



ALBERTA college
of OPTOMETRISTS

ANNUAL REPORT

TO

GOVERNMENT

2006

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Mission Statement

Alberta College of Optometrists

The mission of the Alberta College of Optometrists is to ensure that the practice and the promotion of Optometry within Alberta is conducted in the best interests of the public through the exercise of the regulatory powers granted to the College in the Health Professions Act, the Optometrists Profession Regulation and the Bylaws of the College.

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## **OBJECTIVES AND RESPONSIBILITIES**

To ensure that Albertans have access to the best possible vision and eye health care available, the objectives and responsibilities of the Alberta College of Optometrists include, but are not limited to:

- Conducting the activities, affairs, management and governance of the College.
- Determining the academic and other qualifications required in order for an optometrist to obtain a license to practice in the province.
- Promoting the practice of optometry in the public interest.
- Monitoring, reviewing and improving on the standards of practice for optometry in Alberta in order to better serve the public, and to enhance the profession.
- Ensuring all optometrists maintain and continue to enhance their competence.
- Assisting in the resolution of any dispute that may arise between a patient and an optometrist.
- Disciplining any optometrist who has been found guilty of unprofessional conduct or unskilled practice, according to current legislation.
- Representing the profession of optometry to the Government in dealings related to legislation of the profession.
- Carrying out the intent of the Health Professions Act and the Optometrists Profession Regulation of the Province of Alberta.
- Working with government and other health care professions for the purpose of ensuring that Albertans have access to the best health care available.

**Alberta College of Optometrists**

**COUNCIL ROSTER  
September/05 to September/06**

**Executive Committee**

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## President's Report

Change is often met with skepticism and trepidation. This was certainly the case several years ago when a few members on Council expressed concern that the College's information technologies and administrative management structure were at best antiquated. The reason being, that since the College's inception in the early 90's, the administration and Council had been consumed with trying to both fully understand the leadership role of both entities and simultaneously deal with the myriad of issues at hand. As a consequence, roles, rules and responsibilities were in a constant state of flux, adapting and morphing to meet the endless barrage of demands from all sectors.

My predecessor spoke of Council members as having a like mind. I would disagree. When you have sat through as many heated discussions and debates as I have, you realize that all issues are approached from different perspectives.....sometimes dramatically different. It is through this diversity of opinion that we achieve a broader understanding. What we on Council do share, and what is critically important to the future of our profession, is a "common purpose". Namely, helping ourselves and our fellow regulated members meet the highest standards of practice and provide the best optometric care anywhere.

As a rule, optometrists generally possess a type "A" personality along with a strong sense of independence. In order for Council to objectively assess its status and performance, as well as evaluate governance options and future direction, we unanimously agreed to employ professional consultants with expertise in organizational/board development. As daunting a task as this first appeared to be, through the enormous effort put forth by our registrar, facilitator and Council, all was accomplished relatively without a hitch. Today the College Council no longer attends to administrative issues and minutiae, but rather focuses on governance and policy development and implementation, while enabling the administration to carry out it's directives in a somewhat autonomous fashion.

For Optometry to move forward, "common purpose" must manifest itself in the general membership as a team effort to establish action plans to obtain parity in reimbursement for services and expanded scope of practice that reflects the true level of our training and abilities. In jurisdictions where optometrists have been able to set aside their petty differences and inconsequential bickering, enormous goals have been achieved in the face of the same negative forces that currently chip away at our resolve. I believe we need to channel the bulk of our energy into our own growth and development.

It has truly been my privilege and honor to serve on Council with such a bright, talented and dedicated group. Our tireless, virtually unflappable, and certainly unstoppable Registrar has been the engine that has kept us all inspired and moving in the right direction.

Respectfully submitted,

Gary J. Wetmore, O.D.

## **Registrar's Report**

The Registrar is involved in many activities such as the preliminary handling of grievances, investigations of formal complaints, reviews of preliminary investigations, administration of new registrations, processing of optometric professional corporations and communication with other regulatory authorities, associations and government departments.

