

**Health Professions Appeal
and Review Board**

**Health Services Appeal
and Review Board**

**Ontario Hepatitis C
Assistance Plan Review
Committee**

**Commission d'appel et de révision
des professions de santé**

**Commission d'appel et de révision
des services de santé**

**Comité de révision du Programme
ontarien d'aide aux victimes
de l'hépatite C**



**Health Professions Appeal and Review Board
Health Services Appeal and Review Board
Ontario Hepatitis C Assistance Plan Review Committee**

2016-17 Annual Report

**Health Professions Appeal
and Review Board**

**Health Services Appeal
and Review Board**

**Ontario Hepatitis C Assistance
Plan Review Committee**

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**Commission d'appel et de révision
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The Honourable Dr. Eric Hoskins
Minister of Health and Long-Term Care
Minister's Office
Hepburn Block, 10th Floor
80 Grosvenor Street
Toronto ON M7A 2C4

June 30, 2017

Dear Minister:

RE: Health Boards Annual Report

On behalf of the Health Professions Appeal and Review Board, Health Services Appeal and Review Board, and the Ontario Hepatitis C Assistance Plan Review Committee (the Health Boards), it is my pleasure to submit the 2016-17 Annual Report.

Yours sincerely,

Janice Vauthier, Chair
Health Professions Appeal and Review Board
Health Services Appeal and Review Board
Ontario Hepatitis C Assistance Plan Review Committee

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Chair's Message



On behalf of the Health Professions Appeal and Review Board, Health Services Appeal and Review Board, and the Ontario Hepatitis C Assistance Plan Review Committee (the Health Boards), it is my pleasure to submit our Annual Report for the fiscal year of 2016-17.

The Health Boards are committed to providing timely, accessible and informed service delivery to the Ontario public.

Where possible, we strive to resolve matters brought before the Health Boards within one year. As of March 31, 2017, for example, 89% of complaint review matters before the Health Professions Appeal and Review Board had a case age of less than a year.

Parties have the ability to access and participate in the adjudicative services of the Health Boards in writing, by telephone and through attendance in person at our office in Toronto and other major centres within the province in the official language of their choice. In 2016-17, for example, we held reviews and hearings in over 10 cities across the province and developed a pilot for electronic hearings that we will be implementing in 2017-18 to further support access to our adjudicative services. We also ensure open lines of communication with those requiring accessibility accommodations and provide language interpretation to parties when required.

To ensure that the public and parties are informed about the adjudicative services of the Health Boards, in 2016-17 we began a review of the content on our websites to ensure the websites are current and serve the information needs of the public and parties. In 2017-18, we will begin developing and implementing a refresh of the websites, starting with the Health Professions Appeal and Review Board website, to ensure that navigation and content is simple and clear and that the sites support accessibility.

The Health Boards are supported by skilled and professional members and staff who are committed to excellence in the service we provide to Ontarians. I thank them for their support and look forward to working with them in 2017-18 to continue to deliver service excellence.



Janice Vauthier, Chair

Health Professions Appeal and Review Board
Health Services Appeal and Review Board
Ontario Hepatitis C Assistance Plan Review Committee

Legislative Authority and Mandate

Health Professions Appeal and Review Board

The Health Professions Appeal and Review Board (HPARB) is an independent adjudicative tribunal created by the *Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998* that provides oversight to the regulated health professions of Ontario.

The HPARB functions as a quasi-judicial adjudicative and regulatory tribunal with jurisdiction respecting the regulatory activities of twenty-seven Colleges governing the following twenty-nine regulated health professions (human and animal):

- Audiology
- Acupuncture
- Chiropody
- Chiropractic
- Dental Hygiene
- Dental Technology
- Dentistry
- Denturism
- Dietetics
- Homeopathy
- Kinesiology
- Massage Therapy
- Medical Laboratory Technology
- Medical Radiation Technology
- Medicine
- Midwifery
- Naturopathy
- Nursing
- Occupational Therapy
- Opticianry
- Optometry
- Pharmacy
- Physiotherapy
- Psychology
- Psychotherapy
- Respiratory Therapy
- Speech-Language Pathology
- Traditional Chinese Medicine
- Veterinary

The HPARB also functions as a quasi-judicial adjudicative and regulatory tribunal with jurisdiction respecting the decisions of the Accreditation Committees for pharmacies and veterinarian facilities and the practice privilege decisions of the Boards of Directors of Ontario's public hospitals.

