

# 2023-2024 Annual Report to Government

# Vision

As set out in the 2022-2027 strategic plan, the College of Chiropractors of Alberta's vision is to be recognized as a leading health professional body demonstrating excellence in chiropractic regulation.

# Mission

The College of Chiropractors of Alberta protects and serves the public through regulation to ensure safe, competent and ethical chiropractic care.

# Strategic plan goals

Council identified four key areas to focus the direction of our efforts:

- Ensure the standards and core competencies promote excellence of care while being responsive to emerging developments.
- 2. Ensure the practice of chiropractic is patient-centered through safe, competent and ethical care.
- Maintain and enhance public trust and confidence in the CCOA and strengthen productive relationships with our stakeholders.
- 4. Optimize organizational capacity and effectiveness, recognizing our staff is the CCOA's greatest resource.

# Values

# Integrity

We operate in a manner that is honest, thoughtful, ethical and inclusive.

# **Accountability**

We are responsible for what we do and provide clear justification for our decisions.

# **Transparency**

We clearly communicate the reasons for our actions and decisions.

# **Proportionate**

We utilize a right-touch regulatory approach that focuses on the issue, with a response that is appropriate to the risk.

# **Agility**

We proactively regulate by monitoring, adapting to and anticipating change.

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CON	MPLAINTS OVERVIEW	(Nakota Sioux) and Niitsitapi (Blackfoot) peoples.
ĉ	<ul><li>a. Director of Professional Standards</li><li>&amp; Complaints Director Message 18</li></ul>	CCOA is dedicated to truth and reconciliation, and to supporting culturally safe healthcare to
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# **EXECUTIVE MESSAGES**

# Chair and CEO Message

We present the 2023-2024 report of the College of Chiropractors of Alberta (CCOA) for the July 1 to June 30 fiscal year, approved by CCOA Council, to the Government of Alberta and the Minister of Health. We are proud to serve the public through regulation of the profession of chiropractic.

Overseeing the chiropractic profession includes setting high minimum standards for registrants and providing support (staff, information, processes) for professional improvement and discipline. For the former, CCOA has approved the project plan to initiate a complete review and updating of the Standards of Practice. For the latter, we have a duty to inform the public of discipline decisions and if any conditions are placed on a regulated chiropractor. In December 2023, we enhanced our conditions and discipline reporting via the Practice Permit Verification (known as the Public Register). This allows the public to have easier access to information when verifying a regulated chiropractor. We have also begun the work to improve the quality of, and support offered to chiropractors in, the CCOA Continuing Competence Program. This ensures the public interest by increasing the quality of chiropractic care.

This past year also marked the second year of the CCOA 2022-2027 strategic plan. Major initiatives included initiating a review of the Standards of Practice, developing an organizational risk register, expanding the competence program beyond entry-to-practice and implementing a new organizational structure. We continued to participate in valuable provincial and national discussions and initiatives about health care regulation centered around public interest and patient safety.

Over the past year, the CCOA has taken action to define core competencies that span a chiropractic career, revise the competence manual, expand mandatory course offerings and improve the quality and rigour of the practice visit program. These efforts are designed to ensure that chiropractic professionals meet evolving standards in the interest of the public and patient safety.

We are pleased with 2023-2024's efforts to achieve our vision of CCOA as a leading health professional body that demonstrates excellence in chiropractic regulation for the public. We look forward to continuous improvement of regulatory practices in the public interest.

Respectfully submitted,

Dr. Jason Hollingsworth

Chair

Linda Sahli, BA, LLB

Chief Executive Officer (CEO)

# **EXECUTIVE MESSAGES**

# Public Members' Message

The *Health Professions Act* stipulates that members of the public must be represented within the College's governance structure to bring the public voice and ensure accountability to the public. We are pleased to fulfill our roles as Public Members on CCOA Council.

At its full complement, Council is the governing body composed of 50 per cent registered chiropractors and 50 per cent public members. This combination allows for both practicing chiropractors and members of the public to bring their diverse experiences and backgrounds to Council discussions and decision-making in the public interest.

Currently, Council has five registered chiropractors and three Public Members. We appreciate the government's efforts to recruit and appoint new Public Members in 2024 which allowed us to welcome a new Public Member April 2024. We look forward to the appointment of additional public members to help fulfil our obligation to the public interest.

We would like to acknowledge the exceptional collaboration with our Council colleagues as we govern chiropractic regulation in Alberta and the excellent work of CCOA staff. Guided by the strategic plan, together, we remain focused on effective regulation of chiropractic care to ensure the protection of the public.

Regards,

Michael Kim
Public Member

Patricia Pelton
Public Member

**Ashley Runka Owens**Public Member

CHOMENS

# **ABOUT CCOA**

# Who we are

Founded in 1917, the College of Chiropractors of Alberta is a regulatory body that has regulated chiropractors under Alberta legislation since 1923. The CCOA is committed to protecting the public, ensuring accountability and improving Albertans' health and well-being within the legislative framework of the *Health Professions Act* (HPA).