I am also very involved with the day-to-day operations of all standing and ad-hoc committees. With the plethora of activity undertaken by each committee, I rely very heavily on each committee's chairman and members for their insight, initiative and input. These members have performed their statutory duties in a professional manner and should be commended. I join all regulated members in thanking:

### **a. Competence Committee**

Dr. Gary Watson - Chairman  
Dr. Lance Couture - Secretary  
Members:  
Dr. Rob Eastwood  
Dr. Gene Edworthy  
Dr. Ed Jang  
Dr. Alex Kennedy  
Dr. Charles Klettke  
Dr. Peter McGuigan  
Dr. Holly Parker  
Dr. Christine Russo

### **b. Hearings Director and Membership List**

Dr. Len Bistriz - Hearings Director  
Membership List:  
Dr. Dennis Heimdahl  
Dr. Neil Starko  
Dr. Fran Tatabe  
Dr. Ernie Watson

### **c. Legislation Committee**

Members:  
Dr. Cindy Kruschel  
Dr. Craig McQueen

**d. Mediators**

- Dr. Bruce Butts - Edmonton
- Dr. Harvey Hazelaar - Edmonton
- Dr. Doug Howes – Medicine Hat
- Dr. Wayne Klettke - Calgary
- Dr. Laurie Newman - Edmonton

**e. Registration Committee**

- Dr. Mona Purba - Chairman
- Members:
  - Dr. Grant Balen
  - Dr. Angela Endres
  - Dr. Steve Krein
  - Dr. Stan Russo

**f. Canadian Examiners in Optometry**

- Dr. Ken Carlson - Alberta representative

I would also like to thank Mrs. Bernadette Jensen and Mrs. Bonnie Sniedze for performing the daily activities in the College office in an extremely efficient and kindhearted manner. It is only due to their tireless efforts and resourcefulness that the ACO office continues to run smoothly with our small number of staff.

As of August 28<sup>th</sup>, 2006, a total of 403 members, 263 professional corporations and 1 Limited Liability Partnership were registered with the Alberta College of Optometrists. The membership breakdown is as follows:

|                          |            |
|--------------------------|------------|
| Female Regulated Members | 138        |
| Male Regulated Members   | <u>265</u> |
| Total Regulated Members  | 403*       |

\*Of the 403 total regulated members, 3 are currently residing or practicing outside of Alberta.

On behalf of all regulated members, I would like to welcome the following optometrists who have registered with the ACO since last year's Annual General Meeting:

Dr. Mathew Broschak  
Dr. Sarah Cooper  
Dr. Tamara Delong  
Dr. Allison Adema  
Dr. Stephan Hinton  
Dr. Kerri Schwandt  
Dr. Adrienne Levasseur  
Dr. Randy Oliver  
Dr. Bradley Olineck  
Dr. Francis Wong  
Dr. Shelena Ask  
Dr. Christopher Johnson  
Dr. Hazel Lema

Dr. Darren Wagner  
Dr. Jared Gervais  
Dr. Michael Sy  
Dr. Minkyung Kim  
Dr. Amy Nordstrom  
Dr. Nana Boadi  
Dr. Nohad Teliani  
Dr. Sharon Winnicki  
Dr. Danielle Gordon  
Dr. Priyesh Tawar  
Dr. Ryan Kloepfer  
Dr. Rakesh Tailor  
Dr. Amanda Shaw-Gosgnach

I also serve as the ACO representative to CORA (Canadian Optometric Regulatory Authorities). We meet twice a year to discuss common issues and challenges, the CSAO national exams, the Canadian Examiners in Optometry, the Waterloo Bridging Program for international optometry graduates and the Mutual Recognition Agreement. I also attend the CAO Leadership Forum on behalf of Council.

Finally, I would like to thank all the regulated members that I have had the pleasure of interacting with this past year. As a self-regulating profession, our mandate is to protect and serve the public interest. Since this mandate may sometimes conflict with the best interest of members of the profession, I thank you all for your understanding and co-operation as my duties do become somewhat difficult at times.

