DRAFT AGENDA

Council Meeting
College of Homeopaths of Ontario

September 25, 2019 from 10:00 a.m. to 3:24 p.m.

365 Bloor Street East, Suite 1606

		ITEM	ACTION	FORMAT	WHO	MIN	TIME
1		**Call to Order**	Information	Verbal	M. Heller	1 min	10:00
2		**Agenda**					
	2.1	Adoption of Agenda	Decision	Written	M. Heller	3 min	10:01
	2.2	Consent Agenda	Decision	Written	B. Ziv	5 min	10:04
3		**Declaration of Conflict of Interest**	Decision	Verbal	M. Heller	1 min	10:09
4		**Approval of minutes**					
	4.1	Meeting minutes dated July 11, 2019	Decision	Written	M. Heller	5 min	10:10
IN CAMERA							
In camera *As permitted by the* Regulated Health Professions Act, 1991*, Schedule 2, section 7.2 there are times when it is appropriate for Council to discuss matters* in camera*. These include matters of public security; financial or personal or other matters of such a nature that it is desirable to avoid public disclosure; information related to a person involved in a criminal proceeding or civil suit; personnel matters or property acquisition; or instructions to be given to or opinions received from legal counsel. A meeting or any portion of a meeting held* in camera *is not open to the public.*							
	4.2	*In camera* meeting minutes dated July 11, 2019	Decision	Written	M. Heller	5 min	10:15
5		**Finances**					
	5.1	Audit and Annual Report	Decision	Written	Auditors	30 min	10:20
	5.2	Statement of Operations	Decision	Written	B. Ziv	10 min	10:50
OPEN SESSION:							
6		**Committee Appointments**	Decision	Written	J. Blanchard	20 min	11:00
7		**Strategic Planning: Goals & Objectives**	Decision	Written	B. Ziv	60 min	11:20
LUNCH						45 min	12:20
8		**Council Evaluation: Next Steps**	Decision	Verbal	B. Ziv	30 min	1:05
9		**Council Development Training: Standards and Guidelines**	Information	To be presented	B. Ziv	60 min	1:35

		ITEM	ACTION	FORMAT	WHO	MIN	TIME
BREAK						10 min	2:35
10		**Reports** 10.1 Registration 10.2 SECA 10.3 Quality Assurance	Information	Verbal	Staff	30 min	2:45
11		**Other Business**	Discussion	Verbal	M. Heller	5 min	3:15
12		**HBS – Preparation Time**	Information	Verbal	M. Heller	2 min	3:20
13		**Adjournment**	Decision	Verbal	M. Heller	2 min	3:22

Next Meeting: Thursday, February 6, 2020 (teleconference)

NOTE:
Please be reminded that all meeting materials, discussions and decisions are confidential to the College and cannot be copied or shared until they are made public.

This is a scent-free environment. Please do not wear scented products to meetings. For more information staff would be happy to provide you with a copy of Health Force Ontario's policy on scent-free work environments. You can also find more information at http://www.ccohs.ca/oshanswers/hsprograms/scent_free.html. Your cooperation is sincerely appreciated and required.

Council Meeting
College of Homeopaths of Ontario (CHO)
Minutes

Thursday, July 11, 2019
163 Queen Street East, Toronto

Present

Council

Bhupinder Sharma	Professional (Chair)
Anna Berger	Professional
Anna Cardozo	Professional
Kerri Flood	Professional
Eden Gajraj	Public
Mark Heller	Public
Paul Joseph	Professional
Gary Kapelus	Public
Sukhdev Kooner	Professional (from item 6 onward)
Kamika Mclean	Public (by teleconference)
Sanjeev Nayyar	Professional
Myrna Tulandi	Public
Guru Dutt Vaid	Professional

Staff

Janet Blanchard	Senior Manager, Quality Assurance, Patient Relations, Communications
Kathryn Harvey	Communications Officer (recorder)
Heidi Mayer	Registration Officer
Basil Ziv	Registrar

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1 Call to Order

The President called the meeting to order at 10:01 a.m., conducted a roll call, and welcomed new professional members Guru Dutt Vaid and Sukhdev Kooner,

2 Adoption of Agenda

2.1 Adoption of Agenda

(Appendix 2.1 Agenda, Council Meeting, July 11, 2019)

A request was made to add the topic of Governance under Other Business.

Motion # 1: To adopt the agenda as amended.
Moved by E. Gajraj, seconded by A. Cardozo

That Council adopt the agenda as amended.
CARRIED

2.2 Adoption of Consensus Agenda

(Appendix 2.2.1 Registration Update)
(Appendix 2.2.2 Quality Assurance Update)
(Appendix 2.2.3 Council Self-Assessment/ Executive Summary)

A request was made to move item 2.2.3 off the consent agenda. It was agreed that the item would be discussed following agenda item 6.

Motion # 2: To adopt the consensus agenda as amended.
Moved by A. Cardozo, seconded by E. Gajraj

That Council adopt the consensus agenda as amended.
CARRIED

3 Declaration of Conflict of Interest
None declared.

4 Approval of Minutes
(Appendix 4.1 Minutes, March 7, 2019 Council meeting)

Motion #3: To approve the minutes of March 7, 2019
Moved by M. Tulandi, seconded by G. Kapelus

That Council approve the minutes of its March 7, 2019 meeting.
CARRIED

Secretary's note:
As permitted by the Regulated Health Professions Act, 1991*, Schedule 2, section 7.2 there are times when it is appropriate for Council to discuss matters* in camera*. These include matters of public security; financial or personal or other matters of such a nature that it is desirable to avoid public disclosure; information related to a person involved in a criminal proceeding or civil suit; personnel matters or property acquisition; or instructions to be given to or opinions received from legal counsel. A meeting or any portion of a meeting held* in camera *is not open to the public.*

Motion # 4: To move *in camera*
Moved by A. Berger, seconded by S. Nayyar

That Council move *in camera* at 10:09 a.m.
CARRIED

6 Council Development Training
Staff presented an overview of key concepts in regulation and public protection.

6.1 Council Self-Assessment
(Consent Agenda Item 2.2.3)

G. Kapelus highlighted the to-do items that arose from the self-evaluation, noting that some were already underway. Next year's evaluation will include some amendments based on this year's results.

7 Long Service Recognition
Commemorative plaques were presented to the President and Registrar, as well as other staff, in recognition of their long service to the College.

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8 President's Report

The outgoing President reported that a submission had been made to the Standing Committee on Social Policy, and a follow-up meeting was held with Chair MPP Nina Tangri. He urged Council to continue these efforts.

