose the evidence to the other party at least 10 days before the hearing. If requested, a party must deliver to each of the other parties copies of all documents that the party will produce or enter as an exhibit at the hearing at least 10 days before the hearing.

Where a party wants to rely on an **expert witness**, the party must disclose the identity of the expert and a copy of a written report signed by the expert containing the substance of the expert's anticipated oral evidence at least 60 days in advance of the hearing for the College and 30 days in advance of the hearing for the Registrant. The College can serve a reply expert report 15 days in advance of the hearing. An expert witness is someone qualified to give opinion evidence about matters outside the general scope of knowledge of the Panel members. For example, the Discipline Committee often hears expert evidence about what the standards of practice of the profession are, and whether those standards were breached in a particular case.

These rules of disclosure ensure that each party is prepared for the hearing.

PRE-HEARING CONFERENCE

There are a number of preliminary matters that should be determined before a hearing takes place, such as how many witnesses will be called, what facts the parties agree on (if any), and what are the contentious issues. To assist with narrowing the issues and to help expedite the time required for a hearing, a pre-hearing conference may be arranged in advance of the hearing. Any party to a hearing may request a pre-hearing conference.

Pre-hearing conferences are closed to the public and all discussions at a pre-hearing conference occur on a without prejudice basis. This means that nothing discussed at the pre-hearing conference can be disclosed at the hearing. The purpose of the pre-hearing conference is to plan for the hearing and to determine if any of the issues can be settled. The person who chairs the pre-hearing conference will not be a member of the Discipline Committee Panel at the hearing (unless both parties consent). If none of the issues can be settled, a pre-hearing conference is a helpful opportunity for the parties to discuss any issues that may arise at a hearing, as well as scheduling issues, including how long a hearing may take.

If you would like to request a pre-hearing conference, you may contact the College's Prosecutor to discuss this further.

5

MOTIONS

A **motion** is a request to the Discipline Committee to obtain a ruling or decision on a specific matter relevant to a case. Parties must notify the Discipline Committee, through the Hearings Office, of any intention to file a motion so that a motion date can be scheduled. A party bringing a motion must serve the notice of motion and materials in support of the motion to the other party and file it with the Hearings Office at least 10 days before the motion is to be heard. A party who wishes to respond to the motion must serve their response on each party and file a copy with the Hearings Office at least five days before the motion is to be heard. If a party intends to rely on a factum, written submissions or a book of authorities, those documents must be delivered to the other party and filed with the Hearings Office. In the case of the party bringing the motion, this must be done at least seven days before the motion is to be heard. The responding party must do so at least five days before the motion.

Certain motions may be brought in advance of the hearing – these are called “pre-hearing motions”. An example of a pre-hearing motion is a motion to request an adjournment. Other motions, such as motions to require a third party to produce documents, must be brought at the hearing.

A pre-hearing conference can be helpful in assisting you to determine what motions, if any, should be brought in advance of the hearing. The Discipline Committee’s Rules of Procedure have detailed rules regarding motions that you should carefully review.



HEARINGS



A hearing is a formal proceeding before an independent Panel of the Discipline Committee made up of members of the profession and the public. The hearing is a full legal and adversarial process – each party presents its own case and represents its own interests. There are specific roles and duties for each individual involved in a hearing. It is important that you appreciate that Discipline Hearings are similar to court proceedings, and therefore there are rules that are required to be following during the hearing.

There is a specific order to the Discipline Hearings, which is set out below, as well as a high degree of formality. All witnesses will be sworn or affirmed as to the truth of their evidence before they are permitted to commence their evidence. Any documentary evidence to the hearing will be entered as exhibits during the hearing.

With respect to decorum, the Panel is given the same respect as a judge at trial. For hearings that are proceeding in person, the Panel will enter the hearing room last and all persons present are required to stand when the Panel enters the room and remain standing until advised by the Chair of the Panel to be seated. The same protocol applies when the Panel exits the hearing room. Additionally, the Panel will not speak with the Registrant or the Prosecutor during breaks.

If you have been given notice of the hearing and you fail to attend the hearing, the hearing may proceed in your absence.

ELECTRONIC HEARINGS

Currently, all hearings are proceeding virtually. In the case of virtual hearings, the College will provide log-in information to the parties in advance of the hearing and will also be available to troubleshoot any technical issues in advance of the hearing. It is recommended that you contact the Hearings Office in advance of the hearing to ensure that any technical issues are addressed before the hearing.

