Guide to Annual Registration Renewal

College of Homeopaths of Ontario (CHO)

College of Homeopaths of Ontario
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Introduction

This registration renewal form is to be read subject to the requirements of *Ontario Regulation 18/14 – Registration* made under the *Homeopathy Act, 2007*, the *Regulated Health Professions Act, 1991*, all other applicable legislation and the Bylaws of the College of Homeopaths of Ontario (the College). If there is any inconsistency between this registration renewal form and the legislation and Bylaws applicable to the College, the legislation and Bylaws shall prevail.

This form and all necessary documents must be submitted by the renewal deadline of April 1 in order to renew your Certificate of Registration with the College. **Submitting this form and payment after the renewal deadline will result in late fees**. Failure to provide information and/or non-payment of fees could lead to suspension of your Certificate of Registration.

Annual registration renewal is not considered complete until all mandatory questions are answered, and payment of the fee is received.

If you seek to transfer to or from the Inactive Class or resign your registration with the College **you must notify the Registration Department as soon as possible**. The provincial legislation which governs homeopaths in Ontario does not recognize the words "not renewing." Therefore, in order to comply with this legislation, Registrants **must either renew in one of the two registration classes or resign** their registration by completing the Resignation Form. Class transfers and resignations follow a separate process and cannot be completed as a part of the Renewal Form. Registrants who do not comply with this legislation will have their Certificate of Registration administratively **suspended**. The College is required to post all suspensions on the Public Register.

About HealthForceOntario Data Collection

As part of the HealthForceOntario strategy, the Ministry of Health and Long-Term Care is working with all health regulatory colleges, including the College of Homeopaths, to better understand the health care workforce. Collecting demographic, geographic, educational and employment information from our members will enable the Ministry to develop policies and programs that address overall supply, distribution, education, recruitment and retention for the health care sector workforce. Many of the questions contained in the renewal form are designed to provide this information to the Ministry. Over 100,000 Ontario regulated allied health professionals provide this information as part of their annual renewal process.

Registrants of the College are required to provide this information under the *Regulated Health Professions Act, 1991* (RHPA). The reliability of the information the College receives depends on your answers. To protect your privacy, the data the College submits to the Ministry is made anonymous prior to submission. The College looks forward to your cooperation in assisting the Ministry with this work.

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SECTION 1: PERSONAL INFORMATION

Your full legal name and any alternate name that you use in your practice and which you have previously provided to the College will automatically appear in this section. You will be asked "Is your name correct as it appears?" If it is click "Yes" and "Submit" to move to the next section. If not, click "No" and provide alternate name information.

Registrants who have legally changed their name are required to inform the College within 30 days (*Bylaw 21.10*). If your name is different from the current name listed on your Certificate of Registration and the Public Register, you must notify the College within 30 days of the name change taking effect. If your name change occurred more than 30 days ago, you must immediately inform the College and send documentation of the name change.

Enter your registration class as reflected on your Certificate of Registration and the Public Register.

SECTION 2: CONTACT INFORMATION

Enter your current home address, preferred phone number and email address in this section.

All Registrants are required to provide the College with an email address that is current and checked regularly. This is extremely important as email is the College's primary means of contact with Registrants. Registrants should be aware that if they share an email address with another person, any confidential information sent to them by the College will be accessible to the other individual(s) sharing the email address.

Registrants who have changed their contact information are required to inform the College within 30 days of the change (*Bylaw 21.10*).

SECTION 3: LANGUAGES USED IN PRACTICE

Indicate all languages in which you can competently provide homeopathic services. All Registrants must select at least English or French in this section.

SECTION 4: HEALTHCARE PROVIDER CPR or BASIC LIFE SUPPORT & STANDARD FIRST AID

Verify the expiration date of your healthcare provider CPR or Basic Life Support (BLS) and Standard First Aid certification. Indicate if you are currently certified in Healthcare Provider CPR or Basic Life Support (BLS) and Standard First Aid. All Registrants in the Full Class are, at all times, to be certified in Healthcare Provider CPR (BLS) and Standard First Aid (*Ontario Regulation 18/14, Registration*).