The performance review framework will be passed to the new Executive Committee for incorporation into the strategic plan.

9 Election of Officers and Executive Committee

Motion # 3: To appoint scrutineers
Moved by K. Flood, seconded by P. Joseph

That Council appoint as scrutineers Kathryn Harvey and Heidi Mayer and as observer Myrna Tulandi.
CARRIED (M. Tulandi abstaining)

Motion # 4: To appoint the Registrar as Council chair for the duration of agenda item # 9, Elections
Moved by K. Flood, seconded by G. Vaid

That Council appoint the Registrar as Council chair for the duration of agenda item # 9.
CARRIED

Election of President

Four nominations had been submitted for the position of President:

Anna Cardozo
Eden Gajraj
Mark Heller
Sukhdev Kooner (only one supporting signature, so did not qualify)

The candidates accepted their nominations and addressed Council.

Mark Heller was elected President.

Election of Vice-President

Four nominations had been submitted for the position of Vice-President:

Anna Cardozo
Kerri Flood
Guru Dutt Vaid [withdrawn]
Sukhdev Kooner (only one supporting signature, so did not qualify)

The candidates accepted their nominations and addressed Council.

Anna Cardozo was elected Vice-President.

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Election of Treasurer

Three nominations had been submitted for the position of Treasurer:
Guru Dutt Vaid
Mark Heller [withdrawn due to election as President]
Eden Gajraj [withdrawn]

Guru Dutt Vaid was acclaimed as Treasurer.

Election of Other Executive Members – Professional

Four nominations had been submitted for the remaining two professional Executive positions:
Sanjeev Nayyar
Anna Cardozo [withdrawn due to election as Vice-President]
Guru Dutt Vaid [withdrawn due to acclamation as Treasurer]
Anna Berger
Kerri Flood

Each of the three remaining candidates accepted his or her nomination and addressed Council.

Kerri Flood was elected to the Executive Committee.

Election of Other Executive Members - Public

Gary Kapelus was acclaimed to the Executive Committee and addressed Council.

Executive Committee as of July 11, 2019:

President: Mark Heller
Vice-president: Anna Cardozo
Treasurer: Guru Dutt Vaid
Member (professional): Kerri Flood
Member (public): Gary Kapelus

Motion # 5: To close the election
Moved by G. Kapelus, seconded by A. Cardozo

That Council deem the 2019 election of Executive Committee members closed.
CARRIED

Motion # 6: To destroy the ballots
Moved by A. Cardozo, seconded by P. Joseph

That the ballots cast in the 2019 election of Executive Committee members be destroyed.
CARRIED

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10 Committee Appointments

Motion # 6: To postpone this item to the next Council meeting.
Moved by M. Heller, seconded by A. Cardozo

That the issue of committee appointments be postponed for discussion at the next Council meeting.
CARRIED

11 Strategic Directions – Action Plan

11.1 Setting Priorities: Survey Results
Staff presented the results of a survey of Council members designed to clarify priorities for the coming year.

11.2 Next Steps
Council directed the Executive Committee to prepare a document for consideration at the September Council meeting.

12 Meeting Schedule
By consensus, Council directed staff to poll for dates for meetings over the coming year, with consideration given to fixed annual requirements.

13 Other Business
In response to a question, staff reviewed the security in place to protect Council documents.

14 HBS Meeting and Preparation Time

One full day preparation, one full day meeting
Start time: 10:01 a.m.
End time: 3:51 p.m.

15 Adjournment

Motion # 10: To adjourn
Moved by G. Kapelus, seconded by M. Tulandi

That Council adjourn at 3:51 p.m.
CARRIED

The Chair agrees these minutes are an accurate reflection of the meeting.

Bhupinder Sharma, Chair **Date**

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AGENDA ITEM 6.1 ON SEPTEMBER 25 AGENDA
DEFERRED FROM JULY 11

AGENDA ITEM # 10
APPENDIX 10.1

COLLEGE OF HOMEOPATHS OF ONTARIO
REPORT FORM

MEETING/DATE:	**COUNCIL, JULY 11, 2019**	**DECISION**	**X**
		DISCUSSION	□
		INFORMATION	□
DATE:	**JULY 11, 2019**		
ITEM NAME:	**Committee Appointments**		
PRESENTED BY:	**B ZIV / J BLANCHARD**		

OBJECTIVE OF THIS REPORT (relevance to the business of Council, potential impact/outcome of decision):

1. To put forward a proposed slate of committee appointments for 2019/2020.

STRATEGIC DIRECTIONS: This initiative fits with the strategic direction of the College, which is a reflection of the fundamental components of our mandate. In the public interest the CHO will:

X **Infrastructure**
Establish an infrastructure that allows for the efficient and effective regulation of the profession of homeopathy in Ontario.

X **Protection of Public**
Protect, promote and advance homeopathy through the development of bylaws, regulations, standards, guidelines, etc.

□ **Membership**
The College can only be truly effective if it has the support of the profession; something that requires consultation and communication. This priority addresses the need for the development of content, information and education to be provided to members.

X **Transparency**
Decisions must abide by the transparency principles adopted by the College in November 2014.

GUIDING LEGISLATION:
RHPA, 1991
CHO Bylaws Section 13. Specific Composition and Selection of Committees

LINK TO CURRENT/FUTURE OPERATIONAL STRUCTURE:
Council members are assigned to committees and panels on an annual basis, usually in the Spring.

BACKGROUND (history/pertinent info/stakeholder groups consulted/government directives/research findings/best practices. When conducting research provide full references including web links, document title, author, source, page number).:

Registration Committee
Eden Gajraj (Public)
Gary Kapelus (Public)
Anna Berger (Professional)
Paul Joseph (Professional)
Sanjeev Nayyar (Professional)

Registration Committee Appeals Panel
Kamika McLean (Public)
Myrna Tulandi (Public)
John Millar (Professional)
Mahbiz Rahbar-Azad (Professional)
Bhupinder Sharma (Professional)

Curriculum Assessment Panel
Eden Gajraj (Public)
Gary Kapelus (Public)
Anna Berger (Professional)

Quality Assurance Committee
Eden Gajraj (Public)
Gary Kapelus (Public)
Anna Berger (Professional)
Anna Cardozo (Professional)
Kerri Flood (Professional)
Paul Joseph (Professional)
Sukhdev Singh Kooner (Professional)
Sanjeev Nayyar (Professional)
Gurudutt Vaid (Professional)

Governance Panel
Mark Heller (Public)
Gary Kapelus (Public)
Anna Cardozo (Professional)
Sanjeev Nayyar (Professional)

Patient Relations Committee
Kerri Flood (Professional)
Sukhdev Singh Kooner (Professional)
Mark Heller (Public)
Kamika McLean (Public)

Inquiries, Complaints and Reports Committee
Myrna Tulandi (Public)
Kerri Flood (Professional)
Paul Joseph (Professional)
Kamika McLean (Public)
Anna Berger (Professional)

KEY CONSIDERATIONS:

1. Complementary skill sets for each committee.

RESOURCE IMPLICATIONS:

1. Time and per diems for training and orientation.

DEADLINES AND NEXT STEPS:

1. Committee orientation will follow to ensure committees are up and running as expediently as possible.

OPTIONS:

1. Approve new slate of committee appointments as presented.
2. Approve new slate of committee appointments with amendments.
3. Reject new slate of committee appointments.
4. Refer back to the Executive committee with specific direction for changes.