The majority of the work conducted by the HPARB involves appeals of the decisions made by the Inquiries, Complaints and Reports Committees of the self-regulating health professions Colleges in Ontario under the *Regulated Health Professions Act, 1991* and decisions made by the Complaints Committee of the College of Veterinarians of Ontario under the jurisdiction of the *Veterinarians Act* ("complaint reviews"). The HPARB has the authority under these Acts to:

- Confirm or rescind all or part of the Committee's decision;
- Make recommendations to the Committee; and
- Require the Committee to take further action.

The work of the HPARB also involves appeals respecting applications for professional registration that have been refused or restricted by Registration Committees of the Colleges and the accreditation of veterinary and pharmacy facilities. The HPARB has the authority under these Acts to:

- Confirm the Registration Committee's order or proposed decision;

- Require the College to issue a certificate of registration or licence to the applicant, if he/she completes examinations or training required by the Registration Committee;
- Require the College to issue a certificate of registration or licence to the applicant, with any terms or limitations the Board considers appropriate, if the applicant qualifies for registration and if the Registration Committee has exercised its power improperly;
- Refer the matter back to the Registration Committee with recommendations.

In addition to the above, the work of HPARB involves appeals under the *Public Hospitals Act* with regard to the practice privilege decisions of the boards of Ontario's public hospitals. The HPARB has the authority under the Act to:

- Confirm the decision;
- Direct the hospital Board, person, or body making the decision to take such action as directed by the HPARB;
- Substitute its opinion for that of the hospital Board, person or body making the decision.

The HPARB can inquire into or make a decision concerning the constitutional validity of a provision of an Act or a regulation.

A list of the statutes under which appeals and reviews may be conducted by the HPARB can be found at www.hparb.on.ca. Regulations under the statutes that may affect proceedings before the HPARB may be found at www.e-laws.gov.on.ca.

Health Services Appeal and Review Board

The Health Services Appeal and Review Board (HSARB) is an independent adjudicative tribunal created by the *Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998* that functions as a quasi-judicial adjudicative tribunal with jurisdiction respecting decisions on disputes that arise under twelve different statutes:

- *Ambulance Act*;
- *Commitment to the Future of Medicare Act*;
- *Healing Arts Radiation Protection Act*;
- *Health Facilities Special Orders Act*;
- *Health Insurance Act*;
- *Health Protection and Promotion Act*;
- *Home Care and Community Services Act*;
- *Immunization of School Pupils Act*;
- *Independent Health Facilities Act*;
- *Laboratory and Specimen Collection Centre Licensing Act*;
- *Long-Term Care Homes Act*; and
- *Private Hospitals Act*.

The HSARB has varied authority under the twelve different statutes for which it has an appeal or review mandate. The majority of the work conducted by the HSARB falls under the jurisdiction of the *Health Insurance Act* and involves appeals where:

- An individual is entitled to be an insured person under the Ontario Health Insurance Plan (OHIP) but has received a decision from the General Manager of OHIP that OHIP does not cover the health services the person is claiming (“subscriber” appeal), such as an insured person who received treatment out of country; or
- An individual has received a decision from the General Manager of OHIP that they are not entitled to be an insured person under OHIP (“eligibility” claim).

The HSARB has the authority under *Health Insurance Act* to:

- Affirm or rescind the decision;
- Direct the General Manager to take such action as the Board considers the General Manager should take;
- Substitute its opinion for that of the General Manager.

Other examples of the work of the HSARB include appeals respecting:

- Decisions of approved agencies under the *Home Care and Community Services Act* regarding eligibility for and amount of community services;
- Orders of the Medical Officer of Health or public health inspectors under the *Health Protection and Promotion Act*;
- Orders and decisions of the Director under the *Long Term Care Homes Act*; and
- Decisions of the Director under the *Independent Health Facilities Act* with respect to licensing of independent health facilities.

The HSARB cannot inquire into or make a decision concerning the constitutional validity of a provision of an Act or a regulation. However, the courts have clarified that the HSARB is to apply “Charter values”¹ in interpreting legislation.

Regulations under the statutes that may affect proceedings before the HSARB may be found at www.e-laws.gov.on.ca.