Virtual hearings are subject to the same rules and decorum as in-person hearings. You must ensure that you are in a quiet space and can focus on the hearing. No one else should be in the room with you except for lawyers, paralegals or representatives.



7

The Individuals Involved in a Discipline Hearing

The parties to a discipline hearing are the College and the Registrant against whom allegations have been made. Any other witnesses who may be permitted to give evidence at the hearing, including the complainant if there is one, are not parties.

The other participants involved in the hearing will include the Panel, Prosecutor, Court Reporter, Independent Legal Counsel, as well as College staff and any witnesses called by either party.



THE PANEL

The Chair of the Discipline Committee will assign a Panel of three to five members to preside at a hearing and consider the allegations contained in the Notice of Hearing. There are public members as well as members of the profession on a Panel. The Panel at a discipline hearing is led by a Chair, who has the responsibility of ensuring that the hearing is conducted fairly and efficiently.

The role of the Panel is similar to that of a judge (and jury) – it will render a decision and give its reasons. The decision becomes public information upon completion of the hearing.

The mandate of the Panel is to:

- Consider the allegations set out in the Notice of Hearing and ascertain the facts of the case;
- Determine whether, upon the evidence and the facts so ascertained, the allegations have been proven, having regard to the applicable onus and standard of proof;
- Determine whether, in respect of the allegations that were proved, you have committed an act of professional misconduct or are incompetent; and
- Determine the penalty (also referred to as an “order”) to be imposed in cases where such findings have been made.

The Panel has the right to ask questions of clarification from witnesses.

The Discipline Committee Panel will also have its own lawyer, commonly referred to as **Independent Legal Counsel (“ILC”)**. This lawyer does not work for the College and is not a member of the Panel. More information regarding ILC is provided below.

8

THE PROSECUTOR

The Prosecutor will present evidence to attempt to prove the allegations. The Prosecutor must provide sufficient evidence to meet the burden of proof to allow the Panel to make a finding or findings on the allegations.

The role of the Prosecutor is to present the case for the College. The Prosecutor cannot provide legal advice to you or to witnesses. It is strongly suggested that you seek legal advice and retain your own legal counsel to represent you.



INDEPENDENT LEGAL COUNSEL

The College also retains legal counsel to provide impartial legal advice to the Panel. The Panel is permitted to seek legal advice from its own counsel with respect to legal and/or procedural issues that arise during the hearing. The right to legal advice is important for the Panel, as most Panel members are not lawyers. ILC may provide advice on any given questions of law, procedure or evidence. ILC does not vote or influence the Panel's decision. Advice given to the Panel by ILC will be shared with the parties so that they can make submissions about it if they wish. ILC is independent of the College and the Registrant; ILC cannot give legal advice to the parties.

COURT REPORTER

A **court reporter** transcribes verbatim the entire proceedings. The College is required to have and maintain the record in all disciplinary proceedings. You can request a copy of the transcripts from the court reporter, however there is a fee for obtaining them.



COLLEGE STAFF

Usually, College staff will be present during the hearing. They are responsible for making all pre-hearing arrangements, such as ensuring the hearing room is booked, that all technology is functioning appropriately and arranging for the court reporter and ILC. Staff will also ensure that discipline decisions are distributed and published as required after the Panel has made its decision and will monitor the Registrant's compliance with any penalty order made by the Panel.

9

Contested and Uncontested Hearings: What's the Difference?

Hearings occur in two stages. The first stage of the hearing is focused on whether you committed an act or acts of professional misconduct or are incompetent. The Prosecutor will start by reviewing the allegations in the Notice of Hearing. Once the panel has reviewed the Notice of Hearing, you will be asked how you respond to the allegations. You can either deny some or all of the allegations, in which case the hearing will proceed on the basis that the denied allegations are contested. If you do not attend the hearing it will proceed as though you had pleaded not guilty and the College will still present its case against you. You can also admit some or all of the allegations, which is the equivalent of a guilty plea. Additional information is provided below.

The question of a possible penalty is not addressed in this part of the hearing – the only decision for the Panel to make is whether the allegations in the Notice of Hearing have been established on a balance of probabilities and that the conduct amounts to professional misconduct or incompetence. If the Discipline Committee finds that you committed an act or acts of professional misconduct, the second stage of the hearing is focused on what penalty is appropriate.