Respectfully Submitted,

Gordon Hensel, O.D., F.A.A.O.

## Complaints Director's Report

The Complaints Director is responsible for accepting written, signed complaints regarding regulated and former members and fulfilling the College's mandate of public safety with proper investigation and resolution of these complaints. Fortunately, the Health Professions Act allows more avenues for resolution than our previous Optometry Profession Act.

Since last year's AGM, a total of 15 written complaints were received at the ACO office. The actions taken respecting these 15 complaints are as follows:

- a) Resolved with the assistance of the complaints director - 6
- b) Currently under investigation - 3
- c) Referred to the Hearing Tribunal - 2
- d) Practitioners referred for remediation - 2
- e) Dismissed due to no evidence of unprofessional conduct - 1
- f) Currently awaiting an expert report to be tabled in a possible malpractice lawsuit (if no lawsuit is initiated by the patient within the statutory time limit, the case will be dismissed due to insufficient evidence) - 1

The majority of complaints revolved around the patient's concern that the optometrist was incompetent because a wrong prescription was issued when the optometrist did not perform a full and complete eye examination. Other complaints included alleged inappropriate billing to Alberta Health & Wellness, violating a patient's personal sexual boundaries, an illegal business arrangement with a retail optical, improper advertising arrangement with an optician, improper business deal with an ophthalmologist for patient files, misdiagnosis of a rare condition, and refusal by an optometrist to release optical prescriptions and follow proper privacy protocol.

I would like to thank the following regulated members who performed preliminary investigations in a compassionate and professional manner:

Dr. Mark Cloarec  
Dr. Kim Crowe  
Dr. Russell Doig  
Dr. Larry Gies  
Dr. Shelly Hook  
Dr. Shane Keddie  
Dr. Charles Klettke  
Dr. Dave Koopman

Dr. Peter Laansoo  
Dr. Lloyd McDonald  
Dr. Justin Norris  
Dr. Margaret Penny  
Dr. Wesley Prince  
Dr. David Thomas  
Dr. Sindy Tromposch

Respectfully submitted,

Gordon Hensel, O.D., F.A.A.O.

## **Hearings Director's Report**

Since last year's Annual General Meeting, only one hearing had been scheduled. The case came before the Hearing Tribunal on September 21-22, 2006.

Respectfully submitted,

Leonard R. Bistriz, O.D.  
Director

## **Hearing Tribunal Report**

One hearing was held in October, 2004 and was not previously reported in the 2005 Annual Report to Government. The hearing proceeded on the basis of facts that had been agreed to by legal counsel for the College and legal council for the member. Specifically, the member inappropriately touched a patient during the course of an eye examination that occurred on or about March 31, 2004. The Hearing Tribunal determined their decision as follows:

1. A permanent letter of reprimand will remain on the practitioner's file with the Alberta College of Optometrists.
2. The practitioner is ordered to attend and successfully complete a Personal Boundaries Course as approved by the College's Complaints Director within six (6) months of the date of service of this Decision on the practitioner and the entire cost of the course, travel and associated expenses are to be borne by the practitioner. The practitioner is required to provide written confirmation of successfully completing this course to the College's Complaints Director within six (6) months of the date of service of this Decision on the practitioner.
3. The practitioner is ordered to pay \$2,000.00 in costs as a portion of the estimated \$4000.00 - \$5,000.00 College's Hearing costs. The practitioner will be permitted to pay these costs within one (1) month of the date of service of this Decision on the practitioner.
4. A "no publication order" on these proceedings. The practitioner's name will not be published although a generic summary of the Hearing and this Decision is considered permissible during year-end committee reporting and in the College's newsletter.
5. The practitioner will write and send a personal letter of apology to the complainant within 30 days of the date of service of this Decision on the practitioner, a copy of the letter is to be sent to the College confirming compliance.

