

APPLICATION FOR OWNER OR ASSOCIATE MEMBERSHIP

Section A: Facility Information			
Owner, Operator	First Name	Middle Initial	Last Name
Name of Applicant	First Name	Middle Initial	Last Name
Clinic Address <i>(Please attach address list of all facility locations, if more than one)</i>	Street Address		Email
	City	Province	Postal Code
	Telephone	Facsimile	
Total Number of Employees			
Type of Services (by facility if specific locations offer different services) :			

Section B: Membership Information			
Enclosed with my application is my membership fee in the amount of: <i>(Please check one of the appropriate boxes and attach address list of all facility locations)</i>			
Member:	<input type="checkbox"/>	\$350	1-2 Clinics
(Owner/Operator)	<input type="checkbox"/>	\$750	3-5 Clinics
	<input type="checkbox"/>	\$1,250	6-9 Clinics
	<input type="checkbox"/>	\$2,500	10-29 Clinics
	<input type="checkbox"/>	\$5,000	30+ Clinics
Associate Member:	<input type="checkbox"/>	\$50	Member-Clinic Employee (e.g. Technologist) or Vendor
I am available to participate on working committees of IDCA			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Section C: Payment Options		
Members may complete this application providing VISA credit card information.		
_____	_____	_____
(credit card nos)	(name on the card)	(expiry date)
<ul style="list-style-type: none"> • Either fax in this form using 905-707-0616 or email it to info@idca.ca. A receipt will be provided once payment is processed. • Or, you may mail in this application with a cheque made out to the "IDCA". The mailing address is IDCA, 7330 Yonge St., Ste 120, Thornhill, ON, L4J 7Y7. 		

Section D: Signatory			
Please sign and print your name clearly, along with your position and the date of application			
_____	_____	_____	_____
(Signature)	(Please print Name)		
_____	_____	_____	_____
(Position)	(Date)		
FOR OFFICE USE ONLY: Date received: ____/____/____ Time Received ____:____ AM / PM			

MESSAGE FROM THE BOARD

We delayed in delivering this newsletter to provide the latest information regarding the legislative reform that will significantly affect our industry. At our annual conference, Ministry officials discussed the proposed repealing of the *Independent Health Facilities Act, 1997*, in favour of the broader omnibus *160: Strengthening Quality and Accountability Act, 2017*. In general, the changes regarding quality assurance and accountability that they have proposed aim to simplify and consolidate standards for community-based healthcare providers so there is a single, uniform assurance system and compliance regime. Furthermore, enhanced monitoring of complaints and incident reporting were proposed to ensure greater accountability to taxpayers.

During the past summer, the IDCA took part in Ministry consultations regarding the proposed legislative changes. Last month, we were one of only a few organizations – and the only one to represent IHFs -- to be invited to present to the Standing Committee on General Governance, which reviewed the proposed legislation (Bill 160) at Queen's Park. During our presentation and the following question period by Committee members, the IDCA raised concerns regarding a number of matters contemplated in the legislation -- namely, the adequacy of funding to our sector, the need for permanent inclusion of provider representation in change development, and the lack of transitional provisions to allow providers time to implement operational changes.

Committee members were reminded that while hospitals are specifically funded for compliance and administrative protocols, and can generate additional revenue through their fundraising foundations, community-based providers are limited to technical fee funding, which has remained virtually unchanged since the 1980s. This is unlike the 21st century reimbursement afforded to our sector in British Columbia and Alberta.

The elected officials were also reminded that currently 50% of diagnostic procedures -- some 10 million diagnostic services -- are performed annually at fewer than 1,000 community-based facilities throughout Ontario. Given this significant role in the public healthcare system, inclusion of sector representation in the development phase of change initiatives is imperative. For example, much of the implementation detail is proposed to be left to be developed under regulation. The proposed legislation leaves too much discretion to the Ministry and the executive officer for community health facilities. Additional policy guidance is necessary in order to ensure that actions taken do not prejudice the rights of existing healthcare providers. Possible arbitrary actions could be unfair and lack natural justice. To ignore providers in the development phases is to risk creating programs which will almost certainly have unintended consequences and implementation hurdles that could easily have been addressed by the IDCA, as a long-standing sector representative.