RECOMMENDATIONS:

1. Approve new slate of committee appointments as presented.

RESOLUTION:

BE IT RESOLVED THAT COUNCIL APPROVE THE 2019/2020 COMMITTEE APPOINTMENTS SLATE AS PRESENTED.

Committee Assignments
Sep-19

College of Homeopaths of Ontario

	Name		Executive	Registration	Curriculum Assessment	Quality Assurance	Patient Relations	ICRC	Ad Hoc Advisory	Governance	Total
1	Eden Gajraj	Pub	–	♦	♦	♦	–	–	–	–	3
2	Mark Heller Ex-Officio to all committees	Pub	♦	–	–	–	♦	–	–	♦	3
3	Gary Kapelus	Pub	♦	♦	–	♦	–	–	–	♦	4
4	Kamika McLean	Pub	–	♦	–	–	♦	♦	–	–	3
5	Myrna Tulandi	Pub	–	♦	–	–	–	♦	–	–	2
6	Anna Berger	Prof	–	♦	♦	♦	–	♦	–	–	4
7	Anna Cardozo	Prof	♦	–	–	♦	–	–	–	♦	3
8	Kerri Flood	Prof	♦	–	–	♦	♦	♦	–	–	4
9	Paul Joseph	Prof	–	♦	–	♦	–	♦	–	–	3
10	Sukhdev Singh Kooner	Prof	–	–	–	♦	♦	–	–	–	2
11	Sanjeev Nayyar	Prof	–	♦	–	♦	–	–	–	♦	3
12	Bhupinder Pal Sharma	Prof	♦	♦	–	–	–	–	–	–	2
13	Gurudutt Vaid	Prof	♦	–	–	♦	–	–	–	–	2
	Registrar and Staff										
	Basil Ziv		♦	♦	♦	♦	♦	♦	♦	♦	
	Janet Blanchard			♦	♦	♦	♦			♦	
	Kathryn Harvey		♦				♦	♦	♦		
	Heidi Mayer			♦	♦		♦				

Considerations: Skill set based on matrix, balance, requirements, fairness, expressed interest, CHO requirements

College of Homeopaths of Ontario

Overview of CHO Professional Practice Standards & Guidelines

September 2019

Overview

1. Why have professional practice standards?
2. Introduction to regulatory framework behind standards
3. Standards and Guidelines overview
4. Questions and Answers

Standards & Guideline Development

Purpose and Use of the Professional Practice Standards and Guidelines

- Educational to increase understanding of the requirements of the legislative requirements;
- Prescriptive to increase understanding of the specific steps for implementation.

Functions, including:

Public Information: Providing information to the public and patients and/or their authorized representatives regarding the services and behaviour that can be expected from a Registrant of the College.

Registrants of the College: Informing Registrants of the principles and criteria which underlie the standards of practice and behaviour of the profession and providing guidelines which Registrants may use in determining best practices. These documents help future Registrants uphold their professional obligations in a regulatory environment.

College Committees: Assisting committees of the College to carry out their work. Some of the College's statutory committees are required to assess the practice of Registrants in the course of the College fulfilling its mandate to protect the public. The principles, standards, and guidelines described herein serve as a basis for ongoing assessment. For example, the Quality Assurance Committee employs standards when assessing the practice of individual Registrants and uses the guidelines to help Registrants move towards best practices.

Homeopathy Profession: Promoting ongoing discussion and education among homeopaths, ultimately leading to improvements in the quality of care and best practices for homeopathic care.

Regulatory Framework

4

Purpose of Health Professional Regulation

The *Regulated Health Professions Act*, *1991*, and health profession Acts (i.e. the *Homeopathy Act*) provide a common framework for Ontario's regulated health professions, incorporating a number of underlying principles, including:

- As a primary principle, advance the **public interest;**
- Protect the public from **harm** and unqualified, incompetent or unfit providers;
- Promote high quality health care services and **accountability** of health care professionals;
- Promote access to health care professionals of choice;
- Promote inclusion of all styles of practice provided public is protected;

Regulations

Professional Misconduct Regulation

- Professional misconduct is the act of failing to do something, or doing something that is a breach of accepted ethical or professional behaviour.
- The Professional Misconduct Regulation outlines those acts which constitute misconduct. Focus is on the protection of the public.
- Addresses topics such as advertising, informed consent, conflict of interest, record keeping, funding for therapy or counseling for patients sexually abused by members, etc.
- Regulation 315/12 was granted approval by the Government of Ontario and published in October 2012.
- Regulations are subordinate to the *Homeopathy Act, 2007*.
- Regulation available online at www.e-laws.on.ca
- Supported by professional standards, guidelines and policies.

The Code

Regulated Health Professions Act, 1991, Health Professions Procedural Code (Schedule 2)

Professional misconduct

51 (1) A panel shall find that a member has committed an act of professional misconduct if,

(a) the member has been found guilty of an offence that is relevant to the member's suitability to practise;

(b) the governing body of another health profession in Ontario, or the governing body of a health profession in a jurisdiction other than Ontario, has found that the member committed an act of professional misconduct that would, in the opinion of the panel, be an act of professional misconduct under this section or an act of professional misconduct as defined in the regulations;

(b.0.1) the member has failed to co-operate with the Quality Assurance Committee or any assessor appointed by that committee;

(b.1) the member has sexually abused a patient; or

(c) the member has committed an act of professional misconduct as defined in the regulations. 1991, c. 18, Sched. 2, s. 51 (1); 1993, c. 37, s. 14 (1); 2007, c. 10, Sched. M, s. 39 (1); 2017, c. 11, Sched. 5, s. 19 (1).