The public interest is served if Registrants have the ability to provide CPR and first aid in case of an emergency. Programs should include the following topics:

Health Care Provider Level CPR or Basic Life Support (BLS): CPR for adults, children, and infants; First aid treatment for airway, breathing, and circulation emergencies including cardiac arrest and choking; Public access Automated External Defibrillation (AED) use; Rescue breathing; and Bag Valve Mask (BVM) use.

Standard First Aid: Secondary survey; Prevention of disease transmission; Injuries to the head, spine, bone, muscle, joint and soft tissue; Wound care, burns; Sudden medical conditions including choking; and Poisons, substance abuse and misuse

Initial courses in both CPR (or BLS) and first aid are generally two days in length, while renewal courses are typically one day.

Where in-person training is not available, the College will accept online training for initial and renewal courses. If you have any challenge in meeting the requirements for renewal of the CPR (or BLS) and First Aid certification, please contact the College.

SECTION 5: BUSINESS LOCATION INFORMATION

Enter the contact information for all sites at which you practice homeopathy. Registrants are required to inform the College of all locations.

Business Location 1 should be the location where you spend the majority of your time practicing homeopathy.
Business Location 2 should be where you spend the second largest amount of time practicing homeopathy.
Business Location 3 should be where you spend the least amount of time practicing homeopathy. Registrants are required to provide this information for up to three business locations.

If time is equally divided between business locations, then it is the Registrant's responsibility to decide which business address is listed first.

You may update your business contact information if the address, telephone number, and/or email address has changed. Please note that Registrants are required to notify the College within 30 days if there has been any change to their business contact information *(Bylaw 21.10).* You may add new addresses of business locations that have taken effect or will take effect within 30 days of this renewal.

See the "Definitions" section of this guidebook for more information about each category.

SECTION 6: PRACTICE STATUS INFORMATION

Practice status information assists HealthForceOntario to identify workforce participation rates for the health professions. All Registrants whether in the Full or Inactive Class are required to answer these questions.

Please use your best judgment and select the answer that seems most appropriate to your practice setting. Keep in mind that College staff are unable to answer questions in relation to your personal practice. See the "Definitions" section of this guidebook for more information about each category.

Enter the total number of weeks during which you have practiced homeopathy within the past registration year across all business locations. **Please Note:** A practice week is a week in which you practiced at least one day of the week. The maximum number of weeks is 52.

Enter the number of weekly hours during which you have practiced homeopathy within the past registration year across all business locations. **Please Note:** Weekly practice hours include travel time, preparation, and service provision. These hours do not include any volunteer hours or time working outside of the profession. The maximum number of weekly hours is 168.

Enter the proportion of weekly practice hours spent per week across all practice locations on each of the given activities. It is up to the Registrant to determine the proportion of average weekly practice hours for each activity. The total must equal 100 percent. See the "Definitions" section of this guidebook for more information about each professional practice activity.

SECTION 7: RECENT EDUCATION

Enter any **formal** post-secondary education **related** to homeopathy completed **within the past 12 months**.
Enter any **formal** post-secondary education **unrelated** to homeopathy completed **within the past 12 months**.
Enter any continuing education and professional development (CEPD) hours undertaken to assist your practice of the homeopathy within the past 12 months. Provide details on the number of hours and types of activities you have participated in.

As an annual requirement of the College's QAP you will be expected to participate in a **minimum of 15 hours of CEPD each year.**

SECTION 8: CONCURRENT REGISTRATION

Registrants are required to report to the College registration/licensure with any other regulatory bodies in Ontario or in any other jurisdiction in the world. All affiliations must be listed. List all regulatory bodies where you have ever been a member.

Registrants who are not now and have never been members of any other regulatory body in any jurisdiction, in Canada or anywhere else in the world, **DO NOT** need to complete this section and may proceed to section 9.