Ontario Hepatitis C Assistance Plan Review Committee

The Management Board of Cabinet established the Ontario Hepatitis C Assistance Plan (OHCAP) Review Committee on March 1, 1999. The Review Committee is an independent administrative tribunal, which operates at arms-length from the Ministry and its OHCAP Program Office. The Review Committee, comprised of members appointed by the Minister of Health and Long-Term Care, reviews decisions of the OHCAP Program Adjudicator respecting eligibility for benefits under the Plan.

Members of the public can apply to the OHCAP Program Office for financial assistance if before January 1, 1986, or from July 2, 1990 to September 28, 1998:

¹ *E. H. v. General Manager Ontario Health Insurance Plan* 2012 ONSC CanLII 5106.

- They contracted hepatitis C virus (HCV) through the blood system in Ontario;
- They were infected with HCV by a spouse, partner or mother who contracted HCV through the blood system in Ontario; or
- They are the personal representative of an estate of an individual who contracted HCV through the blood system in Ontario during the period covered by the Ontario Plan.

OHCAP applicants dissatisfied with a Program Office decision can request a review of that decision by the OHCAP Review Committee. The OHCAP Review Committee conducts a review of the initial application and Program Office decision, and determines the applicants' entitlement to the specified program benefit. The OHCAP Review Committee can either confirm or reverse the initial decision of the OHCAP Program Adjudicator. The proceedings are not open to the public and decisions are confidential.

Further information on the Ontario Hepatitis C Assistance Plan can be found on the Ministry of Health and Long-Term Care website at www.health.gov.on.ca.

Mission

The Health Boards are committed to providing the highest quality service to the public, and to being valued partners in the delivery of health care in Ontario for all stakeholders.

Operational Highlights

Improved Service Delivery

The Health Boards continue to work to improve delivery of service to the public and parties before the Boards. In 2016-17, the Health Boards began a review of content on its websites – www.hparb.on.ca and www.hsarb.on.ca – to ensure that the content is current and serves the information needs of the public and parties. In 2017-18, the Health Boards will be developing and implementing a refresh of the websites, starting with the HPARB website, to ensure that navigation and content is simple and clear and that the sites support accessibility.

In 2016-17, the Health Boards also begun to update the templates used by the Boards from acknowledgement of receipt of a request for review or appeal, to the issuance of a decision of the Board. Similar to the website refresh, the purpose of this work is to ensure that the communications of the Health Boards are simple and clear. This work has begun with the templates used for complaint reviews, which represent the largest volume of matters before the Health Boards, and will continue in 2017-18.

Another key initiative that began in 2016-17 is a process review of the operations of the Health Board Secretariat, which provides case management and administrative support to the Health Boards. The operational process review is being undertaken by the Business Innovation Office of the Ministry of Health and Long-Term Care and will provide recommendations to update the

Health Boards Secretariat's processes, if necessary, to strengthen the protection of personal health information.

Modernization Initiatives

The Health Boards continue to develop and implement initiatives to modernize its operations. In 2016-17, the Health Boards developed a pilot to make all case files electronic, beginning with files related to registration matters before the HPARB. Electronic case files will improve efficiency and is a Health Boards 'green' initiative. If the pilot is successful, the plan moving forward would be to move all the case files before the HPARB, HSARB, and OHCAP into an electronic format.

In 2016-17, the Health Boards have also developed and begun testing an electronic exhibit stamp application, starting with *Health Insurance Act* hearings. The application allows a member to mark exhibits in an electronic file at a hearing. The application will also generate an exhibit list at the end of a hearing. The electronic exhibit stamp application supports the continued move of the Health Boards towards fully electronic case files.

In addition to electronic files and the electronic exhibit stamp application, the Health Boards have developed a pilot for electronic hearings. Under the pilot, parties and witnesses would participate in a hearing through Adobe Connect for video along with the use of a teleconference for sound. The use of different approaches for video and sound will help ensure the protection of personal health information. The Health Boards plan to implement the pilot in 2017-18 for *Health Insurance Act* matters where an electronic hearing may be appropriate and support greater access to the Health Boards for parties and their witnesses and experts. This could include, for example, matters where the parties, or their witnesses or experts, are located in different areas of the province.