Either or both stages of the hearing can proceed on a contested basis or uncontested basis.





Contested Hearings

Where the Registrant disputes the allegations, a hearing occurs on a fully **contested** basis. Following the opening statements (which are each party's general position regarding the allegations), the Panel will hear evidence. The Prosecutor will make their opening statement first, and you will then have the right to make an **opening statement**. The opening statement is not evidence – the purpose is to assist the Panel in understanding the parties' respective positions and the anticipated evidence supporting those positions. There is no requirement for you to make an opening statement. You can also wait and make your opening statement after the College has presented its case and before you start to present your evidence.

The College will present its evidence first, and then you will have an opportunity to present your evidence. Evidence may be in the form of documents or in the form of oral testimony given by witnesses. Each party will have an opportunity to ask questions of their witnesses (referred to as examination-in-chief) and the other party's witnesses (referred to as cross-examination). Each party is responsible for ensuring that its witnesses attend the hearing, and if necessary, witnesses can be served with a **summons** to require their attendance at the hearing. A summons to witness must ordinarily be served personally on the witness (i.e., given to them personally rather than sent by mail or email) at least two days before the date on which the witness is to appear. The Hearings Office can assist you to obtain a summons, but the Hearings Office will not participate in the service of that summons. That is your responsibility.

The parties have the right to object to any questions asked by the opposing party if they believe it is improper. Some examples include if the question is asking for irrelevant or hearsay information. You are required to explain your objection and you must address the Chair of the Panel when doing so. The Panel may ask the witness to be excused during the arguing of the objection and may turn to ILC to seek their views, and the parties will have an opportunity to comment on any advice from ILC to the Panel. The Panel will then make a decision regarding whether the question is proper or improper.

cont'd...



Contested Hearings

You have the right to testify in your own defence, but you are not obliged to do so. If you do testify, then the Prosecutor will be able to cross-examine you on your evidence. Testifying is done under oath or affirmation (essentially a promise to tell the truth). If you testify on your own behalf then you will be cross-examined by the Prosecutor after you have given your evidence-in-chief.

After each party has presented their evidence, they will have an opportunity to provide closing submissions, summarizing their arguments and what they believe the evidence has demonstrated. It is important to remember that submissions are not evidence – you should keep this in mind when deciding whether or not to testify. If you do not testify under oath or affirmation, the things you say during your opening or closing submission are not evidence that can be relied upon by the Panel. Similarly, the things said by the Prosecutor during opening or closing submissions are not evidence, they are simply arguments.

The Discipline Committee will then decide whether you have committed an act or acts of professional misconduct or are incompetent as alleged in the Notice of Hearing. If the Discipline Committee decides that you have committed an act or acts of professional misconduct or are incompetent, the Panel will then consider what penalty is appropriate. Each party will have an opportunity to make submissions and present evidence during the penalty phase of the hearing.



Uncontested Hearings

Where a hearing proceeds on an **uncontested** basis, you are agreeing that you have committed an act or acts of professional misconduct and you enter into an Agreed Statement of Facts. The **Agreed Statement of Facts** sets out the facts that are agreed to between the parties. Where hearings proceed on an uncontested basis, there is no need to present oral evidence; all the evidence is contained in the Agreed Statement of Facts. The Agreed Statement of Facts will also include an admission or admissions of professional misconduct. The admission(s) must be voluntary and informed to be accepted by the Discipline Committee, i.e. if you tell the Panel that you are only pleading guilty because you cannot afford to fight the allegations, the Panel will not be able to accept your guilty plea and the hearing will proceed as a contested hearing.

The Agreed Statement of Facts will usually be accepted by the Discipline Committee unless the conduct described in the document does not actually amount to professional misconduct or incompetence.

In uncontested hearings, if the Discipline Committee finds that you have committed an act or acts of professional misconduct or are incompetent, based on the Agreed Statement of Facts, at the penalty of phase of the hearing the parties typically present a Joint Submission on Penalty that sets out the penalty that the parties have agreed upon.

Joint Submissions on Penalty/Order are generally accepted by the Discipline Committee unless to do so would be contrary to the public interest or would bring the administration of the Discipline Process into disrepute. This is a very high threshold to meet, i.e., the penalty agreed to by the parties would have to be much higher or much lower than had been ordered by the Discipline Committee (or the discipline committee of other similar regulators) in the past for similar conduct.

