



Stepping Right

PRESIDENT'S
MESSAGE

COMMITTEE
REPORTS

FINANCIAL
ACCOUNTABILITY



ANNUAL REPORT 2016

**ONTARIO PODIATRIC MEDICAL
ASSOCIATION**



*Women are four times as
likely to develop foot
trouble than men.*



Ontario
Podiatric
Medical
Association

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OPMA

EXECUTIVE COMMITTEE

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President

Tej Sahota, DPM
Vice President

Peter Higenell, DPM
Treasurer

Kel Sherkin, DPM
Past President

Martin Brain, DPM
Secretary

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David Greenberg, DPM

Neil Naftolin, DPM

PAST PRESIDENTS

Kel Sherkin, DPM
2015-2016

Hartley Miltchin, DPM
1995-1997

Sheldon Freelan, DPM
1979-1981

Bruce Ramsden, DPM
2010-2015

Tom Stevens, DPM
1993-1995

Robert Chelin, DPM
1977-1979

James Hill, DPM
2008-2010

Neil Koven, DPM
1991-1993

Robert Davidson, DPM
1975-1977

Martin Brain, DPM
2006-2008

Anthony Zamojc, DPM
1989-1991

Chris Hastings, DPM
1973-1975

Kel Sherkin, DPM
2004-2006

Neil Naftolin, DPM
1987-1989

Thad Zarras, DPM
1971-1973

Millicent Vorkapich-Hill, DPM
2002-2004

Lloyd Nesbitt, DPM
1985-1987

John Foote, DPM
1969-1971

Peter Stavropoulos, DPM
1999-2002

David Greenberg, DPM
1983-1985

Robert Brain, DPM
1967-1969

Bruce Ramsden, DPM
1997-1999

Robert Goldberg, DPM
1981-1983

Edgar Ryan, DPM
1965-1967

PRESIDENT'S REPORT

Doctors,

When I took over the Presidency of the OPMA last year I knew that the work involved in managing the aftermath of the HPRAC report would be our principal preoccupation and priority. Nonetheless, I also wanted to reorganize, modernize and ensure compliance with our governance structure and I also wanted to ensure that the OPMA is spending its members' fees appropriately and with a strong commitment to economy and efficiency.

Because events are rapidly evolving, I will make a verbal status report at our AGM pertaining to the scope of practice changes that the College recommends and the OPMA supports.

On the matter of our corporate governance, your Board has approved a number of changes to the OPMA's By-Laws that will be presented to the AGM for review and ratification.

We have also been careful to prepare agendas and accurate and complete minutes of Board meetings. Minutes of Board meetings can be viewed by members on the OPMA website.

We have also tracked action items and made sure that each significant expenditure is reviewed and approved in advance by the Board of Directors. We have caught up on our corporate filings to the federal and provincial governments and we are working to ensure that every supplier or vendor relationship is confirmed by an executed contract.



James Hill
OPMA President

We have also transferred the secretariat functions of the OPMA to The CG Group.

I will report verbally on some of the others changes we have made at the AGM, but I'm proud and happy to report that I believe substantial progress has been made over the last year in our organizational efficiency and compliance and in the OPMA's accountability and transparency to our members.

Our numbers as Doctors of Podiatric Medicine in Ontario are diminishing year to year, but the engagement and energy of our loyal membership remain consistent and true.

"Steadfastness. That word sums up the continued driving force behind our profession's advancement in Ontario. The foot care model under consideration is the culmination of decades of effort to 'step right' and to step forward to ensure proper foot health for Ontarians."

We must reach out to the Ontario practitioners who are not OPMA members with enthusiasm for what lies ahead.

After 20+ years of commitment and service to our fellow OPMA members and the citizens of Ontario, we are on the brink of real change to our profession.

The value of an OPMA membership is real.

The OPMA has always supported our patients' best interests, even those under the care of non-OPMA members, without hesitation.