If you have previously indicated to the College that you are registered or licensed with a health regulatory body in Ontario or any other jurisdiction, the name(s) of the body(ies) will appear in the first part of Section 8. **No further action is required on your part.**

If you are or have been registered with another regulatory body **and have already provided to the CHO a *Form C: Certificate of Professional Conduct* related to that registration**, you do not have to submit another Form C from that regulatory body. **There is no need to re-submit information that you have already provided to the College.**

If you answer "yes" to question 9(a), you may be prompted to provide additional information to the College. Enter any **new** health profession registration or license that you have obtained **within the past 12 months**.

Please Note: For each new regulatory body that you declare to the College, ***Form C - Certificate of Professional Conduct*** must be submitted. You must download and print ***Form C*** located on the "Forms" page of the College's website, fill in Section 1 of the form and forward it to the regulatory body that you have indicated. The College can only accept the Certificate of Professional Conduct if it is submitted directly from the regulatory body.

Please note this question applies **only** to new registration with another regulatory or licensing body. **It does not apply to association, society, educational or alumni memberships.**

SECTION 9: DISCLOSURE OF CONDUCT

All Registrants are required to complete this section. Registrants must report all regulatory/legal proceedings to the College within 30 days of the event *(Ontario Regulation 18/14, Registration).* If you have not disclosed information related to regulatory/legal proceedings you must do so immediately. Some questions may not apply to you; in this case, answer "no."

Please Note: Registrants who have **answered "yes" to any question in Section 9: Disclosure of Conduct** must provide information to the College regarding the circumstances or event. If you answered "yes," you must submit supporting documents to the College by e-mail or courier **immediately**. The College will verify the information you provide in this section regarding all findings and/or proceedings that you have indicated. Please provide as much information as possible.

SECTION 10: PROFESSIONAL LIABILITY INSURANCE

All Registrants in the Full Class are required to maintain professional liability insurance in accordance with the criteria specified in policy ***REG GR 03 Professional Liability Insurance*** and the Bylaws at the time of renewal.

Please Note: In addition to completing the information requested in this section, **a copy of your insurance policy must be submitted to the College** with your Renewal Form. Please upload a copy of your current policy to Section 12 of the online form. Insurance policies that expire before the renewal deadline will not be accepted.

If you are currently registered in the Inactive Class you are not required to maintain professional liability insurance during the time that you are inactive.

SECTION 11: DECLARATION AND SIGNATURE

All Registrants must agree to all conditions in this section by checking the box next to each sentence and by signing and dating the declaration.

SECTION 12: SUPPORTING DOCUMENTATION

Documents supporting your renewal may be uploaded in this section.

To easily upload your documents, CHO recommends using Google Chrome as your internet browser.

Examples of supporting documentation may include:
Section 1 – change of legal name
Section 4 – updated certificate supporting currency in Healthcare Provider CPR and Standard First Aid
Section 9 – supporting information related to Disclosure of Conduct

Section 10 – proof of current Professional Liability Insurance
Section 15 – Completed CHO Installment Payment Agreement

Please note that only documents in pdf format can be uploaded at this time.

SECTION 13: QUALITY ASSURANCE DECLARATION

The CHO Quality Assurance (QA) Program is focused on helping registrants improve their practice and ensuring that the varying laws, regulations, standards and guidelines impacting the profession of homeopathy are implemented in a consistent and appropriate manner. If you have completed any continuing education and/or professional development (CEPD), please report it.

The QA program is intended to be instructional, not punitive. It is a supportive practice program, which will be provided at no cost to each registrant. The program requirements include self-assessment by the registrant of his/her own competencies, participation in annual CEPD, a peer and practice assessment process, and regular registrant reporting on their efforts to maintain competence and stay current.

These requirements are part of RHPA and the College's Quality Assurance Regulation (O. Reg. 32/13). Once fully implemented, the QA program and monitoring will be an important part of being a self-regulated profession. Under Section 13 you are required to read and acknowledge each QA requirement listed in the online QA Declaration even if you have not participated this year in anything else other than CEPD.