O. Reg. 315/12 Professional Misconduct

Homeopathy Act, 2007
ONTARIO REGULATION 315/12
PROFESSIONAL MISCONDUCT
Consolidation Period: From April 1, 2015 to the e-Laws currency date.
No amendments.

Acts of misconduct

1. The following are acts of professional misconduct for the purposes of clause 51 (1) (c) of the Health Professions Procedural Code:

1. Contravening, by act or omission, a standard of practice of the profession or failing to maintain the standard of practice of the profession.
2. Abusing a patient or a patient's representative verbally, physically, psychologically or emotionally.
3. Doing anything to a patient for a therapeutic, preventative, palliative, diagnostic or other health-related purpose except,
   i. with the informed consent of the patient or the patient's authorized representative, or
   ii. as required or authorized by law.
4. Failing to reply appropriately to a reasonable request by a patient or a patient's authorized representative for information respecting a homeopathic assessment or treatment provided or recommended by the member.
5. Giving information about a patient to a person other than the patient or the patient's authorized representative except with the consent of the patient or the authorized representative or as required or authorized by law.

O. Reg. 315/12 Professional Misconduct

6. Discontinuing professional services that are needed unless the discontinuation would reasonably be regarded by members as appropriate having regard to,
   i. the member's reasons for discontinuing the services,
   ii. the condition of the patient,
   iii. the availability of alternate services, and
   iv. the opportunity given to the patient to arrange alternate services before the discontinuation.
7. Recommending or providing treatment that the member knows or ought to know is unnecessary or ineffective.
8. Attempting to treat a condition that the member knows or ought to know he or she does not have the knowledge, skills or judgment to treat.
9. Failing to advise a patient or the patient's authorized representative to consult another member of a health profession within the meaning of the *Regulated Health Professions Act, 1991*, where the member knows or ought to know that the patient requires a service that the member does not have the knowledge, skills or judgment to offer or is beyond his or her scope of practice.
10. Performing a controlled act that the member is not authorized to perform.
11. Failing to supervise a person in accordance with the standards of practice of the profession.

O. Reg. 315/12 Professional Misconduct

12. Permitting, counselling or assisting a person who is not a member to hold himself or herself out as a member of the profession.
13. Permitting, counselling or assisting a person to perform a controlled act, when the person is not authorized to perform a controlled act.
14. Failing to advise a patient, a patient's authorized representative or a member of the public, when requested, of his or her right to file a complaint with the College.
15. Failing to provide a patient, a patient's authorized representative or a member of the public, when requested, with the address and telephone number of the College.
16. Acting or being in a conflict of interest in one's professional capacity.
17. Issuing an invoice, bill or receipt for services that the member knows or ought to know is false or misleading.
18. Charging a fee for a homeopathic treatment or service that is not provided or for a homeopathic treatment or service that is not performed. This provision does not apply to a fee for an appointment that was cancelled without reasonable notice.
19. Failing to advise a patient or a patient's authorized representative, prior to providing a service, of the fee to be charged for the service or of any penalties that will be charged for late payment of the fee.

O. Reg. 315/12 Professional Misconduct

20. Charging a block fee.
21. Failing to itemize an account for professional goods or services provided to a client.
22. Breaching, without reasonable cause, an agreement with a patient or a patient's authorized representative relating to professional services for the patient or fees for such services.
23. Failing to keep records in accordance with the standards of the profession.
24. Signing or issuing, in his or her professional capacity, a document that the member knows or ought to know contains a false or misleading statement.
25. Falsifying a record relating to the member's practice.
26. Making a claim about a homeopathic treatment, other than a claim that can be supported as reasonable professional opinion.
27. Using or permitting the use of a testimonial from a patient, former patient or other person in the advertising of the member or his or her practice.
28. Permitting the advertising of the member or his or her practice in a manner that is false or misleading.
29. Influencing a patient or the patient's authorized representative to change the patient's will or other testamentary instrument.

O. Reg. 315/12 Professional Misconduct

30. Using a term, title or designation in respect of the member's practice that is not authorized by the College.
31. Failing to use the title designated by the College while acting in a professional capacity.
32. Using any term, title or designation indicating or implying specialization in an area or areas of practice of the profession unless the term, title or designation is authorized by the College.
33. Practising the profession or offering to provide homeopathic services using a name other than the member's name as entered in the register.
34. Failing, without reasonable cause, to provide a report or certificate relating to a treatment performed by the member within a reasonable time to a patient or the patient's authorized representative after the patient or his or her authorized representative has requested such a report or certificate.
35. If the member intends to close his or her practice, failing to take reasonable steps to give appropriate notice of the intended closure to each patient for whom the member has primary responsibility or failing to,
    i. ensure that each patient's records are transferred to the member's successor or to another member, if the patient so requests, or
    ii. ensure that each patient's records are retained or disposed of in a secure manner.

O. Reg. 315/12 Professional Misconduct

36. Failing to promptly report to the College an incident of unsafe practice by another member.
37. Practising the profession while the member's ability to do so is impaired or adversely affected by any condition or dysfunction which the member knows or ought to know impairs or adversely affects his or her ability to practice.
38. Contravening, by act or omission, a provision of the Act, the *Regulated Health Professions Act, 1991* or the regulations under either of those Acts.
39. Contravening, by act or omission, a law if,
    i. the purpose of the law is to protect or promote public health, or
    ii. the contravention is relevant to the member's suitability to practise.
40. Contravening, by act or omission, a term, condition or limitation on the member's certificate of registration.
41. Practising the profession while the member's certificate of registration has been suspended.
42. Directly or indirectly benefiting from the practice of the profession while the member's certificate of registration is suspended unless full disclosure is made by the member to the College of the nature of the benefit to be obtained and prior approval is obtained from the Executive Committee.
43. Failing to comply with an order of a panel of the College.

O. Reg. 315/12 Professional Misconduct

44. Failing to appear before a panel of the Inquiries, Complaints and Reports Committee to be cautioned.
45. Failing to carry out or abide by an undertaking given to the College or breaching an agreement with the College.
46. Failing to reply appropriately and within 30 days to a written inquiry or request from the College.
47. Selling or assigning any debt owed to the member for professional services. This does not include the use of credit cards to pay for professional services.
48. Engaging in conduct or performing an act relevant to the practice of the profession that, having regard to all the circumstances, would reasonably be regarded by members as disgraceful, dishonourable or unprofessional.
49. Engaging in conduct that would reasonably be regarded by members as conduct unbecoming a member of the profession.
50. Failing to make reasonable attempts to collaborate with the patient's other relevant health care providers on the care of the patient where such collaboration is necessary for the patient's health, unless the patient refuses to consent to the collaboration. O. Reg. 315/12, s. 1.