For example, as the HARP Committee report will detail, our interaction with the Ministry and the College on behalf of several non-OPMA practitioners was successful in gaining the desired result for each individual and certified the validity and value of our Association.

I urge each and every one of our veteran members to fortify our young members and also rally prospective members to join our ranks.

The wisdom and dedication of our long-standing membership have been a source of comfort to me this past year as we prepare for the challenges that lie before us.

I am looking forward to the AGM in order to thank each and every one of you for your support.

I'd like to thank the OPMA Board members for their assistance and willingness to donate their time and resources to our Association. What has been accomplished this past year could not have been without your advice and assistance.

Faternally,



James Hill, DPM, FACFAS
President, Ontario Podiatric Medical Association

"Professional associations are not clubs. They are self-governing bodies dedicated to advancing the collective interest of the entire profession. For practising podiatrists who are not OPMA members, you are missing the importance, some might say duty, to invest in podiatry's future. We need you."

FOOT HEALTH REPORT

This year, I was disappointed the OPMA Executive made the difficult, but prudent, decision to not make an investment in a 2017 public education campaign for Foot Health Month.

I had a number of exciting new channels explored and media outlets ready to partner with us.

Resources had to be dedicated to the Association's on-going efforts, also in the public interest, to advance the HPRAC Review application for Ontario to enter the 21st century of foot health care with a new podiatric scope and foot care model.



Kel Sherkin, DPM

The Association did join forces with the Foot Health Month efforts of the CPMA as an alternate option to public education and awareness of foot health conditions and care.

The Foot Health Month radio spots, print ads, and digital ads are all still timely, relevant and online housed beautifully on the website and will soon be advanced through a planned effort to promote the website and this content.

I remain committed to the importance of branding the profession, promoting foot health and promoting the role and impact of podiatry in Ontario.

Respectfully Submitted,

Kel Sherkin, DPM
Chair

OPMA FOOT HEALTH MONTH ADS

GOOD HEALTH FEET FIRST

HEEL PAIN

Heel pain is an extremely common complaint with several common causes. It is important to get a correct diagnosis for effective treatment. The causes may be plantar fasciitis due to irritation and inflammation of the tight tissue that forms the arch of the foot, Tarsal Tunnel Syndrome that causes a large nerve in the back of the foot to become entrapped or pinched, heel spurs or stress fractures. Ontario's registered Podiatrists are specially trained to treat this and other foot conditions. Good health requires healthy feet. Act now. May is Foot Health Month.

For the Podiatrists nearest you go to www.opma.ca

MAY IS FOOT HEALTH MONTH

GOOD HEALTH FEET FIRST

HAMMERTOES

A hammertoe is a deformity that can occur on any toe, primarily toes 2-5. The toe is bent at the middle joint flexibly resembling a hammer. Left untreated, hammertoes become inflexible and require surgery that can be done in office under local anesthesia. Other treatments include padding and shoe modifications. Ontario's registered Podiatrists are specially trained to treat this and other foot conditions. Good health requires healthy feet. Act now.

For the Podiatrists nearest you go to www.opma.ca

MAY IS FOOT HEALTH MONTH

GOOD HEALTH FEET FIRST

WARTS

Warts are viral infections of the skin. At least one-half of adults will be infected during their lifetime. Foot warts present usually on the sole of the foot in all age groups. Wart treatments may include new laser technology, cryotherapy or freezing of warts with liquid nitrogen or surgery. Ontario's registered Podiatrists are specially trained to treat this and other foot conditions. Good health requires healthy feet. Act now.

For the Podiatrists nearest you go to www.opma.ca

MAY IS FOOT HEALTH MONTH

GOOD HEALTH FEET FIRST

FUNGAL NAILS

Beides being ugly to look at, fungal nails should not be left untreated. There are many species of fungi that can affect nails. The most common is called Trichophyton Rubrum. Fungal nails are caused by fungus that is caught from moist, wet areas. Creams are not effective. Some of the topical medications may be effective. Laser when used will produce an improvement in the condition. Ontario's registered Podiatrists are specially trained to treat this and other foot conditions. Good health requires healthy feet. Act now.