Another hearing was held in September, 2006. The Hearing Tribunal has not made their final Decision at the time of writing this report. The outcome will be reported in next year's Annual Report to Government.

Respectfully submitted,

Dennis A. Heimdahl, O.D.  
Member, Hearing Tribunal

## **Mediator's Report Medicine Hat/Lethbridge Area**

I did not receive a single call this past year that was classified as a grievance.

As a result, I would like to thank all optometrists in the Medicine Hat/Lethbridge area for their continued efforts to communicate effectively with their patients.

Respectfully submitted,

R. Douglas Howes, O.D.

## **Mediator's Report Northern Region**

I would like to thank Drs. Laurie Newman and Bruce Butts for their time and expertise in manning this committee before I took over in May. Even though I have only been chairing this committee for the past several months, I can definitely agree that it can be taxing at times. Drs. Newman and Butts dealt with a total of 17 complaints and I have dealt with 5 complaints. The complaints are broken out as follows:

- Poor communication between patient and doctor/staff – 12
- Patient did not understand reason for billing for additional tests as they thought AH & W covered the complete cost of an eye exam – 5
- Privacy concerns – 2
- Dissatisfaction with vision in new glasses – 2
- Contact lens order could not be filled due to discontinuation of contact lens brand – 1

I want to thank all regulated members who responded quickly and compassionately to our phone calls which allowed for mutually reasonable resolutions of the complaints. I would also like to remind members that effective two-way communication between doctor and patient is key to patient satisfaction and I commend the membership for continuing to keep the complaints/exam ratio very low.

Respectfully submitted,

Harvey Hazelaar, O.D.

## **Mediator's Report Calgary and Area**

Since reporting to the last AGM I have mediated 13 complaints which are identified as follows:

- Missed or incorrect diagnoses – 2
- Prescription related problems – 6
- Inappropriate fees charged – 3
- Prescription release – 1
- Unprofessional attitude – 1

In almost every case the complaint was successfully resolved by mediation. I would like to commend the members of our profession for being pro-active and for keeping the lines of communication open with their patients that resulted in the very low number of complaints I received this past year. I would also like to thank those members who responded quickly to resolve mediations as they arose.

Respectfully submitted,

Wayne Klettke, O.D.

## **Privacy Officer's Report**

All of the new privacy legislation attempts to balance an individual's right to have their personal information protected and the need of practitioners to collect, utilize and disclose personal information for purposes that are considered reasonable.

Reasonableness results from reviewing the situation from a third party standpoint and being fair, rational and truthful.

Since last year's AGM a total of 4 complaints regarding possible privacy infringement were received at the ACO office. All complaints were resolved with the assistance of the ACO Privacy Officer, the complainants and the regulated members in question. Two of the complaints involved improper authorization for release of an optical prescription and two involved improper use of personal information for the purposes of mailing out office newsletters and recall cards.

In order that all regulated members learn from the experiences of others, a summary of these complaints and actions taken to alleviate future occurrences appeared in past issues of the ACO Newsletter.

If you have any concerns or questions about privacy protocols, please review the privacy information in your ACO blue binder or on the ACO web-site. Please contact the Alberta College of Optometrists office or the Privacy Commissioner of Alberta about any questions or specific issues not covered in the ACO blue binder or published on the ACO web-site.

Respectfully submitted

Gordon Hensel, O.D., F.A.A.O.

## **Competence Committee Report**

The Competence Committee's (CCs) mandate is to ensure members are practising to the required Standards of Practice established by the Alberta College of Optometrists.

Practice reviews are conducted which involve a chart audit of various types of examinations and procedures, a billing audit, an equipment check, and a case presentation. A copy of the practice review report form is included in your ACO blue manual for ease of reference.

Standards of Practice and Guidelines to the Standards of Practice are frequently reviewed and may be updated periodically. The most recent edition contains three separate blue and white booklets which were provided to all members in 2005.