Heads Up...

REVISED DI STANDARD COMING

During the past few months, the College of Physicians and Surgeons (CPSO) solicited comments on proposed changes to the IHF Clinical Practice Parameters for Diagnostic Imaging. External stakeholders, including the IDCA, submitted comments and the CPSO taskforce is currently reviewing them.

The final Standard for diagnostic imaging is expected to be issued by the end of January, 2018.

HOLD THE DATE!

September 21, 2018. The next IDCA conference will be Friday September 21st at a new location: Hazelton Manor, just east of Jane Street, just above the 407) in Vaughan.

We look forward to seeing you there!

The IDCA has a proud history of representing the community health facilities sector and of advising Ministry officials as a practical and solutions-focused partner for almost 30 years. We enter 2018 with a reservation at the table as the Ministry begins consultations in the development of the regulations that will replace existing protocols and procedures, following passage of Bill 160. As always, we'll keep all IHF owners informed. At next year's conference, we expect government officials to further share insights and details.

Wishing you a prosperous 2018!

Employer Protection from Employee-related Liability

On November 22, 2017 Bill 148: Fair Workplaces, Better Jobs Act, 2017, was passed with Royal Assent and with it comes many changes to the *Employment Standards Act*. As we learned from Ron Minken of Minken Employment Lawyers at our fall IDCA conference, there are several changes regarding human rights and accommodation in the workplace as well as high risk areas of liability and associated costs.

Some notable changes that affect all employers and their personnel are:

- Mandatory clauses in employment agreements to include required wording regarding termination, non-solicitation, non-competition and confidentiality.
- Increased minimum wage – general minimum wage will become \$14/hour on January 1, 2018 and rise to \$15/hour on January 1, 2019.
- Equal pay for equal work – casual, part-time, temporary, and seasonal employees must be paid the same as full-time employees when performing the same job for the same employer.
- Employers are prohibited from misclassifying their employees as independent contractors.
- Employees are entitled to be paid three hours of work if their shift is cancelled within 48 hours of its scheduled start.
- Employees are entitled to 3 weeks of paid vacation after 5 years working for the same employer.
- Employees are entitled to 10 Personal Emergency Leave days per year and 2 of those days must be paid.
- Employers will not be able to request a certificate from a qualified health practitioner from an employee who takes Personal Emergency Leave.
- Domestic or Sexual Violence Leave has been created, with the first 5 days of the leave being paid.
- Several other family-related leaves are expended upon; and,
- Monetary penalties that Employment Standards Officers can issue to employers for breaching the *Employment Standards Act*, are increased.

While there are different dates for when certain sections come into force, knowledge of the new rights and obligations under the new Act is key to ensure compliance and enforcement of the new or amended provisions.

The aforementioned information was provided by Minken Employment Lawyers. To learn more about the changes under the new legislation and its impact and how they will affect your business, consult an employment lawyer.



GET CPR CERTIFIED

First Aid & CPR/AED Certifications for Healthcare Professionals & Support Staff

Whether you need CPR training for a job requirement, school or you simply want to learn how to respond in the event of an emergency, come learn the skills which can save a life.

HeartSafe EMS teaches the most up-to-date techniques and the classes are designed to be informative and fun for all participants. HeartSafe EMS is an approved delivery agency for the Ontario WSIB & Labour Canada.

Course includes

- First aid & CPR reference manual
- Certification card at the course
- A wall certificate in the name of the organization.
- Onsite, for your convenience.
- Simple, practical, realistic and stress free.
- Taught by experienced Paramedics. Learn from the best teacher - experience.

Please call or email us for more information.
Tel: 416.410.4911 Toll-Free: 1.888.322.3791
info@heartsafe.ca www.heartsafe.ca



Quality Management Partnership Embarks on Building Supports for Quality Improvement

In the fall of 2017, an online survey and a series of interviews with Mammography Quality Management facility report recipients evaluated the usability of collected 2017 data. The results of this evaluation are being used to make potential improvements to the 2018 reports.