Regulation is a privilege granted to a profession by the public, in the public interest and for the public good. The CCOA is committed to governing in a manner that acknowledges and respects this privilege.

# What we do

The CCOA accomplishes its regulatory role of protecting the public and patients in accordance with the HPA by:

- Registering Alberta chiropractors who meet the initial and continuing requirements for a practice permit.
- Establishing a Code of Ethics, Standards of Practice, Bylaws and other practice guidelines.
- Establishing, monitoring and evaluating professional, clinical and ethical standards.
- Establishing a continuing professional competency program for all registrants.
- Investigating complaints and initiating disciplinary proceedings when necessary.

In Alberta, chiropractors must:

 Have obtained a degree of Doctor of Chiropractic from a chiropractic program approved by the CCOA Council.

- Treat patients in a supervised clinic setting during their final two years of education.
- Pass the national clinical competency examination.
- Maintain professional competency through participation in the CCOA continuing competence program.
- Renew their practice permit annually.
- Be trained in trauma-informed care.
- Be trained in first aid, CPR and basic life support.
- Meet good character requirements and advise the CCOA immediately of any criminal charges or complaints and discipline from other regulators or associations.
- Follow all standards, directives and rules of the CCOA.

### Authorized use of titles

The *Health Professions Act* and the Chiropractic Regulation authorizes registrants of the CCOA to use the following titles, abbreviations and initials:

- Chiropractor;
- Doctor of Chiropractic;
- D.C.;
- Registered Chiropractor;
- Doctor or Dr., only when providing a health service that is within the practice of chiropractic.

# Health services provided by chiropractors

A regulated chiropractor is trained to assess, diagnose and manage musculoskeletal (MSK) disorders, injuries, conditions and diseases and other conditions such as headaches, vestibular disorders or concussions through therapeutic interventions.

Diagnostic services include an evidence-based approach to diagnosis including a patient case history, physical examination, appropriate selection of diagnostic imaging or laboratory testing when needed. When making a diagnosis, chiropractors provide a report of findings and a management plan. Chiropractors manage MSK disorders and other in-scope conditions with therapeutic interventions. Chiropractors refer non-MSK conditions and out-of-scope conditions to the most appropriate provider including specialists for consultation and/or treatment.

Therapeutic interventions provided by chiropractors may include condition-specific education and rehabilitation such as spinal manipulation (adjustment), acupuncture/dry needling, modalities (e.g., laser, ultrasound, shockwave therapy), soft tissue mobilization/manipulation and exercise prescription. In addition to condition-specific interventions, chiropractors provide general advice on the benefit of exercise, sleep hygiene education, nutrition advice and the benefits of a balanced diet as part of healthy living.

The Canadian Chiropractic Guideline Initiative (CCGI) publishes and updates evidence-based clinical guidelines for chiropractors, including condition-specific guidance for the diagnosis and management of MSK conditions. For example, current evidence shows that chiropractic management for MSK conditions can limit the risk that a patient develops an opioid or associated addiction from chronic pain.

Chiropractors must demonstrate truthful, accurate and factual communications regarding their impact on patients' health. Evidence does not support claims of an effect of spinal manipulation for the management of non-musculoskeletal disorders. Evidence also does not support that treating spinal dysfunction with spinal manipulation has a physiological effect on organs and their function as an intervention for disease or psychosocial health.

Chiropractors must also work within their scope of practice. For example, chiropractors are not authorized to provide psychosocial interventions (e.g., counselling, hypnotherapy for addictions, therapy for mental health conditions, spiritual/emotional guidance, etc.). For health interventions that are outside the scope of practice of a chiropractor, a chiropractor is expected to refer the patient to an appropriate health practitioner.

# **COUNCIL INFORMATION**

# Governance Overview

The College of Chiropractors of Alberta is governed by a Council that is responsible for making decisions that best serve the public interest and ensure the provision of safe, competent and ethical chiropractic care in Alberta.

At its full complement of 10, Council's composition is 50 per cent Council-appointed regulated chiropractors and 50 per cent government-appointed public members. During 2023-2024, five regulated chiropractors and three public members served on Council.

Regulated chiropractors provide a clinical and practice perspective to Council's decision-making; however, they are obligated to make decisions in the public interest and not in the interest of the profession.

Public members provide a critically necessary public-oriented perspective and ensure decisions and actions made by Council are in the best interest of Albertans.

The Chair of Council is appointed by sitting Council members and can be a public member.