Under Section 13 you are required to read and acknowledge each QA requirement listed in the online QA Declaration.

SECTION 14: ANNUAL REPORTING OF ACTUAL PRACTICE HOURS

Each renewal season, you are required to report on your **actual** clinical and non-clinical practice hours. You may have questions or concerns about how to record or report on your hours and how this reporting may differ from that in Section 6 of the renewal form. The Registrant Factsheet on Ongoing Practice Hours Requirement will answer many of your questions. We encourage you to read the Factsheet and do your best to provide an accurate report of your initial and follow-up visits over the last calendar year (January 1st to December 31st, 2025).

The Annual Reporting Period going forward will now be the previous calendar year for all Registrants. Please calculate and declare your hours from the entire 2025 calendar year.

You must complete this section even if you had no practice hours in the last calendar year. The College recognizes that you may have had fewer practice hours in the past year than in other 12-month periods. The College accepts this may be the situation, without concern.

The College has information on hour criteria and what constitutes acceptable proof of hours in policy REG CS 04 Full Class, Breakdown of 750-Hours, which can be found on the College website. Please refer to this policy prior to completing this section. All practice hours must be verifiable in order to be recorded. Registrants are not required to provide verification of their hours at this time; however, they may be audited by the College and would be required to

provide verification at that time. If practice hours cannot be verified at the time of audit, the College could take action, resulting in possible discipline proceedings or revocation of registration.

SECTION 15: ANNUAL RENEWAL FEE PAYMENT

The 2026-2027 Annual Renewal Fee is:
Full Class $1385.00 + $180.05 HST = **$1565.05**;
Inactive Class $804.00 + $104.52 HST = **$908.52**.
The CHO accepts payment by credit card and e-transfer.

Credit Card: Registrants have the option to pay by credit card as part of the online renewal process and will be guided through the process. It is important to note that a credit card service fee will be applied to your payment. For Full Class $35.00 + $4.55 HST = **$39.55**; Inactive Class = $20.00 + $2.60 HST = **$22.60**. The credit card service fee is equal to the fee the credit card company (Stripe) charges the College plus HST.

E-transfer: Direct payment may be made to the College of Homeopaths of Ontario by e-transfer at fees@collegeofhomeopaths.com. Auto deposit has been enabled, so no security question is required. The College does not apply service fees for payment by e-transfer. **It is extremely important that you include your registration number and name in your e-transfer information.**

Installment Payments
By Credit Card: Please note that a credit card service fee applies for this option (Full Class $35.00 + $4.55 HST = $39.55; Inactive Class = $20.00 + $2.60 HST = $22.60.). The online Renewal form allows for registrants to choose the option to pay by installments directly through the registration portal. When you reach the payment section of the renewal process, you will be able to check the box which states “pay by installment”. When you select this option and enter your credit card information, you will be charged a fee of **$352.56** (installment of $313.01 + credit card fee of $39.55) immediately, and every 60 days after that for four additional payments of **$313.01**. For example, if you renew on March 10th, your credit card will be charged on March 10, May 9, July 8, Sept 6, and Nov 5. The first installment payment includes the credit card processing service fee for the entire Annual Renewal Fee. You will be able to track your payments on the orders page of your registration portal.

By E-Transfer:
Registrants can also make installment payments by Interac e-transfer. There is no processing fee to pay directly through e-transfer. Once you have completed the online Renewal Form, you must go to your online banking portal and submit your first e-transfer immediately to College of Homeopaths of Ontario at **fees@collegeofhomeopaths.com**. **You must include your registration number and name in your e-transfer information**. Auto-deposit has been enabled, so no password is required to complete the payment.