PENALTIES

If the Discipline Committee determines that you have committed an act or acts of professional misconduct, it has the power to order one or more of the following penalties:

- Requiring you to appear before the panel to be reprimanded (in some cases of sexual abuse, a reprimand is mandatory);
- Direct the Registrar to revoke your certificate of registration (in some cases of sexual abuse, revocation is mandatory);
- Direct the Registrar to suspend your certificate of registration;
- Direct the Registrar to impose terms, conditions and limitations on your certificate of registration;
- If the findings of professional misconduct include sexual abuse, require you to reimburse the College for funding provided to the complainant for therapy and counselling and to post security to guarantee the payment of any amounts you are required to reimburse the College;
- Requiring you to pay a fine of not more than \$35,000 to the Minister of Finance.

The Discipline Committee also has the power to order that you pay the College some of the costs of investigating and prosecuting the matter if a finding of professional misconduct is made against you. Costs are separate and apart from the penalty and are meant to allocate the cost of the proceeding fairly so that the Registrant bears some of the costs incurred in the investigation and prosecution of the matter.

If the Discipline Committee finds that you are **incompetent** (meaning that your professional care of a patient displayed a lack of knowledge, skill or judgment of a nature or to an extent that demonstrates that you are unfit to continue to practise or that your practice should be restricted), then the Discipline Committee Panel may make an order for revocation, suspension or the imposition of terms, conditions or limitations on your certificate of registration.



OPEN TO THE PUBLIC

Discipline hearings are open to the public except in rare cases where the Discipline Committee determines the hearing should be closed. The decisions of the Discipline Committee are also made public.

In certain circumstances, the Panel has the power to order a publication ban. For example, in sexual abuse matters, a publication ban may be ordered on the request of a witness who is testifying about allegations of a member's misconduct of a sexual nature involving that witness. The order would require that no person shall publish the identity of the witness or any information that could disclose their identity.

DECISIONS AND REASONS

After the hearing, the Discipline Committee Panel will give its decision and reasons in writing to the parties.

APPEALS

After the decision of the Discipline Committee is released, either party is entitled to appeal the decision to the Divisional Court by serving and filing a Notice of Appeal within 30 days. The Divisional Court may overturn, affirm, or modify the order of the Discipline Committee.

RESOURCES

- [Regulated Health Professions Act, 1991, S.O. 1991, c. 18](#)
- [Health Professions Procedural Code](#), being Schedule 2 to the [Regulated Health Professions Act, 1991](#)
- [Chiropody Act, 1991, S.O. 1991, c. 20](#)
- [Ontario Regulation 750/93: Professional Misconduct](#)
- [Statutory Powers Procedure Act, R.S.O. 1990, c. S.22](#)
- [Rules of Procedure of the Discipline Committee of the College of Chiropodists of Ontario](#)
- [Discipline Committee Guidelines](#)
- [Guide for Witnesses at Discipline Committee Hearings](#)
- [Discipline Committee Members](#)

GLOSSARY OF TERMS



Agreed Statement of Facts: An ASF sets out the summary of evidence the parties have agreed on, and there is no need to prove these facts at a hearing.

Balance of Probabilities: The civil standard of proof that means proving that it's more likely than not that the conduct occurred. The Prosecution must prove that it is more likely than not that the Registrant engaged in the alleged conduct or negligence as contained in the allegations. (See the definition of “onus of proof” and “Prosecution” for further information about these terms).

Contested Hearing: A contested hearing means the Registrant denies the allegations of professional misconduct alleged against them in the Notice of Hearing.

Costs: A cost order is an order requiring a Registrant or the College to reimburse legal costs incurred by the other party to the proceeding. The order is meant to allocate the cost of the proceeding fairly so that the Registrant bears some of the costs incurred in the investigation and prosecution of the matter, where appropriate.

Court Reporter: A court reporter transcribes every word that is said during the hearing and produces a written transcript of the hearing.

Discipline Committee: The Discipline Committee is a statutory committee under the *Regulated Health Professions Act, 1991*. A panel of the Discipline Committee holds a hearing, similar to a trial held in a court, into allegations of professional misconduct or incompetence about a Registrant, which have been referred to the Committee by the Inquiries, Complaints and Reports Committee.