# **COUNCIL INFORMATION**

# Council & Committees

# 2023-2024 Council

# **Public Members**



Dr. Jason Hollingsworth Chair\*



Ms. Alethea Austin (until November 2023)



Mr. Michael Kim (as of April 2024)



Ms. Patricia Pelton



Ms. Ashley Runka Owens

# **Regulated Chiropractors**



**Dr. Kirsten Baxter**Vice Chair



**Dr. Susanne Morris** 



Dr. Christopher Nutting



**Dr. David Opresnik** 

# 2023-2024 Council Committees

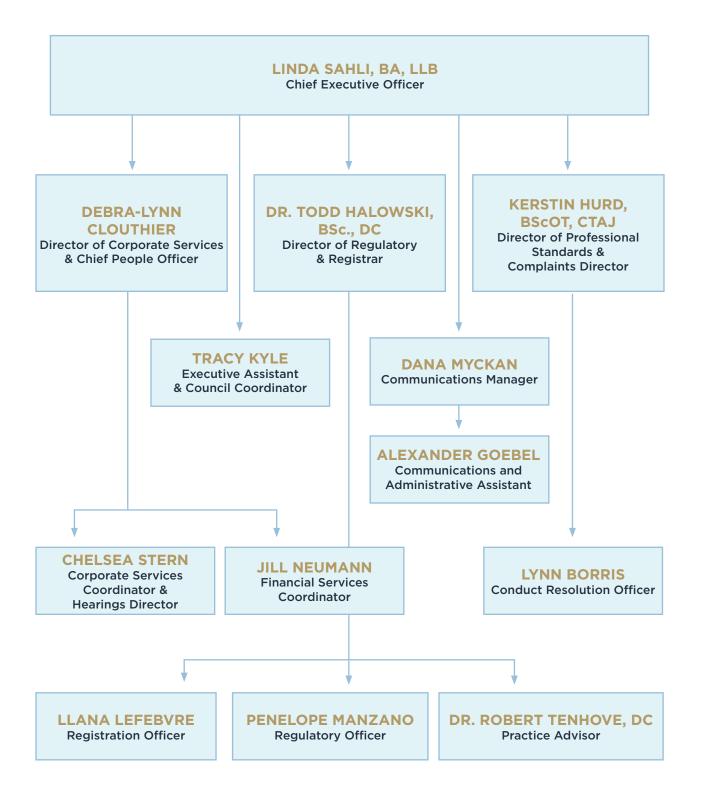
# **Governance Committee**

- Dr. Kirsten Baxter. Chair
- Ms. Alethea Austin
- Dr. Susanne Morris
- Ms. Ashley Runka Owens

# **Finance and Audit Committee**

- Ms. Patricia Pelton, Chair
- Dr. Susanne Morris
- Ms. Ashley Runka Owens
- \*The Chair sits as ex-officio on all committees.

# Organizational Chart



# MAJOR INITIATIVES AND GOVERNANCE

# Major Initiatives

The CCOA was active in fulfilling regulatory duties during 2023/2024, as well as moving forward with Year 2 of the five-year strategic plan as set out by Council. Here are the highlights of the major initiatives:

# Strategic Goal 1 - Ensure the standards and core competencies promote excellence of care while being responsive to emerging developments

- Registrants were surveyed on the current continuing competence program.
- Development of career-span competencies.
- Development and Council approval of project plan to update CCOA's Standards of Practice.
- Review and updating of reserve policies and reserve targets.
- Development of the new Professional Communication Directive.

# Strategic Goal 2 - Ensure the practice of registrants is patient-centered through safe, competent and ethical care

- Processes revised to allow registrants to earn Continuing Competence credits yearround (CC cycle changed from 11 months to 12).
- Preparing for and Managing Unexpected Outcomes course development with the Canadian Memorial Chiropractic College.
- CCOA's Role as the Regulator for the Chiropractic Profession webinar to describe the CCOA's role as a regulator and the role of registrants and how regulation exists to serve the public interest.

 Communicating CCOA's alignment with the World Health Organization Global Patient Safety Action Plan Strategic Objectives Framework in support of patient safety.

# Strategic Goal 3 - Maintain and enhance public trust and confidence in the CCOA and strengthen productive relationships

- Summaries of discipline decisions and conditions were added to the online Practice Permit Verification webpage to offer the public easier access to information and in addition to full documentation on the Discipline webpage.
- Public notice of an unregistered individual who may be providing chiropractic services.
- Management, in the public interest, of a high volume of complex complaints, with over 25% that involving allegations of sexual abuse and misconduct.
- CCOA representation on Alberta
   Federation of Regulated Health
   Professions (ARFHP) and Federation of Canadian Chiropractic (FCC).
  - CCOA AFRHP staff participation on all Interest Groups for knowledgesharing, collaboration and trends identification.
  - o CCOA FCC participation to contribute to national regulatory coordination on subjects including interjurisdictional registration; accreditation of chiropractic programs and specialty colleges and establishing entry-to-practice competencies.