As the College has no ability to process installment payments automatically, **it is the responsibility of the Registrant to follow the payment schedule, submitting each e-transfer payment accordingly**. You may wish to set-up an auto payment schedule through your online banking site.The processing schedule for 2026-2027 is as follows:

1st payment: immediately following completion of the online Renewal Form
2nd payment: by June 13th, 2026
3rd payment: by August 15th, 2026
4th payment: by October 10th, 2026
5th payment: by December 12th, 2026

Important Notes about Payment of Fees

All payments for the full amount or the first installment (if you select the split payment option) must be received by April 1, 2026 or late fees will apply. If your Renewal Form or payment is submitted after the renewal deadline, you will be required to pay a late fee of $222 + HST in addition to the annual registration fee. Failure to complete the Annual Renewal form and fee payment will result in an administrative suspension on your Certificate of Registration. This information will appear on the Public Register.

There are some factors which may impact the final cost of your renewal fee including payment method, full payment or installments, class of registration and location of practice (i.e. out of province or out of country).

If you have any questions about the amount due, payments, or about the installment option, please contact a Registration staff member by email at registration@collegeofhomeopaths.com

Processing Times

The College will notify you by email within 14 days of the deadline if there are any issues with your submission.

Class Transfer

Please Note: Transfers of class and resignations cannot be completed as part of the renewal process. To transfer your registration class or to resign your registration you must notify the College and complete the appropriate form. For information on changing your registration status and to access the forms, please visit the "Forms" page of the College's website or contact the College at: registration@collegeofhomeopaths.com

Definitions

Employment Categories

- **Permanent:** Indeterminate duration of employment and guaranteed or fixed practice hours per week.
- **Temporary:** Fixed duration of employment based on a defined start and end date.
- **Casual:** On an as-needed basis.
- **Self-employed:** A person who operates his/her own private practice in homeopathy.

Employment Status

- **Full-time:** Official status is full-time or usual hours of work are 30 or more.
- **Part-time:** Official status is part-time or usual hours of work are less than 30.
- **Casual:** Status is on an as-needed basis, with employment that is not characterized by a guaranteed or fixed number of hours per week. There is no arrangement between employer and employee that the employee will be called to work on a regular basis.

Employment Setting

- **Hospital**: A health care facility that offers a range of in-patient and out-patient health care services (e.g. medical, surgical, psychiatry etc.) available to the target population. Includes specialty and complex continuing care hospitals not otherwise classified.