Member Recruitment

In 2016-17, five new part time members were cross appointed to both the HPARB and HSARB who represent the language, cultural and geographic diversity of our province. Member recruitment will remain a high priority for the Health Boards going forward as members reach their 10 years of maximum tenure on the Boards as set out in the *Adjudicative Tribunals Accountability, Governance and Appointments Act, 2009*.

The Health Boards approach to onboarding new members in 2016-17 included pairing each of the new members with a Vice-Chair mentor and providing comprehensive foundational training on the work of the Health Boards and ethical obligations of members.

Professional Development

In 2016-17, the Health Boards continued to provide two-day All Member Training sessions in the spring and fall seasons and included within the program relevant and dynamic speakers,

including Christine Elliott, Ontario's Patient Ombudsman. All Member Training provides an opportunity for members to be educated on issues that may affect the Boards as well as to discuss initiatives to support improved delivery of services to parties before the Boards and the public.

Highlights of the All Member Training sessions in 2016-17 include sessions on recognizing and addressing hidden biases when adjudicating, medical aid in dying and the impact on health professions, and enhancing access for people with disabilities. Small group discussions were also held during the fall All Member Training to identify the Health Boards' strengths, weakness, opportunities, and threats. The Chair also used both All Member Training sessions to remind members of their obligations under the *Public Service of Ontario Act*.

In November 2016, 10 members of the Health Boards attended the annual conference of the Society of Ontario Adjudicators and Regulators (SOAR) in Toronto. The mission of SOAR is to advance administrative justice through education, advocacy and innovation.

Board Policies

In 2016-17, the Health Boards developed and implemented a new Practice Direction on Conduct and Communications. The Practice Direction states the Boards' expectation that all persons participating in proceedings before or communicating with the Board act in good faith and in a manner that is courteous and respectful of the tribunal, its members, staff, and other participants in the proceeding. The Practice Direction also states that the Board may make such orders or give directions in its proceedings as it considers proper to ensure participants conduct themselves in a courteous and respectful manner, and avoid conduct that may result in an abuse of process.

The Practice Direction on Conduct and Communications is available on both the HPARB (www.hparb.on.ca) and HSARB (www.hsarb.on.ca) websites.

Health Professions Appeal and Review Board Recommendations

In fulfilling its public interest mandate, the HPARB has power to make recommendations in complaint and registration dispositions to the Inquiries, Complaints and Reports Committees and the Registration Committees of the colleges of the regulated health professions² and the Complaints Committee of the College of Veterinarians of Ontario³. Recommendations identify concerns in Colleges' process and/or policy and generally, the HPARB finds that the colleges are responsive in making the recommended changes.

Dispositions issued by the Board during the last fiscal year have been outlined below and provide an example of the type of recommendations that may be included within an HPARB

² Section 35(1) of the Health Professions Procedural Code, Schedule 2 to the Regulated Health Professions Act, 1991 Statutes of Ontario, 1991, c.18.

³ Section 27(1) of the Veterinarians Act, Revised Statutes of Ontario, 1990, c. V.3.

decision. The full Board decisions in these matters can be found on the Canadian Legal Information Institute website at www.canlii.org.

File Number	Board Recommendation
15-RRV-0678	The Board recommended that the College ensure that referrals of registration applications to the Committee under section 15 of the Health Professions Procedural Code, adequately advise applicants of their right to make written submissions to the Committee.
15-CRV-0680	The Board recommended that the Committee ensure that publicly posted summaries do not repeat errors corrected in the complaint process. If there is a need to restate erroneous information, this should be appropriately contextualized.
15-CRV-0591	The Board recommended that the College make their members aware that, in accordance with the requirements of section 35 (2) of Ontario Regulation 1094, made under the <i>Vital Statistics Act</i> , they should only complete and sign a certificate of death after a patient has died.
16-CRV-0092	The Board recommended that the College ensures that it follows the provisions of its by-laws (i.e. including a notation on the public register when a decision has been appealed to the Board) when posting information about decisions on the public register.
16-CRV-0040	The Board recommended that the College develop and promulgate such a policy relating to activities by physicians in matters in which they have a personal interest, in accordance with the observations and findings of the Committee in this matter.

Caseload Statistics

Health Professions Appeal and Review Board

The HPARB received 852 new requests for review or appeal in 2016-17. The number of requests for review or appeal have risen steadily over the past five years, as has the HPARB's number of case conferences convened, matters heard and decisions issued.

