



January 29, 2009

HPRAC Consultations
Ministry of Health and Long Term Care
56 Wellesley Street West, 12th Floor
Toronto ON M5S 2S3

Dear Sirs/Madams,

The College of Physiotherapists of Ontario (the College) and the Ontario Physiotherapy Association (the Association) have prepared this letter in response to the Ontario Ministry of Health and Long-Term Care's invitation dated November 18th, 2008 to comment on the rules relating to the use of the title "doctor" when delivering healthcare to Ontarians. This response is made with respect to the public interest on this matter and in keeping with our spirit of collaboration on regulatory matters relevant to professional practice.

Current Situation

In the April 2006 report *Regulation of Health Professions in Ontario: New Directions*, the Health Professions Regulatory Advisory Council (HPRAC) noted the inconsistencies created by the current restrictions on the use of the title "doctor" in the Regulated Health Professions Act (RHPA). To assess options for resolving this, HPRAC undertook a review of other jurisdictions and came to the conclusion that the question is a social issue and not a health-related matter. HPRAC further noted that international practice, emerging professions and practices that combine clinical and academic activities make the RHPA's rigid title protections unworkable. HPRAC concluded that rather than enhancing public protection, the current restrictions maintain unequal status amongst various health professions (p. 59).

HPRAC's Recommendations for New Directions

To resolve these concerns HPRAC recommended that:

1. Registered health professionals with an earned academic doctoral degree be permitted to use the title "doctor" in the course of providing health care,

2. The academic doctoral degree must be granted by an educational institution that is accredited or approved by a certifying body authorized by the regulatory college,
3. The academic doctoral degree must be in the field in which the person is registered with the College, and
4. The title and the nature of the degree and the discipline in which it is held must be clearly identified in conjunction with the "doctor" title (p. 59).

The Position of the College and the Association

Both organizations agree with HPRAC's assessment of the effects of the current restrictions on the use of the title "doctor". We also concur that their application creates inconsistencies that perpetuate artificial differentiations in the status of regulated health professions to the detriment of public understanding. This is especially true in circumstances where some members of a profession have earned doctoral degrees, but are unable to use them while providing or offering to provide health care.

With this general agreement in mind we would like to make the following comments:

We support the majority of HPRAC's recommendations as to how the rules governing the use of the title should be changed to resolve the current problems.

Specifically the profession supports the recommendations that:

- Registered health professionals with an earned academic doctoral degree be permitted to use the title "Doctor" in the course of providing or offering to provide health care,
- The academic doctoral degree must have been granted by an educational institution that is accredited or approved by a certifying body authorized by the regulatory college, and
- The title and the nature of the degree and the discipline in which it is held must be clearly identified.

Our understanding is that an earned academic doctoral degree is from a university that is authorized to grant a doctorate degree and includes either a clinical/professional doctorate (e.g. M.D., DDS), or a research based doctoral degree (e.g. Ph.D. in Psychology).

Consequently we do not support the current wording of the recommendation that the academic doctoral degree must be in the discipline in which the person is registered with the College.

Given the many accredited and/or approved degree programs and the variety of academic sub-specialties that exist, we suggest that the public would be better served if this recommendation were modified to permit registered health professionals to use the title “doctor” when they have an academic doctoral degree in a discipline that is in, or related to, the field in which the person is registered with the College.

This modification will permit members of health professions who have made considerable effort to obtain related qualifications over and above the entry level registration requirements of their profession to use the title “doctor”.

An example may clarify the need for this change. Take the case of a person who has obtained a Master’s degree in physiotherapy. This level of qualification will permit the person to register as a physiotherapist with the College of Physiotherapists and use the title “physiotherapist”, but not the “doctor” title. This is all as it should be.

However, during the course of her professional development, the physiotherapist may decide to pursue advanced training in the physiology of exercise, a field that is directly related to her physiotherapy practice. If she then obtains a PhD (an earned research based doctoral degree) in exercise physiology, the HPRAC proposal would still not permit her to use the title “doctor” in the course of providing or offering to provide health care. This is despite the fact that the qualification is directly related to her practice and may further assist members of the public in identifying appropriately qualified members of the profession to provide them with the care they require.

Therefore the physiotherapy profession suggests that earned academic doctoral degrees in subject areas related to the discipline in which the professional is registered also authorize the use of the title “doctor” subject to regulations. The regulation-making and approval process would ensure reasonable consistency across Colleges.

We believe that permitting health professionals to use the title doctor when they have obtained an academic doctoral degree in a discipline that is in, or related to, the discipline in which the person is registered with the College, will accomplish two important results:

- If applied to all professions with access to the title doctor and retrospectively as well as on a go forward basis, the inconsistencies and unfairness in the current restrictions on the use of the title “doctor” will be removed, and
- the public will be provided with additional information that they will be able to use to better identify not only the type of healthcare professional they want but also the level of qualification that person has achieved.

We believe that this approach, combined with HPRAC’s fourth recommendation – that the title and the nature of the degree and the discipline in which it is held must be clearly identified – will assist in protecting the public from misunderstandings relating to the health professional’s actual doctoral degree.

Notwithstanding the foregoing, the College and the Association are concerned that HPRAC’s recommendations with respect to Traditional Chinese Medicine practitioners and the new Naturopathy Act, 2007 exhibit approaches that vary materially from HPRAC’s recommendations in *New Directions*. We wonder, therefore, whether the *New Directions* recommendations, or actual practice with respect to TCM and Naturopathy indicate future directions.

In the case of TCM practitioners, the HPRAC recommendations are substantially more detailed and prescriptive as to what constitutes the minimum requirements for access to the “Doctor” title. This is perhaps required because of the absence of any college approval of the accreditation bodies or mechanisms for TCM educational institutions and programs. Nonetheless, if these minimum standards were applied to all professions, the anomalies identified by HPRAC would persist.

In the case of Naturopathy, HPRAC appears to have accepted the convention established by the Naturopathy profession under the *Drugless Practitioners Act* to call themselves “Doctors of Naturopathic Medicine” and to have recognized at face value the professional degree issued by the Canadian College of Naturopathic Medicine, even though no “College” is in place to monitor or approve accreditation.

Summary

In conclusion, the College and the Association believe it is important to devise and enforce legislative restrictions relating to the "doctor" title that are clear, rational and fair. It is also important that the policy be interpreted and applied consistently across all RHPA Colleges. Such a policy should:

- allow increasingly sophisticated healthcare consumers to receive as much information as possible regarding the qualifications of the healthcare providers they consult;
- allow members of other healthcare professions to receive as much relevant information as possible pertaining to the qualifications of members of other healthcare professions to whom they refer patients, or otherwise work with in providing interprofessional care; and
- allow regulated healthcare providers to refer to all relevant academic qualifications that they have worked hard to obtain.

We fully recognize the challenges that the Ministry will face in making material changes to the existing RHPA provisions. Nonetheless, in the public interest, we urge the Ministry to move forward with HPRAC's recommendations incorporating our suggested modifications.

Thank you very much for the opportunity to make this submission.

Sincerely,



Lori Neill
President
College of Physiotherapists
of Ontario



Mark Beadle
President
Ontario Physiotherapy Association

cc: Hon. David Caplan, Minister of Health and Long-Term Care, MOHLTC
Barbara Sullivan, Chair, HPRAC