

112 Adelaide Street East,
Toronto, ON M5C 1K9

P: 416-866-8383
Toll-free: 1-877-361-1925
F: 416-866-2175



789 Don Mills Rd., Suite 603
Toronto, ON M3C 1T5

P: 416-233-2001
Toll-free: 1-877-628-7284
F: 416-233-2924



ccnm
CANADIAN COLLEGE OF
NATUROPATHIC MEDICINE

1255 Sheppard Avenue East
Toronto, ON M2K 1E2

P: 416-498-1255
Toll-free: 1-866-241-2266
F: 416-498-1626



1255 Sheppard Avenue East,
North York, ON M2K 1E2

P: 416-496-8633
Toll-free: 1-800-551-4381
F: 416-496-8634

February 27, 2009

Hon David Caplan, MPP
Minister of Health and Long-Term Care
56 Wellesley Street West, 12th Floor
Toronto, Ontario
M5S 2S3

Dear Minister,

The Board of Directors, Drugless Therapy Naturopathy (the Board), the Ontario Association of Naturopathic Doctors (the OAND), the Canadian Association of Naturopathic Doctors (the CAND) and the Canadian College of Naturopathic Medicine (the CCNM) are pleased to have the opportunity to respond to HPRAC's recommendations in its latest report, "*Critical Links: Transforming and Supporting Patient Care*".

In our view, "Critical Links", along with previous HPRAC reports, has confirmed the wisdom and foresight of those who originally crafted the *Regulated Health Professions Act* (RHPA) and we support the broad direction and approach of HPRAC's continuing efforts to improve the regulation of health professions in Ontario. HPRAC has taken an important leadership role in modernizing the health professions regulatory framework, enhancing patient care and better utilizing health human resources through the promotion of interprofessional collaboration.

We strongly support HPRAC's central vision expressed in *Critical Links* for seamless, effective, patient-centred care:

"HPRAC is working toward a regulatory system that enables each of Ontario's thousands of health professionals to contribute to patient care to the full extent of their training and abilities, to collaborate with each other so that the efforts of all are deployed to produce the best possible results for patients, and to respond with up-to-date skills and a deep sensitivity to the rising expectations of today's health care consumers." [Critical Links, p. 1]

Ensuring that all health professions are able to make their full contribution to the health care system will improve patient care, facilitate patient choice of care provider, improve access to safe and effective care, and improve the effectiveness of interprofessional teams. Effective collaboration, in turn, requires each profession to be able to practise to its full scope, in keeping with the members' training and competence.

We agree that improving interprofessional collaboration by reducing potential barriers and unnecessary inconsistencies in the standards of practice of each profession is an important goal and we support the Ministry's current policy requiring Colleges to consult with other professions when developing or updating their standards of practice. We also understand that HPRAC's recommendations for how standards of practice should be developed where professions share controlled acts are intended to address patient safety concerns, while also enhancing

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interprofessional collaboration. While we understand and support this intent, we believe that Standards Committees should be implemented in a way that supports professional self-governance, in both principle and practice

Naturopathic Doctors are well positioned to increase their contribution to the health care system, particularly with full access to those therapeutic substances that are integral to naturopathic medicine.

As you know, in Ontario Naturopathic Doctors continue to be regulated under the *Drugless Practitioners Act* (DPA), pending creation of the College of Naturopathy under the new *Naturopathy Act, 2007*. While we read the entire report with interest and found it to be very instructive, our comments in this response, aside from the general remarks above, will focus on HPRAC's recommendations in Chapter 11 that pertain specifically to the naturopathic profession.

HPRAC's recommendation that Naturopathic Doctors be authorized to perform the controlled act of prescribing, dispensing, selling or compounding as set out in regulations will clearly benefit patient care and the health care system, and is strongly supported by the undersigned. As HPRAC has noted, legislative changes at the federal level under the *Food and Drugs Act* make it imperative that NDs have access to this controlled act in order to ensure that naturopathic doctors (and their patients) have access to those natural substances that have been placed on restricted schedules under federal legislation, or might be restricted in the future. HPRAC recognizes that NDs have the competencies required to prescribe safely and effectively. The report also makes it clear that authorizing NDs to prescribe under the *Naturopathy Act*, will permit them to play a larger role in improving access to primary care across Ontario. [Critical Links, p. 249]

We do have concerns relating to the details of HPRAC's recommendations pertaining to those specific substances or categories thereof to which NDs would have access. The OAND has detailed its concerns in this area in a separate response. We presume there will be an opportunity to address these concerns when the time comes to develop the requisite regulations and Standards of Practice for the profession under the *Naturopathy Act*.

We also support HPRAC's recommended changes to the wording of the authorized act of "communicating a diagnosis" in the *Naturopathy Act, 2007*, by removing the reference to "naturopathic diagnosis", which has no accepted interpretation in the naturopathic profession or elsewhere. We agree with HPRAC's analysis that naturopathic doctors reach a "diagnosis" using both naturopathic and traditional medical diagnostic techniques, including comprehensive health histories and examinations, laboratory tests and other investigations. (Page 265) Nevertheless, HPRAC's reasoning and recommendations do not appear to be consistent with the Implementation Proposals. As written, the implementation proposals (subsections 5 i. ii. and iii) appear to constitute a significant departure from HPRAC's recommendations and would require the taking of an individual's health history, a comprehensive health examination, or a prescribed

BDDT-N

BOARD OF DIRECTORS OF DRUGLESS THERAPY
NATUROPATHY

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naturopathic examination before an ND could communicate any diagnosis, regardless of the severity of the condition being diagnosed. These are excessively onerous requirements that, if interpreted and enforced literally, would require NDs to perform extensive examinations that will be unnecessary in many circumstances. The problem can easily be resolved by removing the qualifier from "naturopathic diagnosis" and otherwise retaining the current wording of the *Naturopathy Act* to read:

"Communicating a diagnosis identifying, as the cause of an individual's symptoms, a disease, disorder or dysfunction that may be identified through an assessment that uses naturopathic techniques."

This change would reflect HPRAC's recommendations and rationale as set out on page 265 of the report.

We look forward to the opportunity to review and comment on the legislation in response to HPRAC's recommendations when it has been drafted and, of course, to work with the Ministry, other Colleges and the Transitional Council on the regulations.

Yours sincerely,

Angela Moore, ND
Executive Director
BDDT-N

Alison Dantas
CEO
OAND

Bob Bernhardt
President & CEO
CCNM

Shawn O'Reilly
Executive Director
CAND