# Strategic Goal 4 - Optimize organizational capacity and effectiveness, recognizing our staff is the CCOA's greatest resource

- Addition of a Conduct Resolution Officer to support Professional Standards and Complaints administration.
- Organizational design resulted in structuring staff into four interconnected quadrants: Office of the CEO, Regulatory & Registrar, Professional Standards & Complaints and Corporate Services.
- External compensation review to ensure the CCOA is within market ranges and remains competitive for attraction and retention.

# MAJOR INITIATIVES AND GOVERNANCE

# Major Governance Initiatives

# **Public Members**

We welcomed Michael Kim, appointed by the Minister of Health, as a new Public Member, bringing our roster of public representatives on Council to three.

# Strategic plan

During Year 2 of the execution of the Strategic plan, Council supported the work of administration as well as contributed to three strategic areas:

- 1. Dr. David Opresnik, as a Council representative and as a practicing chiropractor, served on the Career Span Collaborative Advisory Committee in support of Strategic goal 1.2 Review, assess and revise the competency program and competence assessment (practice review).
- 2. Council completed training related to governance and appeals. Their activities aligned with the CCOA's mission as well as Strategic goal 2: Ensure the practice of regulated chiropractors is patient-centered through safe, competent and ethical care.
- 3. Strategic goal 4.2: Develop an organizational risk register was realized when Council adopted the risk register as presented by the Chief Executive Officer, with the expectation of regular reporting at subsequent Council meetings.

# **Outgoing Council members**

Alethea Austin was appointed as a Public Member to Council March 2021 and concluded her term November 2023. From November 2021-2023, she contributed as a committee member on the Nominating Committee which merged into the Governance Committee. Her views as an Albertan as well as her experiences as a regulated Physiotherapist were appreciated.

Dr. Kirsten Baxter retired from Council, after seven years of service. She began on Council in 2017 and was Vice President from 2019-2022, including during the transition from the association and college to the college (CCOA). She served as Vice-Chair (2022-2024) and as Chair of the Nominating Committee (2022-2023) and the Governance Committee (2023-2024). Dr. Baxter has also been vital to Council's transitioning of the Chair and the CEO as well as the move to the Council appointment process.

Dr. Brad Kane, our long-serving past chair, held a one-year, ex-officio role during 2023-2024, helping Council as it transitioned to a new Chair and a new Chief Executive Officer. Dr. Kane is applauded for his tireless service to the public.

Dr. Susanne Morris concluded her service with Council. We are thankful for her two years of Council service (July 1, 2022 to June 30, 2024) and, over the past year, her service on the Finance & Audit Committee. Her commitment to the public interest was laudable.

# **Appointment process**

Council implemented the annual competency-based appointment process to fill one regulated chiropractor vacancy. All eligible registrants were invited to apply. Interested chiropractors completed an application that included a competency skills matrix. The Governance Committee reviewed applicants and conducted interviews and reference checks. The committee provided applicant recommendations to Council for approval. Dr. Aurora Ongaro was the successful applicant to fill the vacancy, with her three-year term beginning July 1, 2024.

Dr. Moe Gebara was appointed by Council to fill the vacancy resulting from Dr. Susanne Morris' resignation. Dr. Gebara will serve in the remaining year of Dr. Morris' Council term.

### **REGULATORY OVERVIEW**

# Registrar's Message

The regulatory team was busy in 2023-2024 managing the registration/renewal of 1265 registrants including 63 new registrations. We administered 483 practice visits, coordinated the registration and renewal of nearly 700 professional corporations held by registrants and completed 25 X-ray quality assurance program reviews.

Above and beyond regular regulatory duties, we embarked on the Year 2 key strategic initiatives defined in the strategic plan. Our strategic work was to further define scope of practice, core competencies and behaviours and to review, assess and revise the Continuing Competence Program (CCP) and the competence assessment (practice review). During the past year, CCOA engaged the Career-Span Collaborative (CSC) to do a comprehensive review of the current program including creating an advisory group, surveying registrants and developing career-span core competencies.

In March 2024, the CSC invited registrants to share their experience with and perceptions of the current CCP to help inform the CCP review via survey. The response to the survey was very good, with over 50 per cent of regulated chiropractors participating in the survey (n=678). The survey covered topics such as self-directed learning requirements, relevance, practice visit program and areas of improvement.

The next step in the review was to define career-span competencies. At present, the profession has an accepted entry-to-practice competency profile. However, performance advances throughout a career span and the competency profile evolves beyond an entry-to-practice performance level; additional competencies reflect real-world performance throughout one's chiropractic career. Once completed, the career-span competencies will help registrants self-assess their level of skills and knowledge in a variety of areas and use that assessment to identify the types of continuing education they need to maintain competency.

Research was also a focus in 2023-2024. The CCOA regularly gathers information to identify potential risks and to advise regulated chiropractors on risk mitigation as part of our mandate to protect the public. For example, CCOA engaged Dr. Kent Stuber, Parker University, to survey registrants to evaluate attitudes of practicing chiropractors toward the International Clinical Chiropractic Education Position Statement and Evidence-based practice. Once published, the study will support the CCOA and other partners when developing policy that supports safe, competent and ethical care to the public.