2. OMITTED (PROVIDES FOR COMING INTO FORCE OF PROVISIONS OF THIS REGULATION. O. Reg. 315/12, s. 2.

ICRC DISCIPLINE COMMITTEE

15

Standard & Guideline Development

16

Standards & Guideline Development

Developed by the Inquiries, Complaints and Reports Committee

- Between 2012 and 2013
- Committee comprised of two public members and three professional members
  - Whitney Collins (Chair), professional
  - Bhupinder Sharma, professional
  - Kathy Desjardins, professional
  - Maggi Martin, public
  - John Curran, public

Questions asked

- Does this document address a regulatory matter?
- Does this document do enough to protect the public?
- Does this standard suit/fit a homeopathic practice environment?
- What in this document will be controversial?
- Is this document best suited as a standard, guideline or policy?

CHO professional practice standards and guidelines do not address matters of clinical care.

Standards & Guideline Development

Regulations
Once created and approved by the Government, regulations are subordinate to the *Homeopathy Act, 2007*. They contain details that support the guiding principles of the legislation and may only exist pursuant to legislation. Regulations address topics such as registration, professional misconduct, quality assurance, advertising, informed consent, conflict of interest, record keeping, funding for therapy or counseling for patients sexually abused by members, examinations, etc. Regulatory proposals require review, feedback and approval by provincial government before coming into effect. They are time consuming to develop and lengthy to approve.

Professional Practice standards describe what a consensus of prudent practitioners would do in certain circumstances. The requirement to maintain the standards of practice is supported by the Professional Misconduct Regulation under the *Homeopathy Act, 2007,* and the *Regulated Health Professions Act, 1991*. Practice standards describe the generally accepted standards on recurring and /or significant issues within a professional practice environment.

Guidelines are not mandatory; they are suggestions that will assist the prudent practitioner to reach the level of best practice.

18

Standards & Guideline Development

Integrates:

- Professional Misconduct Regulation
- Entry-to-Practice Competency Profile for Homeopaths practising in Ontario
- Other pieces of legislation which will govern homeopathic practice following regulation including
  - *Regulated Health Professional Act, 1991*
  - *Homeopathy Act, 2007*
  - *Child and Family Services Act, 1990*
  - *Long Term Care Homes Act*, 2007, S.O. 2007, Chapter 8
  - *Retirement Homes Act*, 2010, S.O. 2010, Chapter 11
  - *Personal Information Protection and Electronic Documents Act* (PIPEDA)
  - *Personal Health Information Protection Act* (PHIPA)
  - *Health Care Consent Act, 1996*
  - Unfair or Deceptive Acts or Practices Regulation
  - *Ontario Human Rights Code*
  - *Canadian Charter of Rights and Freedoms*

Standards & Guideline Development

Referenced Other Regulatory Health Colleges:

- Board of Directors of Drugless Therapy – Naturopathy
- College of Chiropodists of Ontario
- College of Chiropractors of Ontario
- College of Denturists of Ontario
- College of Dental Hygienists of Ontario
- College of Massage Therapists of Ontario
- College of Medical Laboratory Technicians of Ontario
- College of Midwives of Ontario
- College of Nurses of Ontario
- College of Occupational Therapists of Ontario
- College of Opticians of Ontario
- College of Optometrists of Ontario
- College of Physiotherapists of Ontario
- College of Physicians and Surgeons of Ontario
- College of Respiratory Therapists of Ontario
- Ontario College of Teachers
- Transitional Council College of Naturopaths of Ontario

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Standard & Guideline Development

	Standards
1	Standard on Accepting New Patients
2	Standard on Communicating an Assessment
3	Standard on Compounding
4	Standard on Concurrent Treatment
5	Standard on Accepting Delegation of a Controlled Act
6	Standard on Advertising
7	Standard on Discontinuing Professional Services and Refusing Treatment
9	Standard on Fees and Billing
10	Standard on Informed Consent
11	Standard on Leaving a Practice
12	Standard on Mandatory Reporting
13	Standard on Homeopathic Prescription
15	Standard on Scope of Practice
16	Standard on Therapeutic Relationships and Professional Boundaries
17	Standard on Competence
18	Standard on Medical Emergency Preparedness
19	Standard on Vaccination

Standard & Guideline Development

Standards

8 Standard on Dual Registration (not approved)

14 Standard on Principles of Professional Ethics (now Bylaw Schedule 4)

Guidelines

1 Guideline on Record Keeping and Privacy of Information

2 Guideline on Electronic Communication and Social Media

3 Guideline on Inter-Professional Collaboration

4 Guideline on Title and Credential

5 Guideline on Patient Communication and Physical Examination

6 Guideline on Infection Control

Standard & Guideline Overview Part 1

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Standards & Guidelines

Review of Standards

#1. Accepting New Patients

#3. Compounding

#13. Homeopathic Prescription

#19. Vaccination

#4. Concurrent Treatment

#7. Discontinuing Professional Services and Refusing Treatment

#9. Fees and Billing

#6. Advertising

Review of Guidelines

#5. Patient Communication and Physical Examination

Standard on Accepting New Patients

Policy: Abide by Ontario Human Rights Code.

Intent: Provides guidance about accepting new patients

Description:

- It is not appropriate to screen potential patients in a manner which may results in discriminatory actions.
- Refer patients as promptly as possible when care outside individual clinical competence or professional scope of practice.
- Make decisions to accept or refuse new patient in good faith.
- Patients may be given priority based on need.

Standard on Compounding

Policy: Ensure patient protection through safe, ethical and competent practice.

Intent: Provide guidance on safe, ethical and competent compounding.

Description:

- Products are regulated under federal legislation under the Natural Health Products Regulation (NHPR).
- Compounded products on an individual basis for patients not covered by NHPR.
- Compounding must be done safely, in a clean environment.
- Compounding must be done by individual who has the necessary knowledge, skill and judgement.
- Record keeping is done by record keeping standards.

Standard on Homeopathic Prescription

Policy: Registrants are required to practice in scope of practice and abide by Natural Health Products Act.

Intent: Guidance on safe, ethical and competent prescription

Description:

- assess patient and select appropriate remedy
- provide a written prescription
- monitor and document patient's response
- keep records in accordance with record keeping guideline

Standard on Vaccination

Policy: Vaccination is not within the homeopathic scope of practice. A nosode is not a vaccination. Currently there is no homeopathic remedy which may be considered a substitution for vaccination. A Registrant shall not advise his or her patient against vaccination.

