



College of Homeopaths of Ontario
163 Queen Street East, 2nd Floor, Toronto, Ontario, M5A 1S1
TEL 416-862-4780 OR 1-844-862-4780
www.collegeofhomeopaths.on.ca

Office Use Only					
Date Received:					
Staff Reviewer:					
Registration #:					

Quality Assurance Program Requirements Declaration

A Quality Assurance (QA) Program under the *Regulated Health Professions Act, 1991 (RHPA)* is designed to enhance the practice of all members of the profession by non-punitive means. The RHPA, Procedural Code, s. 1(1) defines “quality assurance program” as “a program to assure the quality of the practice of the profession and to promote continuing evaluation, competence and improvement among the members.”¹

The CHO QA program is focused on helping registrants improve their practice and ensure that the varying laws and regulations, practice standards and guidelines impacting the profession of homeopathy are implemented in a consistent and appropriate manner. The QA programs are intended to be instructional, not punitive.

Each registrant must participate on an ongoing basis in the College’s Quality Assurance (QA) program. The requirements, listed below, are mandated by RHPA, and the College’s Quality Assurance Regulation (O. Reg. 32/13).

The CHO QA program includes:

- Conducting a self-assessment of one’s competencies (this is a documented self-reflection activity),
- Completing a learning plan, and
- Participating in a minimum of 15 hours of continuing education and professional development each year.
- Additionally, each registrant may undergo a Peer and Practice Assessment (PPA) with a QA Assessor assigned by the College. PPA is intended to ensure registrants are continuing to maintain their professional knowledge, skill and judgment and to provide registrants with specific guidance to address any deficiencies notes.

One step in administering the program requires all registrants must complete this form of statutory declaration as part of their annual registration renewal with the CHO. Through this declaration registrants confirm that they understand the requirements of the QAP and their responsibility to participate in the program. This declaration should be completed online at the time of renewal, but the declaration may also be done in paper form, signed and mailed to the College. Please print clearly.

The requirements for the CHO QA program are set out in the Health Professions Procedure Code, Schedule 2 of the *Regulated Health Professions Act (RHPA)* and the Quality Assurance Regulation (O. Reg. 32/13) made under the *Homeopathy Act*. The College of Homeopaths of Ontario is a statutory regulatory body created under the authority of the Regulated Health Professions Act, 1991 and the Homeopathy Act, 2007.

¹ Richard Steinecke, A Complete Guide to the Regulated Health Professions Act, Chapter 9, 9-1, October 2010.



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This declaration is to inform you of your obligations under the CHO Quality Assurance Program.

I declare that I have read and acknowledge my obligations under the CHO Quality Assurance Program informed by the Regulated Health Professions Act, 1991 and the College of Homeopaths of Ontario O. Reg. 32/13 as follows:		
i. I understand that I have the obligation to participate every year in the Quality Assurance Program as directed by CHO.		<input type="checkbox"/> acknowledged
ii. I understand that I have the obligation to undertake an annual self-assessment of my professional competencies and to develop, maintain and complete an annual learning plan focused on maintaining and improving the quality of my practice.		<input type="checkbox"/> acknowledged
iii. I understand that I must submit my first annual learning plan to the College by the date specified by the QA Committee.		<input type="checkbox"/> acknowledged
iv. I understand that I have the obligation to complete, on an annual basis, a minimum of 15 hours of continuing education and professional development activities, in order to maintain the knowledge, skill and judgment required to practise the profession in accordance with the standards of practice and ethics set by the College.		<input type="checkbox"/> acknowledged
v. I understand that I am required to keep a detailed and truthful record of my participation in self-assessment, continuing education and professional development activities, along with supporting proof of participation, in the form, manner and for the length of time indicated by the QA Committee.		<input type="checkbox"/> acknowledged
vi. I understand that at the request of the QA Committee, a QA assessor or an employee of the College, I am obliged to provide full copies and supporting details of my self-assessment, continuing education or professional development activities and any other records directed by the QA Committee; and that failing to reply appropriately and within 30 days to a written inquiry or request from the College is considered an act of professional misconduct under Ontario Regulation 315/12 of the Homeopathy Act.		<input type="checkbox"/> acknowledged
vii. I understand when requested by the College and the QA Committee I am obliged to participate in a peer and practice assessment to assess my knowledge, skill and judgment and I have a duty to cooperate with the College and its representatives in fulfilling this duty.		<input type="checkbox"/> acknowledged
viii. I understand that following a peer and practice assessment the College will provide me with a copy of the assessment report and that I have the right to respond to the report.		<input type="checkbox"/> acknowledged
ix. I understand as part of the Peer and Practice Assessment, I have a duty to co-operate with the assigned assessor including: permitting access to my clinic; permitting access to my personal QA Professional Portfolio; providing requested information about patient care records; and conferring with the assessors upon request.		<input type="checkbox"/> acknowledged
x. I further understand that the QA Committee and the College employees (including assessors) are bound to keep information provided by registrants confidential. However, under the RHPA Procedural Code section 80.2(1)4 the QA Committee may disclose the name of the member and allegations against the member to the Inquiries, Complaints and Reports Committee if the Quality Assurance Committee is of the opinion that the member may have committed an act of professional misconduct, or may be incompetent or incapacitated.		<input type="checkbox"/> acknowledged
xi. I understand that in accordance with the College of Homeopaths O. Reg. 315.12 Professional Misconduct regulation, that contravening, by act or omission, a provision of the Act, the <i>Regulated Health Professions Act, 1991</i> or the regulations under either of those Acts may be considered an act of professional misconduct.		<input type="checkbox"/> acknowledged
I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.		
_____	_____	_____
Printed Name of Registrant	Signature of Registrant	Registration #