Ensuring Alberta chiropractors meet and maintain standards for registration and renewal is an important part of protecting the public and keeping them safe.

Dr. Todd Halowski, B.Sc, DC

Registrar

# REGULATORY OVERVIEW

# National Licensing Examination

To be a chiropractor in Alberta, registrants must pass the Canadian Chiropractic Examining Board (CCEB) examination. Candidates must be currently attending or have graduated from a Doctor of Chiropractic Program (DCP) that has been accredited by a Council on Chiropractic Education accrediting agency. There is a limit of four attempts at any exam.

The exam changed from three parts to two—two written components were amalgamated into one—and refocused to assess the "entry to practice" competencies.

# **Registration reviews**

There were no registration reviews by the Registration Committee in 2023-2024. Council upheld one registration appeal.

# Canadian Chiropractic Guideline Initiative

Through a levy applied at registration and renewal, CCOA and registrants support the Canadian Chiropractic Guideline Initiative (CCGI).

CCGI develops evidence-based clinical practice guidelines and best practice recommendations and facilitates their dissemination and implementation with the chiropractic profession. CCGI aligns with the CCOA's strategic goal to ensure standards and core competencies promote excellence of care while being responsive to emerging developments.

# **REGULATORY STATISTICS**

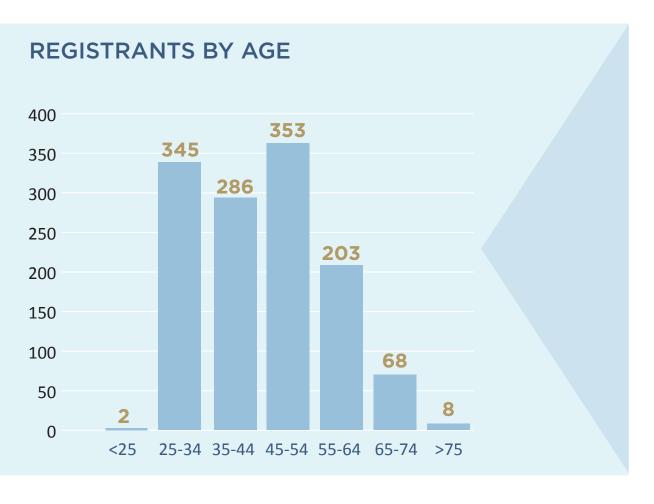
# **Registration Statistics**

REGISTRANTS
Total active registrations 1265
Historical trends in data show a consistent increase in active registrations annually.
REGISTRATIONS BY CATEGORY
Regular 1216
New Graduate 46
Special Exception*
Chiropractors who have chosen to not see patients but maintain registration for administrative purposes. See AP 1.3 for details.
PRACTICE PERMITS
Denied or restricted
Cancelled
With conditions*
*Not all of these are new conditions or conditions from a registration decision.
CHANGES OF STATUS
Total 33
COURTESY REGISTRATIONS
Educational 8
Temporary 1
Average days on courtesy register 3.7
General reason for registration on the courtesy register is an education courtesy license for teaching the practice of chiropractic.

NΕ\	W REGISTRATIONS
74	Total number of applications received
74	Total number of registrations
63	Total number of new registrations
47	Number of registrants who are new graduates of approved programs
10	Number of registrants through other routes (Canadian Free Trade Agreement - CFTA)
5	Number of new registrations for newcomers (practiced internationally)
12	Number of chiropractors returning to practice

# **REGULATORY STATISTICS**

# **Registration Statistics**



### **REGULATORY ACTIVITIES & STATISTICS**

# Continuing Competence Program

# **Program description**

To ensure the public is best served, regulated chiropractors must maintain their competence and update their skills over time. Competence is defined as the combined knowledge, skills, attitudes and judgement. Chiropractors have a responsibility to embrace continuous learning and professional reflection on all aspects of their competencies.

CCOA, as regulator of the profession, has a Continuing Competence (CC) program that all chiropractors must complete every year. The CCOA's Continuing Competence (CC) program includes professional development and practice visits as per the provisions of the Chiropractors Profession Regulation. The CC program goals are to help registrants:

- Maintain professional and clinical competency.
- Learn and apply new diagnostic and therapeutic procedures.
- Enrich knowledge of emerging health care and chiropractic needs.
- Maintain professional standards.

The CC program is continually evaluated and modified as health care environments and the needs of patients change and gaps in the profession are identified.

# **Program operations**

During 2023-2024, registrants had to complete 24 CC credits annually including trauma-informed care, record-keeping and Standard First Aid with CPR-C to maintain their registration.

# Practice visit program

The practice visit program evaluates the minimum Standards of Practice required of all registrants and supports an appropriate level

of quality assurance in the profession. All facilities used by Alberta chiropractors must meet CCOA requirements and all practices and procedures used in practice must be consistent with CCOA requirements and Standards of Practice.