The Quality Management Partnership is also developing supports for quality improvement in mammography, including:

- An online resource hub, LearnQMP;
- Training in facilitated feedback, a method for having a conversation about performance and identifying areas for quality improvement;
- An image library that radiologists and MRTs can use for self-assessment and up-skilling;
- Standardized templates to improve the consistency and clarity of radiological reports; and
- A toolkit for facilities implementing breast imaging peer review.

The Partnership is also exploring how to expand data collection to all breast imaging, and developing plans for public reporting.

For more information about the Quality Management Partnership or the Mammography QMP, please visit qmpontario.ca, or contact info@qmpontario.ca.

Workplace Health & Safety = Compliance + Due Dilligence

Are you ready for a Ministry of Labour (MOL) visit at your clinic or office?

MOL inspectors can come into a workplace anytime seeking compliance and proof of an owner's due diligence with an established occupational health and safety (OHS) program.

If you regularly employ more than five employees, then you need a written health and safety program. When 20 or more employees are regularly employed, a Joint Health and Safety Committee must be set-up with two individuals trained and certified.

In Ontario, there are also four mandatory trainings that all employees must take:

- WHMIS 2015
- Health and Safety Awareness
- Workplace Violence and Sexual Harassment
- Accessibility for Ontarians with Disabilities Act (AODA).

Due Diligence Defined

"Due diligence" means that employers must take all reasonable precautions to prevent injuries or accidents in the workplace. Due diligence must be:

- specific, not assumed;
- communicated to all employees;
- reviewed;
- documented; and
- monitored.

This duty also applies to situations that are not addressed elsewhere in the occupational health and safety legislation.

Due Diligence is Critical

Although tickets of \$295 per offence may be issued, the fines that may be levied for an offence are hefty: a \$500,000 maximum fine per offence for corporations; a \$25,000 and/or one year imprisonment maximum penalty per offence for individuals; plus a 25% surcharge for fines over \$1,000.

The trend is an increase in supervisory personnel prosecutions and penalties. Fewer charges are being withdrawn against individuals with jail terms being sought regularly following amendments for criminal liability made to the Criminal Code under Bill C-45 in 2004. Anyone who fails to meet their duty and shows "wanton or reckless disregard" for the lives or safety of others can be charged with criminal negligence. However, if charged, a defendant may be found not guilty if he/she can prove that due diligence was exercised. In other words, the defendant must be able to prove that all reasonable precautions were taken to protect the health and safety of workers.

Key Elements of Your OHS Management System

- ✓ Identify risks and hazards in the workplace as part of a Job Safety Analysis(JSA).
- ✓ Develop company-specific policies and procedures based on your JSA.



PocketHealth

Direct-to-Patient Record Sharing

Trusted by over 100 imaging centres across Ontario

Join the network and give your patient population a more secure, responsible way to access their imaging records

www.mypockethealth.com
inquiries@mypockethealth.com
1 (855) 768-4455

- ✓ Communicate and train all employees on your policies/procedures and applicable standards, issue ongoing reminders and take disciplinary action as required.
- ✓ Promote ongoing hazard identification and supervisory monitoring for compliance with regular inspections and correction of hazards.
- ✓ Monthly review your health and safety program with inspections and hazard assessments, and compliance audits every 18-24 months.

Supervisors should:

- ✓ Ensure policies and procedures are understood and followed.
- ✓ Advise employees of any hazards and potential exposures.
- ✓ Direct monitoring and reminders.
- ✓ Increase monitoring for high risk tasks.
- ✓ Enforce disciplinary actions for non-conformance.
- ✓ Prove enforcement with documentation such as checklists.

The bottomline: courts expect that rules will be understandable, up-to-date and available to everyone in the workplace.

Guidance & Coaching in 2018!

In the coming months, the IDCA will partner with 4S Occupational Health & Safety Advisory to enable IHF owners to be in compliance and stay in compliance! More details regarding online/live/done-for-you formats will follow soon.