May is Foot Health Month. For the Podiatrists nearest you go to www.opma.ca

MAY IS FOOT HEALTH MONTH

GOOD HEALTH FEET FIRST

BUNIONS

The common bunion is a localized area of enlargement of the inner portion of the joint at the base of the big toe. The enlargement represents a misalignment of the big toe joint and, in some cases, additional bone formation. Treatment of bunions can include alteration of footwear, orthotics or surgery. Ontario's registered Podiatrists are specially trained to treat this and other foot conditions. Good health requires healthy feet. Act now.

May is Foot Health Month. For the Podiatrists nearest you go to www.opma.ca

MAY IS FOOT HEALTH MONTH

GOOD HEALTH FEET FIRST

CORNS

Corns and calluses are annoying and sometimes painful thickening that form in the skin in areas of excessive pressure. Corns are often painful, even when they are small. Corns can be found on the tops of the toes and between toes. Common locations for calluses are on the sole of the foot, over the metatarsal and/or "half" of the foot. Corns can be treated with non-medicated pads or surgery. Ontario's registered Podiatrists are specially trained to treat this and other foot conditions. Good health requires healthy feet. Act now.

For the Podiatrists nearest you go to www.opma.ca

MAY IS FOOT HEALTH MONTH

PUBLICATIONS REPORT

Every year I report to the membership on the status of the inventory of the existing two brochures on Podiatry and on Orthotic Devices, generously sponsored by Langer Biomechanics.

The inventory is now at a level that has us thinking it is time to develop a new series of brochures on foot health conditions, the podiatry profession, orthotic devices and other topics important to public awareness and patient education.

The initial idea is to produce six brochures to support the work that Kel Sherkin did as part of Foot Health Month ads on Bunions, Corns, Fungal Nails, Hammer Toes, Heel Pain and Warts and then add Diabetic Foot and Orthotic Devices to the line-up.

The OPMA Secretariat has been tasked with developing rough concepts for the brochure series and this Publication Committee will review and make recommendations, as well as seek sponsorship for their production.

We will also make the brochures available in e-format for posting to member websites.



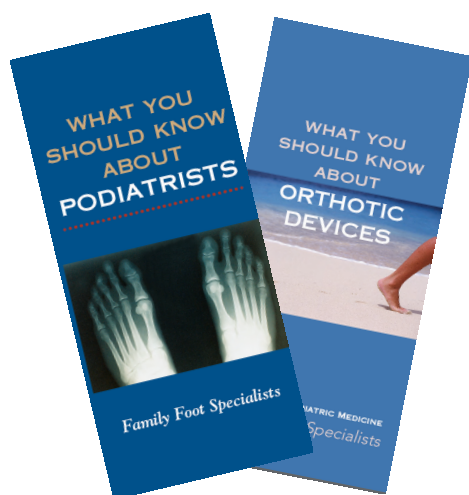
David W. F. Roth, DPM

If members are interested in ordering any of the remaining hard copy brochures, please contact me directly.