Registrants must complete a self-submission practice visit every three to four years. During 2023-2024, 85 per cent of practice visits met CCOA requirements and the 15 per cent failed reviews resulted in directions imposed (including a remedial practice visit within a year), in accordance with the Standards of Practice. Practice visits identified that registrants have an opportunity to correct and enhance their examination skills to establish their diagnosis. Identified issues included the lack of communication around a treatment plan, failing to clearly inform the patient of the modality of care, frequency of care, duration of care and when and how their condition will be reassessed.

Chiropractors who also fail their remedial practice visit are referred to a coaching call with a member of the Continuing Competence Committee. The coaching call reviews deficiencies and defines minimal acceptable performance. This year, eight regulated chiropractors were referred to a coaching call where they were provided instructions for improvement and required to complete a remedial review within a year.

ISTICS	PRACTICE VISIT STAT
483	Number of reviews conducted
78	Number of remedial practice visits from period
8	Number of chiropractors referred to a coaching call, after failing their remedial review
1	Number of chiropractors referred to discipline
85%	Satisfactory reviews
15%	Failed reviews

# **REGULATORY ACTIVITIES & STATISTICS**

# Quality Assurance Program

Chiropractors are authorized to apply X-ray imaging but must meet legislative standards. The CCOA uses an X-ray Quality Assurance Program (QAP) self-submission review process to determine compliance. The self-submissions are composed of a sampling of patient X-rays and quality assurance forms from the registrants' X-ray facilities. The purpose of reviewing radiographs is to ensure chiropractors meet standards for radiographic image production and to ensure patient exposure is clinically relevant and as low as reasonably possible.

QAP REV	IEWS
Total number of QAP reviews	25
Initial reviews	22
Remedial reviews	3
QAP pass rate	<b>73</b> %
QAP fail rate	27%
*All deficiencies must b within t	e addressed wo months.

# **Advertising Directive Compliance Progam**

CCOA facilitated adherence to the Advertising Directive; any advertising, marketing or promotion chiropractors use must be truthful and factual, in the public interest and within the chiropractic scope of practice. CCOA employs a software tool to actively review registrant websites and social media profiles. This tool identified advertising concerns resulting cautions to 110 chiropractors prompting them to review and correct their content.

Number of regulated chiropractors with advertising concerns

### PROFESSIONAL STANDARDS & COMPLAINTS OVERVIEW

# Director of Professional Standards & Complaints Director Message

During 2023-2024, the new organizational structure combined professional standards and complaints and added a role, Conduct Resolution Officer. This role supports the Professional Standard department with its increasing volume and complexity of complaint) while contributing to improved outcomes and quality of work, in the public interest.

Our goal is to help ensure patients receive safe and ethical care when they visit a chiropractor. We do this by regulating chiropractors using the tools we have in our governing legislation, the HPA. We aim to provide a compassionate approach using the principles of right-touch regulation. This means we strive to be proportionate, consistent, transparent, accountable and agile in our approach to regulation.

Right touch does not mean light touch. The CCOA requires that chiropractors take responsibility for their actions. Many complaint files are successfully resolved when regulated chiropractors and their legal counsel are respectful of CCOA and its processes, acknowledge mistakes, take responsibility and show a desire to learn and improve. Those who do not demonstrate these qualities through the complaints and discipline process may need a stronger approach to achieve the desired outcome of protecting the public.

# **Complaints activities**

The past year was a busy one, managing complaints from prior years, new complaints and complex matters with appeals. Complaints can come from patients, chiropractic colleagues or any other health care provider. Section 56 of the HPA allows the complaints director to initiate a complaint and act on it, if they have reasonable grounds to believe the conduct of a chiropractor constitutes unprofessional conduct.

The complaints from 2023-24 included a high number of sexual abuse and sexual misconduct allegations. The CCOA will assess whether additional training and directives are needed for the profession, to protect the public interest.

During 2023-2024 CCOA convened two section 65 committees. Under the *Health Professions Act*, a s. 65 application can be made by the Complaints Director or a hearing tribunal when there is a public safety issue that warrants suspending or placing conditions on a practice permit before the conclusion of investigations and hearings. The chiropractor has an opportunity to respond to the application. The committee will consider the application and the chiropractor's response and will decide in the best interests of the public. The two applications made this year resulted in two chiropractors' practice permits being made subject to conditions pending the outcome of the complaints and disciplinary processes.

# **Professional standards activities**

We regularly publish ethical decision-making articles that highlight issues we encounter in concerns and complaints, such as sexual abuse/misconduct, professional communication, informed consent and professional boundaries. These articles offer chiropractors an opportunity to reflect, learn and incorporate better practices.

