



Frequently Asked Questions

Why was COOR formed and what is COOR trying to achieve?

COOR believes that optometrists should be free to deliver the best care possible to their patients in a practice environment of their choice. In our view, this is best achieved by eliminating all regulatory provisions related to the business aspects of optometry in a manner consistent with Freedom of Association and Expression as guaranteed under the Canadian Charter. COOR is simply trying to highlight to the membership serious issues that are affecting optometry in Ontario. We are trying to make sure that regulations affecting optometry in Ontario are fair to all involved. We want to see effective legislation that keeps the clinical standards high but also respect the fact the optometrists should not be impeded in competing in the marketplace. COOR was formed by optometrists that share these beliefs and feel that these issues are not currently being adequately addressed.

What do you see the role of the College of Optometrists as being?

We believe that the role of the COO is to regulate clinical matters and enforce clinical standards. We support the College in their capacity to regulate clinical matters and issues affecting patient care. The College's primary role is to protect the public. This role is in agreement with the philosophy that patient care issues should be the focus of their mandate. Regulating business related issues such as advertising and association is not in the public interest and has been suggested by the Canadian Competition Bureau to be detrimental to the interests of the public. The College should focus on (a) ensuring clinical standards are adhered to in the profession and (b) concentrate on prosecuting parties who are not allowed to refract and prescribe but continue to do so.

What are your views on "big box" optical retail outlets?

Big box retail outlets are here already whether we like it or not. We are pushing for the lifting of business restrictions on optometrists to allow them to compete to regain their lost market share in optics. Optometrists should be at the helm of the optics industry and we must acknowledge that dispensing plays a vital part in most if not all optometric offices. However, we must keep in mind that as long as a practitioner is providing care to the level expected by the profession, they should be free to work in whatever environment they so choose. The Charter actually guarantees this right and we must respect it.

We feel however, that optometrists in Ontario have under-estimated the value of branding. This is an essential tool for optometry as we have seen in other provinces. In Quebec for example, there are numerous optometric groups that have branded and this has resulted in an almost non-existence of refracting opticians (or sight testers). This is what we believe is the future for optometry, a high quality practice environment that is able to compete with big box retailers.

What are your views on TPAs?

We are fully supportive of the TPA legislation. We hope that proper remuneration is ensured for our services however in this regard. The potential risk of litigation when using TPAs is significantly increased and it is only fair to practitioners that we are properly remunerated for providing this service.

What are your views on the recently submitted amendments to the Conflict of Interest regulations?

We believe that although these new regulations are a significant improvement, they do not go far enough. For example, branding is still effectively prohibited and wording used in the legislation is too vague and can allow enforcement under ambiguous terms. The term “independent contractor” is also not clearly defined. Our position is that the only regulations that the College should be dealing with are ones that deal with patient care issues, not business related issues such as branding.

Should the current COI regulations be enforced in light of the outcome of the IRIS case in Ontario?

Absolutely not. These rules were being selectively enforced and are clearly flawed. These rules should not be enforced until new rules can be agreed on by all parties affected. We believe that any College’s legislation should always be focussed on patient care issues and not on business related issues.

What have you based your opinions on?

Common sense and precedent from other jurisdictions and professions in Ontario. In 1998, the BC Supreme Court ruled that rules preventing optometrists from entering business arrangements with non-optometrists violated freedom of association under the Canadian Charter of Rights and were struck down.

In 1990, (*Rocket –v- College of Dental Surgeons of Ontario*) the Supreme Court of Canada concluded that the College did not have the right to prohibit the dentist from advertising as long as it was decent, honest, truthful and verifiable and did not claim superiority over other practitioners. Advertising was seen as a right of the dentist to earn a living. Our believe is that having terms like “bringing the profession into disrepute” is far too vague and allows for a wide interpretation.

What are your views on collaborative care?

We fully support the Ministry of Health’s recommendations which encourage collaborative care. We think it is common sense for all three eye related professions (ophthalmology, optometry and opticianry) work in a collaborative manner. A more collaborative and integrative approach to eye care (a) benefits the patient and the public and (b) reduced to incentive of opticians to refract which is contrary to the public interest (as now a collaborative model exists).

Is there any other source of information about COOR?

Yes. We have started a website (<http://thecoor.blogspot.com/>) which has a number of useful features such as (i) an interactive discussion forum, (ii) a polling option to gauge the opinions of practitioners and (iii) links to documents of interest for optometrists.