The majority of the HPARB's activity continues to be related to reviews of the decisions of the Inquiries, Complaints and Reports Committees (ICRC) of the self-regulated health professional Colleges in Ontario, with 714 new requests for a complaint review in 2016-17, and the majority of these requests continue to be related to decisions of the College of Physicians and Surgeons of Ontario, with 68% of requests in 2016-17 related to this College. The majority of the HPARB's requests related to registration matters continue to be related to decisions of the Registration Committee of the College of Nurses of Ontario, with 67.5% requests related to this College.

In 2016-17, 90% of the HPARB's complaint review decisions confirmed the decisions of the health professions College's ICRC and 10% returned the Committee's decisions. In regard to registration decisions, in 2016-17, the HPARB confirmed 81% of decisions of the health professions Colleges Registration Committees and returned 19% of the Committee's decisions.

Table 1: Summary of Activity

	2012-13	2013-14	2014-15	2015-16	2016-17
Requests for Appeal/Hearing/Review	694	769	786	840	852
Case Conferences Convened	731	738	762	728	759
Matters Heard	486	418	500	614	662
Matters Resolved ⁴	261	227	176	332	276
Decisions Issued	459	426	484	567	678

Table 2: Summary of Request for Review/Hearing/Appeal by Type

Review/Appeal Type	2012-13	2013-14	2014-15	2015-16	2016-17
Complaint Review	586	587	628	664	714
Registration and Accreditation	90	134	131	173	119
Public Hospitals Act	6	3	4	0	8
Other ⁵	12	45	23	3	11
Total	694	769	786	840	852

⁴ Includes matters that were withdrawn (e.g. resolution after a case conference), frivolous & vexatious, ineligible, or dismissed and matters that were closed as a result of timeliness, no jurisdiction, and administrative closure.

⁵ Includes Section 26 applications under the *Veterinarians Act* and Section 28 applications under the *Regulated Health Professionals Act* Procedural Code.

Table 3: Summary of Requests for Complaint Review by College

College	2012-13	2013-14	2014-15	2015-16	2016-17
College of Physicians and Surgeons of Ontario	72%	59%	64.5%	66%	68%
College of Nurses of Ontario	3%	17.5%	6%	5.5%	6.5%
Royal College of Dental Surgeons of Ontario	9%	8%	10%	9.5%	8.5%
College of Pharmacists of Ontario	0.5%	2%	5.5%	2.5%	2.5%
College of Veterinarians of Ontario	3%	2%	3.5%	3.5%	3.5%
College of Psychologists of Ontario	3%	1.5%	3%	3%	2%
Other Colleges	9.5%	10%	7.5%	10%	9%
Total	586	587	628	664	714

Table 4: Summary of Requests for Registration Review or Hearing by College

College	2012-13	2013-14	2014-15	2015-16	2016-17
College of Nurses of Ontario	86%	80.5%	78%	81%	67.5%
College of Psychologists of Ontario	7%	1.5%	5%	5%	12%
College of Physicians and Surgeons of Ontario	1%	5%	4%	4%	7.5%
Other Colleges	6%	13%	13%	10%	13%
Total	90	130	130	173	119

Table 5: Summary of Complaint Review Decisions

	2012-13	2013-14	2014-15	2015-16	2016-17
Confirmed	91.5%	89.5%	92%	92%	90%
Returned	8.5%	10.5%	8%	8%	10%
Total	400	384	408	507	590

Table 6: Summary of Registration Decisions

	2012-13	2013-14	2014-15	2015-16	2016-17
Confirmed	92%	90%	76%	83%	82%
Returned	8%	10%	24%	17%	18%
Total	51	41	71	59	78

Health Services Appeal and Review Board

The HSARB received 209 requests for appeal in 2016-17. The number of requests for appeal has decreased over the past five years, as has the HPARB's number of case conferences convened, matters heard and decisions issued.

The majority of HSARB's activity continues to be related to appeals under the *Health Insurance Act* and the majority of these continue to be related to subscribers (i.e. an individual is entitled to be an insured person under OHIP but has received a decision from the General Manager of OHIP that OHIP does not cover the health services the person is claiming) with fewer matters relating to eligibility (i.e. an individual has received a decision from the General Manager of OHIP that they are not entitled to be an insured person under OHIP).