Respectfully Submitted,

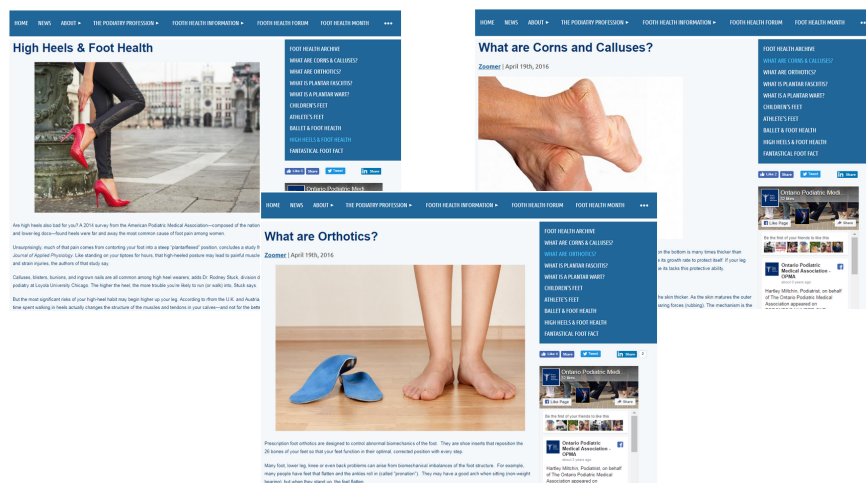
David Roth DPM/Ch

David W.F. Roth, DPM
Chair



New Publication Series under development for 2018

*OPMA would like to thank
Langer Biomechanics*



WEBSITE REPORT

The OPMA website was completely overhauled over this past year.

Members will find that, in addition to a new presentation format, the navigation features are greatly improved, the functionality of the Find A Podiatrist feature has been transformed and with a click the public can search for an OPMA member by city, name or postal code. OPMA members were invited and many accepted the opportunity to add a direct link to their clinic website and a clinic logo for impactful branding.



Improved Navigation

Easy of Search

Link to Foot Health Campaign

Conference Promotion

There was an updating of content and simplified tabs and content sections to make the user experience more friendly.

Additional content includes a Foot Health Month Forum to leverage the investment from ads and digital material developed for the public education campaign and addition of the Foot Facts in a poster format.

There is also a bigger space dedicated to promoting events such as the annual conference to assist Hartley Miltchin's efforts to secure sponsors and promote registration.

The online registration renewal portal received an investment to add new security features to protect data provided during renewal and keeping the site compliant with the new online payment processing requirements.

Watch for more digital communication opportunities to be implemented in the coming year, particularly related to SEO Search Engine Optimization functions to drive more traffic to the site.

Respectfully Submitted,

OPMA Secretariat

MEDIATION COMMITTEE REPORT

The Mediation Committee, formerly the Ethics Committee, was created by the Association to provide a forum to air conflicts and complaints within the Profession and from the Public. Over the years, we have been able to resolve matters that may have resulted in a diminished public opinion of the Profession. We were also able to relieve the College of dealing with minor issues.

I am pleased to report that the Committee has been almost stagnant for the second year in a row. This speaks to the improved patient relations and professionalism of our members. The Committee had only one contact with a previous complainant (from last year) regarding our suggested resolution of the problem. Sadly, we were unable to satisfy this individual and had to refer the matter to the College.

I remind our members of the existence of this Committee. If communication seems to have broken down with a client we recommend that you refer them to this Committee for mediation. If you feel that one of our members has breached our Code of Ethics this Committee is available as recourse.

Respectfully Submitted,



Robert L. Goldberg, DPM
Chair



Robert Goldberg, DPM



Bruce Ramsden, DPM



Cary Collis, DPM

HARP REPORT



John Lanthier, DPM

As reported in the OPMA's last Annual Report, the Ministry of Health and Long-Term Care has been working sporadically on a wholesale reform of the HARP Act for the better part of a decade.

The task was turned over to Health Quality Ontario (an independent advisory body to the Minister of Health and Long-Term Care) and HQO made its report with recommendations to the Minister last July. Both the Ministry and HQO had consultations with stakeholders (including the OPMA) and experts as part of their reviews.

The consensus coming out of those consultations was that the current HARP Act:

- Is seriously outdated and has not kept up with technological innovations in the field;
- Lacks flexibility to respond to health care system and technological changes;
- Is out of step with the regulatory standards in other Canadian and foreign jurisdictions;
- Is limited in scope. For example, does not cover non-ionizing radiation or devices that detect energy applied by pharmaceutical delivery;
- Does not cover device performance or quality control.

In addition, the consultations identified system gaps, such as ineffective (or nonexistent) enforcement and lack of clarity and transparency by the Ministry in performing its regulatory functions.

The consultations also discovered a strong desire that HARP regulation be integrated with Ontario's broader health care system and be able to respond to its needs.