Intent: Provide clean direction to registrants.

Description:

- Advise the patient that the performance of the act is outside the Homeopathic scope of practice and the patient should consult with a health-care professional who has the act within his/her scope of practice; Do not put patient at risk of harm.
- Respond in a professional, accurate and balanced manner
- Encourage the patient to be an active participant in his/her own health-care which allows the patient to make fully informed decisions concerning his/her health care.

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Standard on Concurrent Treatment

Policy: Concurrent care must be provided in the best interest of the patient and shall not put the patient in a situation of conflict.

Intent: Provide guidance on expectation of concurrent treatment.

Description:

- Care must be appropriate for the patients needs.
- Provided following consultation with the other health care professional.
- Collaboration and communication may occur only with the patient's consent.
- Never comment on the care or qualifications of the other provider.
- Communicate with the other provider about course of treatment and outcomes.

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Standard on Discontinuing Professional Services & Refusing Treatment

Policy: Must provide reasonable grounds for discontinuing services or refusing care.

Intent: Provide guidance on grounds for discontinuing services or refusing care.

Description:

- Clinical competence and Scope of Practice.
- Conflict of Interest.
- Patient/Practitioner Agreement.
- Referrals
- Discontinuing Service
  - Provide verbal and written reasons for discontinuing services
  - Provide time for the patient to find another provider
  - Settle the patient's account

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Standard on Fees and Billing

Policy: Individual clinics must set policies on fees and billing practices. These policies must be consistent with this standard.

Intent: Provide guidance on invoices and billing.

Description:

- Associations may set recommended fee schedules.
- Individuals must post fees.
- Discounts are acceptable, must be accessible to all patients.
- Regulatory college provides standard on how to apply fair and transparent billing and the communication of fees.

Standard on Advertising

Policy: Supports registrants' use of appropriate advertising to communicate the type and availability of service so that patient can make informed choices based on their needs.

Description:

- Advertising must be accurate, ethical and comprehensible to the intended audience.
- Advertising must also be professionally appropriate.
- Must contain factual information independent of personal feelings, beliefs opinions or interpretations. Statements must be verifiable.
- Standard applies to all advertisements and websites. Websites are seen as an advertisement.
- Standard provides specific list of information which can and can not be included in advertisements.

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Guideline on Patient Communication & Physical Examinations

Guideline on Patient Communication & Physical Examinations

Intent: provide guidance about expectations relating to communications and physical examination

Description:

Communication – words, body language, and listening skills

Physical Contact & Examination:

- work within scope of practice – no controlled acts
- explain what you are doing
- avoid unnecessary touch – movement is deliberate & efficient
- use gloves as appropriate
- respect privacy
- if disrobing is required – obtain consent

Standard & Guideline Overview Part 2

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Standards & Guidelines

Review of Standards

#2. Communicating a Homeopathic Assessment

#5. Accepting Delegation of a Controlled Act

#10. Informed Consent

#12. Mandatory Reporting

#15. Scope of Practice

#16. Therapeutic Relationship and Professional Boundaries

Review of Guidelines

#1. Record Keeping and Privacy of Information

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Standard on Communicating a Homeopathic Assessment

Policy: to promote informed decision-making on behalf of the patient, a Registrant must communicate the results of the homeopathic assessment and obtain informed consent prior to proceeding with a treatment plan.

Intent: to advise Registrants on how to effectively, ethically and competently communicate a homeopathic assessment to their patients.

Description:

To avoid communicating a homeopathic assessment inappropriately, homeopaths need to ask themselves:

1. Am I giving the patient a name or label for the disease or disorder that is the root cause of the symptoms?
2. What does the patient already know about his or her disease or disorder, if they have already received a diagnosis?

Standard on Communicating a Homeopathic Assessment

These questions are important to determine the boundaries of the conversation a homeopath may have with patients. As a homeopath you must know that:

1. **It is legal** for a homeopath to formulate a homeopathic diagnosis or communicate a diagnosis to other health care providers; however, homeopath's cannot inform the patient of the diagnosis unless they have a delegation to do so.
2. **It is legal** for homeopaths to share the results of assessments with the patient unless the result itself is confirmation and labeling of a disease or disorder, e.g. a Hepatitis C Positive laboratory result.
3. **It is legal** to tell the patient what markers or symptoms they display which have led to the recommended treatment plan or medicine.
4. **It is not legal** for homeopaths to inform and discuss with patients a disease or medical condition that they (the patient) do not know about. However, it is legal for homeopaths to discuss a formerly communicated diagnosis of a disease or medical condition, of which the patient is already aware.

Standard Accepting Delegation of a Controlled Act

Policy: The CH allows Registrants to accept the delegation of a controlled act if he or she has gained the knowledge, skills and judgment necessary to perform the act. Informed consent must be obtained from the patient or his/her representative in order to perform the controlled act.

Description:

- An order or delegation may be given either orally or in writing;
- The patient must be informed
- The patient must be given the opportunity to provide their expressed informed consent prior to the Registrant proceeding with the order.
- he delegator is responsible for the quality of care received by the patient.
- Both the delegator and the Homeopath are responsible for getting informed consent from the patient.

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Standard on Informed Consent

Intent: to facilitate appropriate care of patients, by defining the College's approach and statutory requirements with respect to information provision, decision-making and the relationship between the HOM and patient.

Description:

Every registrant of the College is required to ensure that patient consent to any assessment or treatment or to a course of treatment follows the Health Care Consent Act, 1996. S.O. 1996 c. 2, Sched. A, contains a number of provisions relating to consent, including Ss.11 (1) which defines the requisite elements of consent to treatment as:

1. The consent shall relate to the treatment.
2. The consent shall be informed.
3. The consent shall be given voluntarily.
4. The consent shall not be obtained through misrepresentation or fraud.
5. Evidenced in a written form signed by the patient or otherwise documented in the patient record when appropriate and when a new complaint has been described.

Standard on Mandatory Reporting

Intent: to advise Registrants with respect to the requirements of mandatory reporting.

Description:

- There are various situations wherein a Registrant will have a legislative duty to report verbal, physical, psychological, emotional or sexual abuse of a patient. It is expected that the Registrant will report as required.
- Includes reporting
  - - within own profession and other health care professionals – professional negligence, misconduct, abuse, incompetence, incapacity
  - Employees and partners - Professional Misconduct, Incompetence, Incapacity or Sexual Abuse
  - Senior citizen or elder abuse, child abuse or neglect,
  - Duty to Warn in Emergency or Urgent Care Situations

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Standard on Scope of Practice

Intent: provide a broad understanding for Registrants and the public of the homeopathic scope of practice under RHPA. Also provides a frame of reference for the tasks that a given profession undertakes, regardless of whether they are controlled acts or fall within the public domain.