In 2016-17, the HSARB denied about 96% of appeals for *Health insurance Act* subscriber matters and granted or granted in part about 4% of appeals. With regard to eligibility matters, the HSARB denied 90% of appeals and granted or granted in part 10% of appeals.

Table 1: Summary of Activity

	2012-13	2013-14	2014-15	2015-16	2016-17
Appeals Received	391	418	295	255	209
Case Conferences Convened	624	675	561	239	203
Matters Heard	109	73	115	86	65
Matters Resolved ⁶	289	422	250	210	187
Decisions Issued	87	77	73	102	72

Table 2: Summary of Request for Appeal by Type

Appeal Type	2012-13	2013-14	2014-15	2015-16	2016-17
<i>Health Insurance Act</i>	344	383	249	217	170
<i>Home Care and Community Services Act</i>	11	9	11	22	18
<i>Health Protection and Promotion Act</i>	17	12	12	6	2
<i>Independent Health Facilities Act</i>	9	10	16	5	2
<i>Long-Term Care Homes Act</i>	8	3	7	3	6
<i>Other Acts</i>	2	1	0	2	11
Total	391	418	295	255	209

⁶ Includes matters that were withdrawn (e.g. resolution after a case conference), frivolous & vexatious, abandoned, ineligible, or dismissed and matters that were closed as a result of timeliness, no jurisdiction, and administrative closure.

Table 3: Summary of *Health Insurance Act* Appeals by Type

Appeal Type	2012-13	2013-14	2014-15	2015-16	2016-17
Subscriber	267	335	185	158	115
Eligibility	77	48	64	59	55
Total	344	383	249	217	170

Table 4: Summary of *Health Insurance Act* Subscriber Dispositions

Appeal Type	2012-13	2013-14	2014-15	2015-16	2016-17
Granted or Granted in Part	13	8	8	10	2
Denied	65	54	52	64	46
Total	78	62	60	74	48

Table 5: Summary of *Health Insurance Act* Eligibility Dispositions

Appeal Type	2012-13	2013-14	2014-15	2015-16	2016-17
Granted or Granted in Part	0	2	1	1	1
Denied	7	7	7	19	9
Total	7	9	8	20	10

Ontario Hepatitis C Assistance Plan Review Committee

The OHCAP Review Committee received 10 appeals in 2016-17. The number of requests for appeal have slightly increased since 2014-15.

Table 1: Summary of Activity

	2012-13	2013-14	2014-15	2015-16	2016-17
Appeals Received	14	6	3	4	10 ⁷
Matters Resolved ⁸	5	3	3	0	2
Decisions Issued	13	2	6	1	6

⁷ Does not include appeals that were launched in 2015-16 but carried over into the caseload for 2016-17.

⁸ Includes matters that were withdrawn and abandoned.

Service Standards

Health Professions Appeal and Review Board

As of March 31, 2017, 89% of complaint review matters had a case age of less than 12 months.

As of March 31, 2017, 80% of registration matters had a case age of less than 12 months.

Health Services Appeal and Review Board

As of March 31, 2017, 100% of Health Insurance Act eligibility for OHIP coverage matters had a case age of less than 9 months.

Membership

The HPARB is made up of members of the public, appointed by the Government of Ontario, none of whom can be or ever have been a member of any of the regulated health Colleges.

The HSARB is made up of members of the public, appointed by the Government of Ontario, only three of whom can be members of the College of Physicians and Surgeons of Ontario.



As of March 31, 2017 there were 43 members appointed to the HPARB, 41 members appointed to the HSARB, and 3 members appointed to the OHCAP Review Committee. Of those members appointed to the HPARB and HSARB, 37 are cross appointed to both Boards. These cross appointed members are noted with an asterisk (*) in the tables below.