The Ministry has determined the course of action it wishes to take in modernizing the regulatory framework for radiographs, but because of its length and complexity it is doubtful that the necessary legislation will be table in, or at least passed by, the Legislature before it dissolves next Spring for the 2018 election. Some of the changes can be implemented by regulation under the current HARP Act before the election.

The Ministry has clearly indicated that it contemplates no changes to those professions that may order or take radiographs or be appointed as Radiation Protection Officers.

That means in our case that only members of the podiatrist class, DPM/chiropractors and any other chiropractor who has completed a four-year course of instruction in chiropody will continue to be eligible to order and take X-rays.

In response to a complaint from a DPM, the OPMA learned that the Ministry had, perhaps unknowingly, changed its interpretation of the HARP Act so that only members of the podiatrist class would be eligible to order and take x-rays and be eligible for appointment as Radiation Protection Officers.

The OPMA immediately intervened with the Ministry and was told by the Ministry that this interpretation originated with the College.

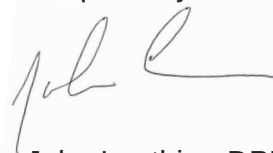
The OPMA took the matter up with the College that denied having any role whatsoever.

In any event, the Ministry looked to the College to help clarify the interpretation and pursuant to a meeting between the College and Ministry officials the Ministry reverted to its previous interpretation of the Act.

A letter to that effect was sent to the College and is posted on the OPMA website.

Should any current or future DPM/ chiropodist encounter these interpretation difficulties with the Ministry, they should use that letter to make their case.

Respectfully Submitted,



John Lanthier, DPM
Chair

"The machinery of government grinds slowly, but for our profession, the bottom line is we continue to be eligible to order and to take X-rays."

TREASURER'S REPORT

Over the past couple of years, the OPMA has experienced some substantial expenditures. In particular, the costs involved in the preparation of our submission to the HPRAC Review. Cost-cutting measures have included consolidation of website, administrative and secretarial support under one secretarial function now being operated by The CG Group. I would anticipate a reduction in our overhead expenses for upcoming years.

We have been fortunate to receive income from conferences over the last few years, which has helped to benefit our cash flow.



Peter Higenell, DPM
Treasurer

Last year's FIP conference in Montreal resulted in a profit of \$25,000 for the OPMA. However, as a result of expenditures, and the fact that our membership is not growing, our Current Account balance has been gradually declining.

As with previous years, we continue to have backup finances in the form of GICs, accruing interest at a very low rate as we wish to keep them readily accessible.

Financially, our Association is still in a strong position. We may, however, want to direct some energy towards retaining and recruiting new members to help maintain our financial health.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read 'G. Peter Higenell'.

G. Peter Higenell, DPM
Treasurer

"Professional associations are often lead by an executive group passionate about advancing the profession. This is important. Sound financial oversight is as important. Members should take comfort in OPMA's financial stewardship."

CPMA UPDATE

Greeting Colleagues,

As a result of the delay of our usual spring AGM this is the first opportunity I have had the to formally reach out to you. In the meantime, I have had the chance to talk to many of you by way of Board calls and other informal meetings.

The past 18 months have been exciting and challenging. When we last met we were in Montreal for the FIP-CPMA World Congress of Podiatry. As many of you already know the congress was a great success. Both the FIP and CPMA (and participating provinces) enjoyed a decent financial return as well as overall positive reviews from delegates and participants.

It was the success of the World Congress that initiated discussion about possibly having another CPMA-sponsored conference in Canada. This led to discussion with PRESENT Podiatry, who in conjunction with Region 7 and CPMA/BCPMA decided to attempt a conference in British Columbia in the spring of 2017. Unfortunately, this did not come to fruition.

However, the good news is that even though this did not work out we have maintained a good working and professional relationship with PRESENT Podiatry and will continue to look for opportunities in the future. In addition, we (CPMA) enjoy discounts for PRESENT Podiatry conferences and online lectures.