The CC also evaluates new technologies and may request new guidelines respecting these technologies from the ACO Council. Any changes to the Standards of Practice or the Guidelines to the Standards of Practice will be sent to all members and all subsequent practice reviews will include these new changes. Additional information that the CC may wish to circulate to members about practice reviews will be communicated via the ACO newsletter.

A CC Think Tank was held in early March at the ACO office in Edmonton and members of the CC and several ACO Council members met to more clearly standardize the review process and amend the practice review form to best reflect the current mode of optometric practice. We also discussed the current frequency of reviews and determined that, with increasing membership, it was becoming more challenging to review all members within a five year rotation. It was agreed that rather than increasing the number of reviewers, it would be more efficient and effective to adopt a policy whereby those members who were found to be performing at a satisfactory level be designated a longer time between reviews. As a result, members obtaining a satisfactory review or satisfactory review with minor remediation (providing they show evidence of improvement in their standards of practice) will be reviewed once every 8 years. Members who have undergone their first review in the province or those requiring major remediation will be placed on a four year review cycle and thereafter on an eight year review cycle once their review has been deemed satisfactory.

This spring 40 members were reviewed. 12 members received a satisfactory review and 24 members received a satisfactory review requiring minor remediation. I am pleased to advise that all 24 members replied and have complied with their remediation. Most of these members will now be placed on an eight year rotation cycle with the exception of those who were new to the province and had undergone only one practice review. 2 members received an unsatisfactory review and will undergo a 90 day follow-up review at their cost. 2 members were referred to the Complaints Director for inappropriate billing to Alberta Health and Wellness.

I would like to thank CC members Drs. Peter McGuigan, Charles Klettke, Lance Couture, Gene Edworthy, Ed Jang, Rob Eastwood, Alex Kennedy, Holly Parker and Christine Russo who have done a commendable job over the course of the past year. Unfortunately, Dr. Kennedy will be stepping down from the CC, but he hopes to be able to return in a year or two. I would also like to thank Mrs. Bonnie Sniedze, Mrs. Bernadette Jensen and Dr. Gordon Hensel for their valuable assistance to our group.

Respectfully submitted,

Gary W. Watson, O.D.  
Chairman

## **Public Members Report**

### **Governance**

Part 1 of the Health Professions Act (HPA) deals with governance. It includes the authority to create Colleges to regulate Alberta's health care professions. Part 1 also creates the Council as the governing body of the College.

The Council of the Alberta College of Optometrists (ACO) consists of nine members, only eight of whom have voting rights. (The ninth, non-voting member is the past president of the Council.) Part 1 of the HPA requires that 25% of voting councilors be public members. Thus, with a Council of eight voting members, two must be public members.

From time to time, the Government of Alberta advertises for public members to serve on various regulatory boards. Applicants are screened and those that clear this process are included on a roster of candidates available for appointment. When a regulatory body requires a public member, the government forwards résumés from a number of candidates to Council. Council reviews the résumés, and forwards its prioritized choices to government. An appointment is then made through an Order-in-Council.

I was appointed by Health Minister Gary Mar in September 2004, just in time to attend that year's Annual General Meeting (AGM) of the College. Thus, this is my third AGM and the second year of service.

Appointments are made for three year terms, with the possibility of one 3-year renewal. Recently, long standing public member Mike Nish resigned from the ACO Council after several years of service to the College and profession. The ACO Council will miss his enthusiasm and ability to view discussions in a fair, honest, and equitable manner.

On August 9<sup>th</sup> by Order of the Lieutenant Governor in Council Mrs. Gayle Stevens-Guille of Edmonton was appointed the new public member on the ACO Council. Her term of office shall be until August 8<sup>th</sup>, 2009. Mrs. Stevens-Guille will be attending her first meeting of Council on August 23<sup>rd</sup>.

### **Role of Public Member**

The Health Professions Act (HPA) dictates that all self-regulated professions include public representation on their boards. The reason is to provide balance, transparency and of course, to ensure the public interest is protected. Balance is provided, in the case of the ACO, by the ratio of 6 optometrists to 2 lay people as voting members on the College Board. The public members also examine issues through a “public interest filter” that is not anchored within the profession. In fact, their contribution to Council debate is often through the “eyes” of the general public.