Chair and Vice Chairs (March 31, 2017)

Name	First Appointed	Term Ends
Janice Vauthier Chair, HPARB, HSARB, OHCAP Review Committee (RC)*	December 2005 (HPARB) March 2009 (HSARB) June 2014 (OHCAP RC)	June 2019 (HPARB, HSARB) June 2019 (OHCAP RC)
Taivi Lobu Full-Time Vice Chair, HPARB*	April 2006 (HPARB) March 2009 (HSARB)	February 2018 (HPARB) March 2019 (HSARB)
Christine Moss Part-Time Vice Chair, HPARB*	February 2016 (HPARB) February 1999 (HSARB)	February 2018 (HPARB) March 2019 (HSARB)
Sonia Ouellet Full-Time Vice Chair, HSARB*	March 2007 (HPARB) May 2010 (HSARB)	May 2020 (HPARB) May 2020 (HSARB)
Thomas Kelly Part-Time Vice Chair, HSARB*	December 2005 (HPARB) July 2012 (HSARB)	December 2021 (HPARB) July 2022 (HSARB)

HPARB Members (March 31, 2017)

Name	First Appointed	Term Ends
Katherine Ball	October 2015	October 2017
Timothy Bates*	July 2010	July 2020
James Beamish*	December 2009	December 2019
Louise Belanger-Hardy*	June 2007	March 2019
Michael Bossin*	March 2007	March 2021
Craig Brown*	October 2015	October 2017
Marla Burstyn*	March 2009	March 2019
Mike Colbourne*	December 2016	December 2018
Marc D'Amours*	February 2009	February 2019 ⁹
James Dault*	June 2007	December 2019
Beth Downing*	December 2009	December 2019
Kathleen Elliott*	March 2007	March 2021

⁹ On March 31, 2017, the Ontario Ministry of the Attorney General announced that Marc D'Amours was appointed to the Ontario Court of Justice, effective April 12, 2017.

Name	First Appointed	Term Ends
Paul Evraire*	December 2016	December 2018
Soraya Farha*	March 2009	March 2019
Rabiz Foda	June 2007	June 2017
Yves Fricot*	August 2015	August 2020
François Giroux*	November 2012	November 2017
Bonnie Goldberg*	February 2008	February 2018
Angus Grant*	November 2016	November 2018
Norma Grant*	September 2008	September 2018
Vanessa Gruben*	December 2009	December 2019
Emanuela Heyninck*	September 2010	September 2020
Stephen Jovanovic*	May 2006	March 2019
Douglas Kearns*	January 2016	January 2018
Stephen Kovanchak*	April 2009	April 2019
Darcie McKelvey	February 2008	February 2018
Anshula Ohri*	February 2017	February 2019
Brenda Petryna	August 2006	August 2019
Chantal Proulx*	February 2009	February 2019
Yasmeen Siddiqui*	May 2010	May 2020
Lorne Sossin*	October 2006	March 2019
Elvira Sanchez De Malicki	May 2008	May 2018
David Scrimshaw*	June 2012	June 2022
Kim Stanton*	August 2012	July 2022
Robert Steele*	October 2008	October 2018
Gabrielle St-Hilaire*	April 2008	April 2018
Hugh Tye*	April 2008	April -2018
Carla Whillier*	December 2016	December 2018

HSARB Members (March 31, 2017)

Name	First Appointed	Term Ends
Timothy Bates*	July 2010	July 2020
James Beamish*	December 2009	December 2019
Louise Belanger-Hardy*	March 2009	March 2019
Michael Bossin*	March 2011	March 2021
Craig Brown*	October 2015	October 2017
Marla Burstyn*	November 2004	March 2019
Mike Colbourne*	December 2016	December 2018
Marc D'Amours*	February 2009	February 2019 ¹⁰
James Dault*	December 2009	December 2019
Beth Downing*	July 2015	December 2019
Kathleen Elliott*	March 2011	March 2021
Paul Evraire*	December 2016	December 2018
Soraya Farha*	March 2004	March 2019
Yves Fricot*	August 2015	August 2020
François Giroux*	November 2012	November 2017
Bonnie Goldberg*	March 2011	March 2021
Angus Grant*	November 2016	November 2018
Norma Grant*	March 2011	March 2021
Vanessa Gruben*	December 2009	December 2019
Emanuela Heyninck*	September 2010	September 2020
Stephen Jovanovic*	March 2009	March 2019
Douglas Kearns*	January 2016	January 2018
Stephen Kovanchak*	April 2009	April 2019

¹⁰ On March 31, 2017, the Ontario Ministry of the Attorney General announced that Marc D'Amours was appointed to the Ontario Court of Justice, effective April 12, 2017.