Bradley G. Sonnema, DPM
CPMA President

"The Canadian Podiatric Medical Association (CPMA) is a non-profit organization working on behalf of practising podiatrists across Canada. We are the profession's national voice."

Perhaps the most significant endeavor undertaken in past year and a half has been the creation and continued development of a strategic plan. In April of 2016, the CPMA executive board met in Toronto to explore the issues surrounding podiatry in Canada and attempted to create and develop a road map of what podiatry could/should look like in the future.

The central theme in this plan involves establishing clarity and unity of the profession. Admittedly this is neither a simple nor fast process.

Essential to achieving this goal is reaching out and connecting with other practitioners in order to discuss all issues. This has proven difficult, but we will continue to push along.

Recently, CPMA (as well as several provinces) has been contacted by Telus regarding their electronic claims services for our practitioners. Joel, our Executive Director, is continuing to look into this and will have more information in the future. We feel this is an important process and one where CPMA can take the lead.

Other interesting happenings include several requests by various media for interviews. These include Costco magazine, Elle Canada and Good Times magazine. Also, we continue to enjoy the subscription to both Sosido and CPMA e-news.

If you are not receiving these emails please let Joel and the office know by contacting: info@podiatrycanada.org. See you at the AGM.

Respectfully Submitted,



Bradley G. Sonnema, DPM,
President, Canadian Podiatric
Medical Association.

FIP REPORT

The FIP continues to be active in spreading the word of podiatry globally.

In the fall of 2016 the FIP Executive Board went to Barbados in an effort to support the local podiatry association in an attempt to enhance its position in its health care system.

This past spring the FIP participated in the European Wound Management Association (EWMA) meeting in Amsterdam. Several of the Executive Board members presented at the meeting.



FIP FÉDÉRATION INTERNATIONALE
DES PODOLOGUES
IFP INTERNATIONAL FEDERATION
OF PODIATRISTS

In addition, this past spring the FIP celebrated its 70th anniversary with a great meeting/AGM and dinner in Teubigen Germany. It is currently making plans for the next World Congress in Cancun, Mexico in October of 2019.

This is important to the FIP as it looks to make changes to its own admission criteria. Our own Dr. Joseph Stern has been appointed to FIP's committee working on this agenda.

Most importantly, the FIP is monitoring closely the changes that are occurring in Europe regarding podiatry. There are processes underway attempting to make podiatry in Europe more uniform, especially in the context of education. The FIP board is set to meet next in Stockholm in late October.

Respectfully Submitted,



Bradley G. Sonnema, DPM,
President, Canadian Podiatric
Medical Association

CPMA EXECUTIVE REPORT

The team at the CPMA office and the CPMA Executive are continuing the work on the multi-year strategic plan.

For those of you who are new to the CPMA, we have access to strategic partners and preferred pricing for electronic medical records from our QHR/Accuro relationship with Royal Bank of Canada, which extends us preferred pricing. We can also access reduced costs for merchant banking, Perkopolis-group discounts, employee pricing on Hoka Running Shoes and there will be more member benefits to come in the future.

We distribute weekly emails of Podiatry articles and current Podiatry news and information from Multiview CPMA e-news and podiatry articles and research from Sosido. We have secured a preferred member discount with PRESENT Podiatry for continuing medical education (CME) courses available both online and hands on learning.

We want to hear from you. Let us know if there are other potential benefits you would like us to explore.

Work in the CPMA office is invigorating and exciting. We are:

- Reviewing various insurance coverage to find the best options available to and for our members;
- Working on e-claims;
- Dealing with insurance issues nationally;
- Having ongoing conversations with the other foot care groups;
- Maintaining a good working relationship with the other foot care groups;
- Continuing to work on relationships with various associations – globally and on a pan-Canadian basis with various insurers and the Canadian Life and Health Insurance Association (CLHIA);
- Attending the American Podiatric Medical Association (APMA) House of Delegates meetings;
- Pleased to have attended and exhibited at the CLHIA conference;
- Pleased to have attended and exhibited at the Canadian Association of Wound Care Conference (CAWC);



Joel S. Alleyne, DPM
Executive Director, CPMA

- Performing outreach to our corporate seal partners to reinvigorate and revitalize these relationships;

- Working to bring new seal partners to the table; and,

We continue to support our provincial members in their efforts and issues on a regional level.