Shortly after my appointment as a public member, I attempted to consult with the Government of Alberta about their expectations of public members. In answer to the question “does the public member represent the interests of the Government of Alberta, or the people of Alberta?” officials responded in such a way as to suggest that they had never been asked this question before. However, the considered reply was that public members represent the interests of the people.

Alberta Health & Wellness provides no orientation and no resources to the public member for research. Public members serve basically as volunteers, with only a token *per diem* paid by government. To ensure objectivity, regulatory colleges cannot provide public members with any additional funds. Travel expenses to attend board meetings are covered at government rates. I personally have not been consulted by Government about any issue whatsoever.

Public members are often challenged by issues that require specialized knowledge of specific profession-based practice and technology. Thus, it seems that public members face considerable learning challenges with a paucity of resources. Despite this, we are energized by the opportunity to serve the various health professions. I am also truly inspired by the professionalism of the optometrists who sit on the ACO Council and their dedication to serving both optometry and the public interest. I am also comforted by the professional rigour and compassion shown by the ACO Registrar and staff.

### **Public Members & Filters**

As stated previously, public members represent and protect the people of Alberta at Council meetings. They attempt to bring to the table the public’s expectations for skilled and competent care; and fairness and efficiency in handling problems. Of course, individual public members filter Council debates according to their own values, experiences and perceptions of the public interest.

For example, reflecting on my professional consulting practice in the north Peace country, I am especially concerned to ensure that ACO regulations do not inhibit the development of innovations, better practices and technology. I also want to ensure that rural, northern and minority Albertans have timely access to quality optometric services.

## **Protecting the Public Interest**

The Health Professions Advisory Board (HPAB) was created by the Part 1/Governance section of the HPA to investigate and advise the Minister on matters related to the HPA and the Government Organization Act. The ACO has welcomed and supported this advisory board since its proclamation in December, 2001. This has meant support for a process of transparent debate of issues important to the provision of health care in an open forum. For example, this process permitted any profession seeking to expand its scope of practice to submit its proposals to the Advisory Board which would then seek input from all other stakeholders. The ensuing debate would expose the strengths and weaknesses of such a proposal with an increased likelihood that decisions would be made in the public interest.

The Minister appears to have amended this process in favour of allowing the HPAB to discuss issues only related to restricted activities or professions hoping to be regulated by the HPA. Discussions related to non-restricted activities are now debated and decided directly within Alberta Health & Wellness. Stakeholders may be invited to make submissions to both processes, but the debate between stakeholders is no longer transparent. This suggests the influence each stakeholder may bring to the debate is determined by the civil service, and not the more broadly-based HPAB. As a result, the civil service may assume more authority in determining the public interest, or introduce other factors into decision making.

The ACO believes that the majority of the public relies on the government to ensure that all health professionals are regulated within a legislative framework that mirrors their education and competence. Since the list of restricted activities is antiquated, we believe that the HPAB should take a more prominent role in debating both non-restricted and restricted activities. This will alleviate the workload within the Department of Health & Wellness as well as ensuring open and transparent debate for all health professions.

## **Marketing**

One interpretation of the shift of process from the HPAB to the civil service is that Alberta Health & Wellness is moving to a more market-based health system. An implication is that existing structures such as the regulatory colleges and the HPAB may lose some ability to protect the public. Another implication is that the public will need to become more knowledgeable in health procedures and the qualifications of those professionals that perform them.

It is very likely that the public is unprepared for these shifts. This suggests that the regulatory colleges and the professional associations may have to expand their roles into education, and even to marketing and explaining their professions.

## **Conclusion**

In conclusion, it has been an honor to serve the Alberta public in my role on the ACO Council and I look forward to the many challenges and opportunities that the future will bring.

Respectfully submitted,

Gary Christopherson  
Public Member

**2006**  
**AUDITED**  
**FINANCIAL STATEMENTS**