Description:

- Individual Versus Professional Scope of Practice
- Public Domain Versus Scope of Practice
- Defines homeopathic techniques and adjunct therapies
- Provides guidelines on defining and provide difference care offerings, and guidelines to determining when homeopathic care is appropriate
- Reviews RHPA 14 controlled acts
- Patient treatment as supportive care to patients undergoing a controlled act procedure

Standard on Therapeutic Relationships and Professional Boundaries

Intent: to advise on how to maintain therapeutic relationships and professional boundaries with patients.

Description:

- How to identity and understand common areas of risk
- How to mitigate or avoid risk
- Addresses common boundary issues
  - Patient care (e.g. appropriate hands on treatment; affection; respecting cultural differences; tone, communication, etc...)
  - Access to and/or disclosure of information (e.g. federal and provincial privacy acts, code of ethics obligations related to patient confidentiality, etc...)
  - Gifts, services and financial relationships (e.g. understanding the motivation behind gift giving, respecting the timing of the gift and the cost of the gift, respecting patient vulnerability, etc...)
  - Dual relationships (e.g. business relationships with patients; understanding when the patient ceases to be a patient; treating family members, etc...)

Guideline on Record Keeping and Privacy of Information

Intent: To assist Registrants in developing, achieving and maintaining best practices in record keeping and patient privacy of information.

Description: addresses

- Registrant discretionary
- Requirements for patient
- Accountability - records are critical in a Registrant's accountability for services. Patients, employers, payers and the CHO will rely heavily on a Registrant's record in assessing the adequacy of a Registrant's conduct or competency if the occasion arises.
- Tips for Good Record Keeping Records must be an accurate and honest account of what occurred and when it occurred with attention to clarity and legibility.

Guideline on Record Keeping and Privacy of Information

Description: continued

- Correcting Records guidelines
- Storage of Records including retention period, security and confidentiality, PHIPA and PIPEDA rules
  - Personal Health Information Protection Act (PHIPA), 2004
  - Personal Information Protection and Electronic Documents Act (PIPEDA), 2000
- Confidentiality of and Access to Records Registrants adhere to the PHIPA, Health Information Custodian (HIC), rules of information disclosure, a patients' rights and registrant obligations

Standard & Guideline Overview Part 3

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Standards & Guidelines

Review of Standards:

11. Leaving a Practice

14. Principles of Professional Ethics (Bylaw Schedule 4)

17. Competence

18. Medical Emergency Preparedness

Review of Guidelines:

2. Electronic Communication and Social Media

3. Inter-Professional Collaboration

4. Title and Credential

6. Infection Control

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Standard on Leaving a Practice

Policy: When leaving a practice, Registrants of the College of Homeopaths of Ontario are expected to ensure appropriate continuance of patient care and proper stewardship of patient records.

Intent: The intent of this standard is to provide guidance to Registrants on their obligations when leaving, selling or closing a practice.

Description:

- Obligation to notify patients.
- Obligation to safeguard patient records in accordance with standards.
- Must transfer care and patient files to another practitioner, a copy may go to the patient, or files securely stored.
- With the death of a registrant estate has obligation to manage files.

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Standard on Principles of Professional Ethics

Policy: The College of Homeopaths of Ontario requires each Registrant to manage their practice and professional activities in an ethical, honest and transparent manner.

Intent: In a broad fashion, outline the obligations to which Registrants are expected to adhere in their relationships with the public, patients, fellow practitioners and other health care professionals.

Description:

- This demonstration transpires in fulfilling one's duties and obligations to society in general, individual patients, professional colleagues, the public and regulatory bodies.

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Standard on Competence

Policy: The College of Homeopaths of Ontario requires proof that each Registrant meet and maintain their professional competency throughout their career. The assessment of competences is based on the latest version of the *Competency Profile for Entry-to-Practice Homeopaths Practising in Ontario*. Registrants are expected to practice within their individual level of competency and to act appropriately when a patient requires care outside of the homeopaths scope of practice or individual level of competence.

Intent: The intent of this standard is to provide guidance to registrants on maintaining acceptable levels of competent practice throughout their career.

Description:

1. Each registrant is responsible for evaluating and maintaining his or her competence.
2. The registrant shall perform within his or her scope of practice, education and experience.
3. The registrant will refer or assist patients to find the necessary professional help when the condition of the patient falls outside the registrant's scope of practice, education or experience.
4. The registant shall not engage in the practice of homeopathy while his or her ability to do so is impaired.
5. The registrant shall ensure that he or she meets the quality assurance requirements outlined in the Quality Assurance Regulation and Quality Assurance Program of the College.

Standard on Medical Emergency Preparedness

Policy: To promote patient care through the Registrant's annual risk management assessment of the medical emergency preparedness of his/her practice and ensure documentation of policy for appropriate and rapid response to medical emergencies.

Intent: The intent of this standard is to advise Registrants with respect to the requirements for medical emergency preparedness in their practice.

Description:

- Assessment of level of risk with the practice.
- Document procedures and knowledge.
- Maintain currency and competence in professional CPR and standard first aid.

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Guideline on Electronic Communication & Social Media

Intent: To provide guidance to registrants and the public about CHO's expectations concerning electronic communication and social media.

Description:

- Respect therapeutic and professional boundaries
- Respect patient confidentiality and privacy
- Private vs. Professional
  - There is a distinction between the professional and private life of a homeopath. Practitioners are individuals with private lives, however, due care should be exercised.
  - Registrants should maintain a sense of professionalism at all times – in their personal and professional lives.