- **Rehabilitation Facility:** A health care facility that has as its primary focus the post-acute, inpatient and outpatient rehabilitation of individuals.
- **Mental Health and Addiction Facility:** A health care facility that has as its primary focus the acute or post-acute, inpatient and/or outpatient care of individuals with mental health issues and illness and/or addictions.
- **Residential/Long Term Care Facility:** A long-term care facility designed for people who require the availability of 24-hour nursing care and supervision within a secure setting. In general, long-term care facilities offer high levels of personal care and support. These facilities include nursing homes, municipal homes and charitable homes.
- **Assisted Living Residence/Supportive Housing:** A retirement home or supportive housing that provides varying degrees of care to assist individuals/couples to live independently. Services include home making, meal preparation, low to daily personal care and availability of a personal support worker or staff on a 24-hour basis. These facilities include group homes, retirement homes, community care homes, lodges, supportive housing and congregate living setting.
- **Community Health Centre (CHC):** A CHC employs physicians and other interdisciplinary providers, such as nurse practitioners, nurses, mental health counsellors, chiropodists, community workers and dietitians to serve high-risk communities and populations who may have trouble accessing health services because of language, culture, physical disabilities, socioeconomic status or geographic isolation. CHC's emphasize health promotion, disease prevention and chronic disease management based on local population health needs. The organization must be recognized as a CHC.
- **Group Health Centre (Sault St. Marie):** An interdisciplinary practice in Sault Ste. Marie that includes physicians, nurse practitioners, dietitians, pharmacists, physiotherapists, and many other providers. The group provides comprehensive primary health care (PHC) services. The services are provided on a 24/7 basis through a combination of regular office hours, after-hours services, and access to a registered nurse through the Telephone Health Advisory Service (THAS). The group emphasizes health promotion, disease prevention and chronic disease management based on local population health needs. The group must enroll patients.
- **Nurse Practitioner-Led Clinic:** This clinic is led by a nurse practitioner and provides primary health care in collaboration with family physicians, and other interdisciplinary health care providers. The focus of the clinic is on comprehensive primary health care services in areas where access to family health care is limited.
- **Other Group Practice Office:** A community based group (not already noted) professional practice or clinic that is composed of two or more health professionals working together to deliver health services. Clients typically come to the professionals' location to receive services. Other administrative support staff may also be involved; however, the health professionals are the focus of service provision.
- **Solo Practice Office:** A community-based professional practice/business composed of a single practitioner who delivers health services. Clients typically come to the professional's location to receive services. Administrative support staff may also be involved; however, the health professional is the focus of service provision.
- **Client's Environment:** The professional travels to one or more sites that may be the client's home, school and/or workplace environment to provide services (e.g. Homecare or CCAC contracts).
- **Post-Secondary Educational Institution:** A post-secondary institution, either a university or equivalent institution or a college or equivalent institution, with a primary focus on the delivery of education.
- **Preschool/School System/Board of Education:** A preschool or elementary or secondary school (or equivalent institution), or the associated school board (or equivalent entity) that has responsibility for the governance and management of education funding issued by provincial governments.
- **Children Treatment Centre:** This centre is a community-based organization that serves children with physical disabilities and multiple special needs. The centre provides physiotherapy, occupational therapy and speech therapy along with other additional services.
- **Association/Government/ Regulatory Organization/Non-Government Organization:** An organization or government that deals with regulation, advocacy, policy development, program development, research and/or the protection of the public, at a national, provincial/territorial, regional or municipal level.
- **Board of Health/Public Health Laboratory/Public Health Unit:** A public health laboratory or official health unit that administers health promotion and disease prevention programs to inform the public about healthy life-styles, communicable disease control including education in STDs/AIDS, immunization, food premises inspection, healthy growth and development including parenting education, health education for all age groups and selected screening services.

- **Community Care Access Centre (CCACs):** A local organization that assists its clients to access government-funded home care services and long-term care homes. The organization helps people to navigate the array of community support and health agencies in their communities.
- **Community Pharmacy:** A retail setting where drugs and related products are distributed primarily through direct face-to-face client contact (e.g. Shoppers Drug Mart).
- **Cancer Centre:** A facility that specializes in services related to the treatment, prevention and research of cancer.
- **Independent Health Facility:** Refers to a stand-alone facility or clinic offering specialized or broadly based imaging services.
- **TeleHealth Ontario and Telephone Health Advisory Service:** A program that provides free, confidential 24/7 service that provides Ontario residents with easy access to health information.
- **Spa:** A facility that focuses on providing services related to health, fitness, beauty and relaxation.
- **Health Related Business/Industry:** A business or industry whose focus of activities is not in the direct delivery of health care services, but rather the health of workers, health-related product development or the selling of health-related products (e.g. medical device companies, pharmaceutical companies).
- **Correctional Facility:** A stand-alone organization/facility that has as its primary focus the treatment and rehabilitation of persons detained or on probation due to a criminal act.
- **Remote Nursing Station:** A remote and or rural stand-alone centre that has nurses as the on-site managers and practitioners.
- **Other Place of Work:** Place of work is none of the above.

Primary Role

- **Manager**: Major role is in the management of a particular team/group that delivers services.
- **Owner/Operator**: An individual who is the owner of a practice site and who may or may not manage or supervise the operation at that site.
- **Service Provider**: Major role is in the delivery of professional services specific to the profession.
- **Consultant**: Major role is the provision of expert guidance and consultation, without direct patient-care, to a third-party.
- **Administrator**: A person whose primary role is involved in administration, planning and organizing.
- **Instructor/Educator**: Major role is as an educator for a particular target group.
- **Researcher**: Major role is in knowledge development and dissemination of research.
- **Quality Management Specialist**: Major role is the assurance and control of the quality of procedures and/or equipment.
- **Sales Person**: Major role is in the sales of health related services and products.
- **Not Applicable**: None of the above categories apply.