Discipline Committee Panel: A group of 3 to 5 professional and public members from the Discipline Committee who are appointed by the Chair of the Committee to conduct a hearing regarding a Registrant’s alleged conduct. Disclosure: Disclosure means when the information (usually referred to as “evidence”, see definition below) the College has collected related to the allegations of professional misconduct is provided to the Registrant for the purpose of responding to the allegations.

FREQUENTLY USED TERMS

GLOSSARY OF TERMS



Evidence: Evidence is relevant information presented at a hearing (see definition below) that can be introduced through witness testimony, and documentation, including emails or texts, and through video/audio recordings.

Expert Witness: An expert witness is a person with specialized knowledge, skills, education, or experience in a particular field who is called upon to provide their expertise to assist the panel with understanding specialized information, usually related to the College's practice standards.

Hearing: A hearing is a formal proceeding, similar to a trial in a court, conducted by a Discipline Committee Panel. The hearing may be held in person or virtually. At the end of a hearing the Prosecution will ask the Discipline Committee Panel to make a finding of professional misconduct against the Registrant. Any decision of the Panel will be binding, subject to appeal.

Incompetent: Means that a Registrant's professional care of a patient displayed a lack of knowledge, skill or judgment of a nature or to an extent that demonstrates that the Registrant is unfit to continue to practise or that their practice should be restricted.

Independent Legal Counsel: ILC is counsel to the Discipline Committee and may provide procedural and legal advice to the panel during the hearing. The ILC is not the College's lawyer.

Inquiries, Complaints and Reports Committee: The ICRC is a statutory committee under the *Regulated Health Professions Act, 1991*. The ICRC investigates complaints and reports to address concerns about the conduct and practice of Ontario chiropodists and podiatrists. It also conducts inquiries into whether a registrant has a mental or physical condition or disorder that impacts the registrant's capacity to practise safely.

Joint Submission on Penalty/Order: The JSP/O sets out the penalty the parties (see below for a definition of the Prosecution and the Registrant) have agreed on and are proposing to the panel to bring the matter to a close.

GLOSSARY OF TERMS



Motion: A motion is a request to the Discipline Committee Panel to obtain a ruling or decision on a specific matter relevant to a case.

Notice of Hearing: The Notice of Hearing contains the allegations of professional misconduct or incompetence that have been made against a Registrant.

Opening Statement: The purpose is to assist the Panel in understanding the parties' respective positions and the anticipated evidence supporting those positions. There is no requirement for a Registrant to make an opening statement.

Onus of Proof: The College is responsible for proving all allegations made against a Registrant. A Registrant is not responsible for disproving the allegations, but a Registrant may want to present evidence to support any defence they are raising.

Panel: A panel of three to five members preside at a hearing and consider the allegations contained in the Notice of Hearing. There are public members as well as members of the profession on a Panel.

Parties: Means the Prosecutor and the Registrant involved in the Discipline Committee matter and the expected attendees at the hearing.

Pre-Hearing Conference: A PHC is a meeting that takes place before the hearing for the purpose of narrowing the issues and receiving the Chair's candid opinion of the case, including its strengths and weaknesses.

Prosecutor: Also referred to as the "Prosecution", the Prosecutor acts on behalf of the College and has the responsibility of proving the allegations of professional misconduct.

GLOSSARY OF TERMS



Professional Misconduct: There are various head of professional misconduct that can be alleged in the Notice of Hearing. The *Health Professions Procedural Code* under the *Regulated Health Professions Act, 1991* defines professional misconduct in section 51(1) that applies to all regulated health professionals in Ontario. Ontario Regulation 750/93, under the *Chiropractic Act, 1991*, sets out the head of misconduct that apply to registrants of the College.

Registrant: a professional member of the College who is a chiropractor or a podiatrist.

Summons: A summons is a legal order from the Discipline Committee that requires a witness to attend a hearing to testify or produce documents.
Uncontested Hearing: An uncontested hearing means the Registrant admits all or some of the allegations of professional misconduct in the Notice of Hearing.

Uncontested Hearing: An uncontested hearing means the Registrant admits all or some of the allegations of professional misconduct in the Notice of Hearing.

Without Prejudice: Is used to refer to certain communications between the Prosecution and the Registrant that means that anything discussed on a without prejudice basis cannot be disclosed at the hearing. Without prejudice communications are intended to assist the Parties in reaching resolution of important issues and/or all of the allegations against the Registrant.