Name	First Appointed	Term Ends
Anshula Ohri*	February 2017	February 2019
Ucal Powell	October 2015	October 2017
Chantal Proulx*	February 2009	February 2019
Yasmeen Siddiqui*	May 2010	May 2020
Lorne Sossin*	March 2009	March 2019
Michel Schofield	November 2015	November 2017
David Scrimshaw*	June 2012	June 2022
Debbie Snow	October 2015	October 2017
Kim Stanton	August 2012	July 2022
Robert Steele*	March 2011	March 2021
Gabrielle St-Hilaire*	March 2009	March 2019
Hugh Tye*	March 2011	March 2021
Carla Whillier*	December 2016	December 2018

OHCAP Review Committee Members

Name	First Appointed	Term Ends
Kathleen O'Neil	August 2008	September 2017
Linda Strevens	July 2009	September 2017

Staff

The Health Boards are supported by 21 staff in the Health Boards Secretariat of the Ministry of Health and Long-Term Care. The Health Boards Secretariat is led by a Registrar and includes an executive support team, case management team, administrative support team, and information technology team.

The Health Boards Secretariat's staff also provides support to two other adjudicative bodies – the Physician Payment Review Board (PPRB) and the Medical Eligibility Committee (MEC). The Health Boards' office space and Toronto hearing rooms are shared with PPRB and MEC. The Health Boards Secretariat also processes per diem and expense claims to public members of the health regulatory Colleges.

Financials

The below financial information does not include salary and wages for Health Boards Secretariat staff or facilities as these expenditures are shared between the HPARB, HSARB, OHCAP Review Committee, PPRB and MEC and also support the Health Boards Secretariat's function of processing per diem and expense claims to public members of the health regulatory Colleges. Salary and wage information for the full-time Chair and Vice Chairs of the HPARB and HSARB are also not included in the below financial information as they are funded out of the Health Boards Secretariat budget.

The increased expenditures for the HPARB in 2016-17 is largely due to the increase in the Board's caseload and an increase in the per diem for part-time adjudicative appointees that was announced by the Government of Ontario in February 2017 and was retroactive to April 1, 2016.

The decreased expenditures for the HSARB in 2016-17 is largely due to the decrease in the Board's caseload.

Health Professions Appeal and Review Board

Expenditure Category	2012-13	2013-14	2014-15	2015-16	2016-17
Part-Time Per Diem Payments	1,647,585	1,457,943	1,446,110	1,707,534	1,825,944
Travel ¹¹	112,128	109,473	99,405	125,763	136,623
Legal Services	183,222	208,386	173,140	193,925	177,832
Other Services ¹²	131,255	49,146	44,199	119,496	138,430
Supplies and Equipment ¹³	6,713	4,771	3,150	3,170	4,243
Total	2,080,903	1,829,719	1,766,004	2,149,888	2,283,072

¹¹ Includes travel for full-time and part-time appointees (e.g. air, rail, taxi, parking, etc.).

¹² Includes costs such as audio conferencing charges, translation services, court reporter fees, etc.

¹³ Includes costs such as those for office machines, stationary and office supplies, etc.

Health Services Appeal and Review Board

Expenditure Category	2012-13	2013-14	2014-15	2015-16	2016-17
Part-Time Per Diem Payments	472,514	387,501	385,038	330,747	251,938
Travel ¹⁴	75,982	21,767	30,412	22,065	12,145
Legal Services	171,571	170,478	127,050	138,600	138,600
Other Services ¹⁵	64,888	52,288	39,234	98,399	46,019
Supplies and Equipment ¹⁶	2,501	764	300	1,616	490
Total	787,456	632,798	582,034	591,427	449,192

Ontario Hepatitis C Assistance Plan Review Committee

Expenditure Category	2012-13	2013-14	2014-15	2015-16	2016-17
Part-Time Per Diem Payments	13,333	6,467	8,457	4,477	9,698
Travel ¹⁷	736	12	46	14	463
Other Services ¹⁸	712	382	382	170	0.00
Total	14,781	6,861	8,885	4,661	10,161

¹⁴ Includes travel for full-time and part-time appointees (e.g. air, rail, taxi, parking, etc.).

¹⁵ Includes costs such as audio conferencing charges, translation services, court reporter fees, etc.

¹⁶ Includes costs such as those for office machines, stationary and office supplies, etc.

¹⁷ Includes travel for full-time and part-time appointees (e.g. air, rail, taxi, parking, etc.).

¹⁸ Includes costs such as audio conferencing charges, translation services, etc.