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Guideline on Electronic Communication & Social Media

Description:

- **Criminal and Civil Law Implications**
  - Inappropriate use of electronic communication and social media can also result in a registrant being criminally charged and convicted or facing civil action. Examples of actions and resulting charges are:
  - making inappropriate online comments that lead to civil actions, such as defamation
  - disclosing confidential information about patients and colleagues, thus breaching privacy policies and legislation
  - breaching a court-ordered publication ban
  - inciting hatred from identifiable groups
  - using technology to harass a patient, colleague or others, contrary to the Criminal Code
  - exchanging or forwarding unauthorized photos, videos or audio recordings of patient cases leading to charges of violation of privacy.
- **Minimizing the Risks: Advice to Registrants**
  - Interact with patients appropriately
  - Understand privacy concerns
  - Act professionally

Guideline on Electronic Communication & Social Media

Description:

- **Important questions to ask yourself**
  - When interacting with patients electronically am I using electronic communication and social media to enhance their healthcare or to satisfy a personal need?
  - What are my reasons for sharing this information with a patient – are they professional or are they personal?
  - Is this picture or comment something I would be comfortable with my patients, other professionals, my employer or the College seeing?
  - Would my peers or supervisors/employer consider what I have posted as reasonable and professional?
  - Would I communicate this way in my practice?
  - Are the photos, videos or audio recordings I am posting susceptible to misrepresentation or manipulation?
  - Am I keeping current in my awareness and knowledge of social media technology developments to protect myself from misuse?

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Guideline on Interprofessional-Collaboration

POLICY: Registrants of the College of Homeopaths of Ontario are expected to practice within their individual scope of practice based on their level of competence, and to collaborate, when appropriate and with consent, in the best interest of the patient.

INTENT: Provide guidance to College of Homeopaths of Ontario registrants and the public with respect to effective collaboration with other health care professionals.

Description:

- Provide referrals to other health professionals when the patient's requirements are outside of individual or professional scope of practice.
- Professional consultation requires follow-up, generally in writing, with the referring health care provider

Guideline on Title and Credential

Policy: Registrants, when engaging in homeopathic practise, must use the restricted title associated with the class of registration they hold. Further, the title of "homeopath" is a protected title and is not permitted to be used by those not registered with the College of Homeopaths of Ontario.

Intent: Provide clear guidance to registrants on use of title and credentials in a regulatory environment.

Description:

- The *Regulated Health Professions Act, 1991*, the *Homeopathy Act, 2007*, and Regulations provide Registrants with clear language on protection of title. According to the *Homeopathy Act, 2007*, only Registrants of the College of Homeopaths of Ontario (the College) are permitted to use the titles "Homeopath" (HOM), variations and abbreviations thereof by class of registration such as "Homeopath (Transitional)" (HOM T), "Homeopath (Inactive)" (HOM I), or equivalent terms in other languages.

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Guideline on Title and Credential

Description:

- **REGISTRANTS RESPONSIBILITY:**
  - Registrants of the College are responsible for ensuring that, within the context of providing or offering to provide health care, they comply with the guidelines. It is prudent to avoid use of the title “Doctor” in any context, from marketing to administration, to eliminate any chance of being perceived as operating outside of the legislation in this regard.
  - Registrants are responsible for making sure that their staff do not refer to them as “Doctor” in their conversations with individuals or patients.
  - Registrants are responsible for correcting patients who refer to them as “Doctor”.
  - Documents or records signed in a Registrant’s professional capacity must include either his/her full professional title i.e Homeopath; Homeopath, Transitional; Homeopath, Inactive; OR title abbreviation Hom, Hom(T), Hom(I).
  - Registrants should always ensure that they set out their academic qualifications accurately.

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Guideline on Title and Credential

Description - Credentials:

- **Use of Other University Degrees (not indicating specialization)**
  - For those Registrants who have obtained his/her homeopathic training following under graduate training, or will have pursued post-graduate degrees outside of homeopathy, such as a PhD or MSc, these conferred degrees, obtained at a University level, can be used by Registrants after their name and following the Hom, Hom(T), or Hom(I) designation.
  - What remains important is the concept of clear and appropriate representation. The homeopath should consider the audience and determine the most appropriate means of portraying their role to the patient.
  - For those who have earned a medical doctorate degree outside of Canada, and who are not registered with the College of Physicians and Surgeons of Ontario, the country in which the degree was earned must be stated in brackets following the MD designation. For example, MD (RUS) or MD (PAK).

Guideline on Title and Credential

Description:

- The restrictions on the use of the title “doctor” apply only in the course of providing or offering to provide health care in Ontario. Registrants with doctoral degrees may use the title “doctor” and its abbreviation (associated with a completed doctoral degree) in non clinical, academic, research and social settings. If the setting involves patient contact in any manner the title “doctor” may not be used. The principles of clear and appropriate representation to the public apply in these situations.
- Some Registrants of the College have successfully completed the requirements of university doctoral–degree programs that permit them to use the word “Doctor”, or an abbreviation thereof. For example, some Registrants have obtained a “Doctorate of Homeopathy”, or a HD, a RHom, or a BHMS. These titles, when used to describe academic achievements are not designators of professional competence.
- Registrants must never mislead the public as to their qualifications. More specifically, Registrants are prohibited from calling themselves “Dr. Doe”, regardless of their qualifications, when they are providing or are offering to provide health care in Ontario, unless registered with another regulatory health college in Ontario that permits them to use the “doctor” title.

Guideline on Title and Credential

Description:

- **Specialty Designations**
  - Homeopathy as a profession in Ontario does not currently have formal specialty areas. Specialty certifications on the other hand carry with them an assumption that they are defined by unique knowledge and skill with specific, defined standards.
  - While there are clearly distinct styles of practise such as Classical, Hahnnemanian, Sequential, etc., a process to establish specialty certifications does not exist.
  - For example, rather than stating “Classical Homeopath”, it would be appropriate to state “Homeopath with training and expertise in Classical Homeopathy”.
  - Rather than stating “Certified Bowen Therapy” or CBT, it would be appropriate to state “Homeopath with training and expertise in Bowen Therapy”.
    - Full Registrant with are of expertise:

      Jessica Weatherall, Hom

      Homeopath, Training and expertise in Classical Homeopathy
    - Full Registrant who is an internationally trained medical doctor, without membership in the College of Physicians and Surgeons of Ontario:

      Alvin Lepine, Hom, BHMS, MD (NOR),

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Guideline on Infection Control

Intent: To advise registrants with respect to the incorporation of appropriate infection prevention and control measures into their practice.

Description:

- Infection control is an integral part of good health practices and critical to the health and safety of both healthcare workers and their patient s.
- It refers to measures practised by healthcare personnel to prevent the spread of unhealthy infectious agents or pathogens between patient, from healthcare workers to patients, and from patients to healthcare workers in healthcare settings.
- This guideline is evidence-based and is intended to assist you in achieving best practices in applying appropriate infection control measures in your practice settings.
- Describes routine and additional infection control practices applicable to community clinics, family practices, private consulting practices, home care and other community settings where homeopaths are providing direct patient care.
- Based on Health Canada recommendations as recognized by the Ontario Ministry of Health and Long Term Care.

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Questions

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