Major Area of Activity

- **General Service Provision**: Services provided primarily to clients across a range of service and/or consultation areas specific to the profession (e.g. general rehabilitation, laboratory work etc.).
- **Continuing Care**: Services provided primarily to clients with continuing health conditions for extended periods of time (e.g. long-term care or home care).
- **Chronic Disease Prevention and Management**: Services are provided primarily to address chronic diseases early in the disease cycle to prevent disease progression and reduce potential health complications. Diseases can include diabetes, hypertension, congestive heart failure, asthma, chronic lung disease, renal failure, liver disease and rheumatoid and osteoarthritis.
- **Public Health**: Services are provided primarily with the purpose of improving the health of populations through the functions of health promotion, health protection, health surveillance and population health assessment.
- **Mental Health and Addiction**: Services provided primarily to clients with a variety of mental health and addiction conditions.
- **Cancer Care**: Services provided primarily to clients with a variety of cancer and cancer related illnesses.
- **Geriatric Care**: Services provided primarily to care for elderly persons and to treat diseases associated with aging through short-term, intermediate or long-term treatment/interventions.

- **Palliative Care**: Services provided primarily to clients with the aim of relieving suffering and improving the quality of life for persons who are living with or dying from advanced illness or who are bereaved.
- **Consultation**: Expert consultation is provided on the profession related to medical and/or legal matters.
- **Administration**: Focus of activities is management or administration.
- **Quality Management**: Focus of activities is on the assurance of the operational integrity, based on compliance with staffing, technical and organizational requirements.
- **Post-Secondary Education**: Focus of activities is directed at providing post-secondary teaching to individuals registered in formal education programs.
- **Research**: Focus of activities is in knowledge development and dissemination of research including clinical and non-clinical.
- **Sales**: Focus of activities is in the sales and/or service of health related apparatuses or equipment.
- **Other Area**: Other area of activity not otherwise listed.

Professional Practice Activities

- **Direct Professional Services:** include conducting tests, patient care, health promotion but does not include clinical education hours or the provision of homeopathic services while teaching (this would include remedy research).
- **Teaching:** includes preparing students for a health profession in a post-secondary environment but does not include providing professional services while teaching.
- **Clinical Education:** includes only the direct provision of professional services while teaching.
- **Research:** includes all research in homeopathy (this would include academic and professional research).
- **Administration:** includes all administrative activities related to the practice of homeopathy.
- **All Other Activities:** include all professional activities excluding direct professional services, teaching, research and administration.

Contact Information

If you have any questions that have not been answered by this guide, please contact a registration staff member at the College via e-mail: registration@collegeofhomeopaths.com

College of Homeopaths of Ontario

Website: www.collegeofhomeopaths.com
Tel: 647-749-9366
E-mail: registration@collegeofhomeopaths.com

Thank you for participating in the CHO renewal process.

Collection of Personal Information

The College of Homeopaths of Ontario (the College) collects the information in the Application Form and other forms in the registration or reinstatement process under the general authority of the *Regulated Health Professions Act, 1991,* S.O. 1991, c. 18; the *Homeopathy Act, 1991,* S.O. 2007, and its regulations; and the College's Bylaws. The College collects the information for the purpose of assessing eligibility for registration or reinstatement.

Upon registration or reinstatement with the College, the information will become part of your membership file with the College and may be used in the course of the College performing its regulatory role as outlined in the *Regulated Health Professions Act*. It may also be used for aggregate statistical reporting and analysis within the College and externally.

Appropriate measures are taken to safeguard the confidentiality of the personal information you provide and all documents become the property of the College.

If you have any questions about the collection, use and/or disclosure of this information, contact the College's Privacy Officer at 647-749-9366, or by email at communications@collegeofhomeopaths.com