



Transitional Council of the
College of Homeopaths of Ontario
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Director
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Dear John,

We are pleased to provide this response to Minister Dr. Eric Hoskins on our Patient Relations Program, as requested in his letter of December 17, 2014.

As a transitional Council for the College of Homeopaths of Ontario we are still developing some areas of our Patient Relations Program and anticipate completion of the program by proclamation.

To date we have completed the following activities:

- Patient Relations Committee established;
- Inquiries, Complaints and Review Committee (ICRC) established;
- Quality Assurance (QA) Committee established;
- ICRC procedures and processes established;
- Core competencies for Homeopaths developed and verified by all stakeholders. These core competencies have taken into account the prevention of any form of abuse including sexual abuse. These core competencies are incorporated into all requirements for Homeopaths (Entry To Practice, Renewal, and Quality Assurance);
- Practitioner Education on prevention of sexual abuse developed in the form of two (2) standards of professional practice and one (1) guideline: Standard 16: Therapeutic Relationships And Professional Boundaries, Standard 12: Mandatory Reporting On Patient Care, and Guideline 5: Patient Communication And Physical Examination. These standards relate directly back to the core competencies of the profession;
- The Quality Assurance Program is being validated now which has a component of self-reflection on the core competencies and educational goals. Further the Quality Assurance program has a five year education plan that will pick specific practice areas including ethics, boundaries and appropriate communications;
- The Jurisprudence Program contains a component on prevention of sexual abuse. The program has been released and is available on our website. Completion of the Jurisprudence Program is a requirement of registration;

- Communications Strategy includes a five year plan on education articles for practitioners and stakeholders;
- Information regarding complaints process and procedures for public developed;
- Staff education on dealing with sexual abuse complaints complete; and
- Budget planning includes the sexual abuse fund to the levels required by the RHPA.

By the date of proclamation we will have completed the following work as required under the RHPA:

- Website posting of information regarding complaints process and procedures;
- Information on Sexual abuse and fund availability (Public Education Program);
- Sexual Abuse Prevention Guide completed;
- Policies on financial management of the sexual abuse fund and administering the sexual abuse fund; and
- Patient Relations Program finalized.

It is anticipated that all of the work to be developed will follow the benchmarked format and standards of the established regulatory colleges or suggestion of the Minister's Task Force on the Prevention of Sexual Abuse of Patients (the "Task Force") and the *Regulated Health Professions Act, 1991*. Please note that the transitional Council confirms its commitment to, and full participation in, the Task Force. The transitional Council agrees that this is an issue that deserves attention and scrutiny so that the people of Ontario have confidence in all regulated health professionals and their regulators.

The transitional Council and staff are looking forward to the proclamation of the remainder of the *Homeopathy Act, 2007*. We are committed to protecting the public through the implementation of the *Homeopathy Act, 2007* and the self-regulation of the homeopathy profession. Since its inception in 2009, the transitional Council and staff have worked diligently to fulfil this mandate. With the help of the MOHLTC, we have reached the point at which all of these efforts will come to fruition. The TC-CHO looks forward to the successful completion of this process and the transition to a fully functioning College.

Respectfully,



Basil Ziv, *RSHom (NA), CCH*

Registrar

Attachments: Standard 16: Therapeutic Relationships And Professional Boundaries
Standard 12: Mandatory Reporting On Patient Care,
Guideline 5: Patient Communication And Physical Examination

cc: Ms. Allison Henry, Director (Acting) - Nursing Policy And Innovation Branch, Health Systems Labour Relations and Regulatory Policy Branch, Health Human Resources Strategy Division, MOHLTC

Ms. Gwen Gignac, Senior Policy Analyst - Regulatory Programs Unit, Health Systems Labour Relations and Regulatory Policy Branch, Health Human Resources Strategy Division, MOHLTC