



## BRIEFING NOTE

TO: Council

FROM: Fazal Khan, Registrar

DATE: October 1, 2018

SUBJECT: Further updates to the Jurisprudence Module 1– Professional Boundaries and Sexual Abuse Handbook

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### **Purpose:**

To review further updates to Module 1 of the Jurisprudence Handbook on Professional Boundaries and Sexual Abuse

### **Background:**

At its meeting in January, Council approved updates to Module 1 of the Jurisprudence Handbook on Professional Boundaries and Sexual Abuse. The Module was developed in conjunction with Richard Steinecke in 2016, and the updates were to address the significant legislative amendments that were passed on May 30, 2017 in the form of the *Protecting Patients Act, 2017*, or Bill 87.

All opticians are required to complete Module 1 at least once every three years as part of their Quality Assurance requirements. In addition, on December 5, 2017, Council approved the Sexual Abuse Prevention Training Policy which requires all Council and Appointed Non-Council Members to complete Module 1 as part of their onboarding process and every three years subsequently.

On May 1, 2018, the legislature passed three new regulations under the *Regulated Health Professions Act, 1991* (RHPA). One of the regulations pertains to the definition of “patient” for the purposes of the sexual abuse provisions of the RHPA. In light of the new regulation, we are proposing that an additional paragraph be added to Module 1 that makes reference to the new criteria that have been prescribed with respect to the definition of patient, as follows:

It is also important to note that, when it comes to sexual abuse, the *RHPA* takes a very broad approach to determining who is a patient. There is no exhaustive definition, and it can depend on the circumstances. The *RHPA* makes it clear, however, that at a minimum, a person will be considered a member’s “patient” when they have a direct interaction with the member, and any one or more of the following factors are also true:

- the member provided the individual with a health care service and charged the individual for that service, either directly or through a third party (for example, an insurance company);
- the member contributed to the individual's health record or file; or
- the individual consented to a health care service recommended by the member.

There is a very narrow exception, but it would almost never be available to opticians as emergency situations / minor service where the referral of the patient to another practitioner is not possible hardly ever arises in the opticianry context.

This proposed addition is being brought directly to Council in order to expedite approval so that the Jurisprudence Handbook can be updated and made available to members and Council/Committee members as soon as possible.

At the next meeting of the Patient Relations Committee, the Committee will be asked to review and approve one additional test question relating to the above-paragraph.

**Action Required:**

1. Does Council approve the proposed addition to Module 1 of the Jurisprudence Handbook?