We are pleased to be here to serve you.

Respectfully Submitted,

Joel S. Alleyne, DPM
Executive Director
Canadian Podiatric Medical Association

2016 MEMBERSHIP ROSTER

Martin Brain, DPM	James Hill, DPM	David Roth, DPM
Robert Chelin, DPM	Andrew Klayman, DPM	Stuart Sackman, DPM
Edward Chung, DPM	Mark Kleiman, DPM	Tej Sahota, DPM
Melissa Cloutier-Chatel, DPM	Ronald Klein, DPM	David Shaw, DPM
Cary Collis, DPM	John Lanthier, DPM	Alan Silverstein, DPM
Joanna Faloon, DPM	Paul Leszner, DPM	Mark Slome, DPM
Allen Frankel, DPM	Jeffrey Liebman, DPM	Peter Stavropoulos, DPM
Julie Fraser, DPM	Irving Luftig, DPM	Robert Sterin, DPM
Sheldon Freelan, DPM	Arnold Marcus, DPM	Stan Sweet, DPM
Michelle Gill, DPM	Hartley Miltchin, DPM	Millicent-Vorkapich Hill, DPM
Arnold Goldman, DPM	Sheldon Nadal, DPM	Robert Warner, DPM
Lee Goossens, DPM	Neil Naftolin, DPM	Shael Weinberg, DPM
David Greenberg, DPM	Lloyd Nesbitt, DPM	Tony Zamojc, DPM
Stephen Haber, DPM	Barry Noble, DPM	Morris Zoladek, DPM
Chris Hastings, DPM	Stevan Orvitz, DPM	
Peter Higenell, DPM	Bruce Ramsden, DPM	
Robika Hundal, DPM	Danny Rosenthal, DPM	

RETIRED MEMBERS

Robert Goldberg, DPM
Kel Sherkin, DPM

LIFE MEMBERS

Robert Brain, DPM

NOTES

Stepping Right

Excerpt from the OPMA Submission/Response to the Ontario Minister of Health and Long-Term Care re: HPRAC.

"...Podiatrists practising in Ontario see patients waiting unacceptably long periods of time for consultations with orthopedic foot and ankle specialists, vascular surgeons and dermatologists to make diagnoses and perform procedures that we are competent to perform and are legally authorized to perform in over 60 jurisdictions across North America, including in Alberta and British Columbia. We also see patients falling through the cracks because no one else in the healthcare system is willing or able to deal with their foot or ankle conditions. Podiatrists practising in Ontario see too many unnecessary patient visits to emergency departments and hospital admissions for problems that podiatrists are competent to handle safely and effectively in their clinics. We see these problems increasing as the seniors demographic (that constitutes about 60% of our patients) grows and will continue to grow for at least the next decade. We see patients subjected to a fragmented and completely inefficient – and completely unnecessary – process of care, including circular referrals that lead to unnecessary and unacceptable delays in diagnosis and treatment, patient frustration and unnecessary system costs...

What the podiatry profession aspires to in Ontario is a relationship with orthopedic surgeons analogous to the established and very efficient relationship that exists between obstetricians/gynecologists and urologists. Podiatrists fully recognize the range and type of surgical procedures that must be referred to GPs and medical specialists, that are best performed by orthopedic surgeons in hospitals, or that must be referred to vascular surgeons or dermatologists.

Having drawn valuable insights from the HPRAC process and report, in particular from stakeholders' comments and suggestions, we should like to highlight our vision for the future of foot care in Ontario that truly does put patients first..."



Ontario
Podiatric
Medical
Association

Stepping Right



**Ontario
Podiatric
Medical
Association**

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