We have initiated a review of the Standards of Practice, to update and modernize, and to close any current gaps in professional standards, such as equity, diversity and inclusion in chiropractic care. This project will take a few years, and will include a full environmental scan, best practice review, public/patient and chiropractor consultation. We look forward to making progress with the Standards of Practice.

We are proud of the work we have done this year to protect the public.

Kerstin Hurd, BScOT, CTAJ

Director of Professional Standards & Complaints Director

### PROFESSIONAL STANDARDS & COMPLAINTS OVERVIEW

# Complaints and Discipline

The College of Chiropractors of Alberta (CCOA) has an obligation under the *Health Professions Act* (HPA) to ensure the public receives safe, competent and ethical care from chiropractors practicing in Alberta. The CCOA administers a complaints and discipline program in accordance with Part 4 of the HPA to address complaints that arise.

When the CCOA receives a complaint about a chiropractor, the Complaints Director reviews the complaint and considers whether it is within the College's jurisdiction to address and how to proceed. An investigation may be conducted to gather additional information relevant to the reported issues.

Depending on the circumstances of the complaint, the HPA provides various options to address the complaint, including resolution with consent, dismissal, investigation and referral to hearing. Alternative Complaint Resolution is also an option; however, both the complainant and the responding chiropractor must agree to it.

# **Patient relations program**

The patient relations program provides funding for counselling to support patients with complaints of sexual abuse or sexual misconduct.

In the last year, the College received seven complaints that reported sexual abuse and/or sexual misconduct. Three individuals accessed the patient relations program

# **Glossary**

**Abeyance** – When a complaint is put on hold. It is not formally resolved or closed, but the regulated chiropractor is not practicing and there are other factors involved.

**Registrants** – All regulated chiropractors in Alberta who renew their practice permit annually to entitle them to practice.

**Regulated chiropractor** – An individual registrant or a segment of the registrant population.

**Section 118** – If there are concerns about a regulated chiropractor's capacity, the complaints director can direct the person to undergo an assessment of their physical or mental capacity and can direct them to submit to treatment if necessary.

**Section 65 application** – A s. 65 application is made when it is believed that it is in the public interest to make an application to impose conditions or a suspension on a regulated health professional's practice permit before the outcome of investigation and disciplinary processes.

# PROFESSIONAL STANDARDS & COMPLAINTS OVERVIEW

# **Complaints Statistics**

# **COMPLAINTS RECEIVED** New complaints received this year Complaints carried over from previous year Complaints open 18 (as of June 30, 2024) Complaint was put in abeyance Complaints closed/resolved during the year SOURCES OF COMPLAINTS From the public From CCOA **DISPOSITION OF COMPLAINTS** Chiropractors dealt with under Section 118\* Complaints referred to a hearing Hearings held Complaints referred 18 to an investigation Complaints referred to **Alternative Complaints** Resolution Complaints dismissed or redirected elsewhere Complaints resolved informally using Complaint Resolution Agreement

# s. 65 applications made resulting in two chiropractors' practice permits limited by conditions TYPE/NATURE OF COMPLAINTS RECEIVED THIS YEAR Sexual abuse and/or sexual misconduct Consent Boundary issues

Professional communication

Injury from treatment

Ethical decision-making

Continuing Competence Program compliance

# **Hearings**

Three hearings commenced this year. Decisions were handed down in December 2023, March 2024 and May 2024.

# **Appeals**

There were no discipline appeals of Hearing Tribunal decisions during the 2023-2024 reporting period.

# **COMMITTEES, TRIBUNALS AND VOLUNTEERS**

# **Registration Committee**

Dr. David Linford, Chair

Dr. Leslie Davidson

Dr. Josline Hampson

# Hearing Tribunal and Complaints Review Committee (CRC)

Dr. Leslie Aldcorn

Dr. Gordon Burns

Dr. Kenneth Butler

Dr. Mecca Fayad

Dr. Moe Gebara

(March 18, 2022 to June 30, 2024)

Dr. Christopher Hankins

Dr. Allan MacDonald

Dr. Dianna Martens

Dr. C. Alan Poytress

Dr. Darrell Smith

Dr. Michael Stewart

Dr. Sarah Wu

# **Continuing Competence Committee**

Dr. Kathryn Pedden, Chair

Dr. Tara Guthrie

Dr. Christopher Anderson

Dr. Aurora Ongaro

(June 17, 2022 to June 30, 2024)

Dr. Aaron Puhl

# **Clinical Advisors**

Dr. Dean Allan

Dr. Christopher Anderson

Dr. Maher Audeh

Dr. Moe Gebara

(September 1, 2015 to June 30, 2024)

Dr. Tara Guthrie

Dr. Jeffrey Hedrich

Dr. Karyn Klut

Dr. Caterina Lerede

Dr. Julian Lim

Dr. Robert Lu

Dr. Aurora Ongaro

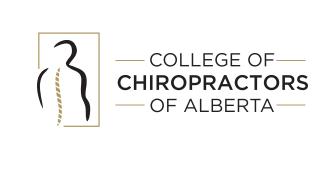
(November 15, 2009 to June 30, 2024)

Dr. Kathryn Pedden

Dr. Sadiq Rajan

Dr. Jenefer Shaw

Dr. Michelle Takeuchi



# **Financial Statements**

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# INDEPENDENT AUDITOR'S REPORT

To the Members of College of Chiropractors of Alberta

# Opinion

We have audited the financial statements of College of Chiropractors of Alberta (the "organization"), which comprise the statement of financial position as at June 30, 2024, and the statements of operations, changes in net assets and cash flow for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the organization as at June 30, 2024, and the results of its operations and cash flow for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations (ASNPO).

### Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the organization in accordance with ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with ASNPO, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the organization's financial reporting process.

### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

(continues)



Icon Tower I / 301, 10138-104 St. NW Edmonton, AB T5J 1A7 P. 780.424.3002 / F. 780.428.3345

Independent Auditor's Report to the Members of College of Chiropractors of Alberta (continued)

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to
  fraud or error, design and perform audit procedures responsive to those risks, and obtain audit
  evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting
  a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may
  involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal
  control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures
  that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the
  effectiveness of the organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the
  disclosures, and whether the financial statements represent the underlying transactions and events in
  a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Edmonton, Alberta October 25, 2024 Bruce MS Mahon Professional Corporation Chartered Professional Accountants

# Statement of Financial Position June 30, 2024

	2024	2023
ASSETS		
CURRENT		
Cash	\$ 3,680,683	\$ 3,509,348
Accounts receivable	37,261	31,952
Prepaid expenses	100,494	100,500
	3,818,438	3,641,800
PROPERTY AND EQUIPMENT (Note 3)	860,471	888,781
LONG TERM RECEIVABLES	17,729	41,398
INVESTMENTS (Note 4)	2,057,122	1,915,336
	\$ 6,753,760	\$ 6,487,315
LIABILITIES CURRENT		
Accounts payable and accrued liabilities (Note 5)	\$ 178,175	\$ 186,669
Government remittances payable Wages payable	653 36,581	17,327 11,427
Prepaid dues (Note 6)	2,559,141	2,372,600
	2,774,550	2,588,023
NET ASSETS	4 000 040	4 054 070
Unrestricted Invested in property and equipment	1,262,612 860,471	1,351,273 888,780
Internally restricted	1,790,108	1,605,358
Externally restricted	66,019	53,881
	3,979,210	3,899,292
	\$ 6,753,760	\$ 6,487,315

COMMITMENTS (Note 8)

ON BEHALF OF THE COUNCIL	
0NM	Council Member
Comers	Council Member

# **Statement of Operations**

# For the Year Ended June 30, 2024

	2024	2023
REVENUE		
Registration and renewal fees	\$ 2,490,101	\$ 2,427,350
Recovery charges	141,176	232,189
Investment income and other (Schedule 1)	251,568	179,146
X-Ray program fees	14,240	8,029
	2,897,085	2,846,714
EXPENSES		
Human resources	1,420,061	1,282,671
Professional conduct		
Corporate services	1,420,061 415,039 333,042	
External support	165,435	
Building operations	153,858	
Governance	130,827	
Regulation	74,798	
Amortization	63,027	
Continuing competence	58,978	
X-Ray program costs	2,102	•
	2,817,167	2,541,964
EXCESS OF REVENUE OVER EXPENSES	\$ 79,918	<b>3</b> \$ 304,750

# Statement of Changes in Net Assets Year Ended June 30, 2024

	2023 Balance	Revenue	Expenses	Transfers	2024 Balance
UNRESTRICTED	\$ 1,351,273	\$ 2,882,845	\$ (2,752,038)	\$ (219,468)	\$ 1,262,612
INVESTED IN PROPERTY AND EQUIPMENT	888,780	-	(63,027)	34,718	860,471
INTERNALLY RESTRICTED					
Capital and building reserve	344,858		-		344,858
Risk management reserve	710,500		-	184,750	895,250
Regulatory reserve	550,000		-	-	550,000
	1,605,358		-	184,750	1,790,108
EXTERNALLY RESTRICTED					
X-Ray registration reserve	53,881	14,240	(2,102)	-	66,019
2024 TOTAL	\$ 3,899,292	\$ 2,897,085	\$ (2,817,167)	- ;	\$ 3,979,210
	2022 Balance	Revenue	Expenses	Net Transfers	2023 Balance

\$ 3,594,542 \$ 2,846,714 \$ (2,541,964)

- \$ 3,899,292

2023 TOTAL

# Statement of Cash Flow Year Ended June 30, 2024

	2024	2023
OPERATING ACTIVITIES		
Excess of revenue over expenses Items not affecting cash:	\$ 79,918	\$ 304,750
Amortization of property and equipment	63,027	76.923
(Gain) on disposal of investments	12,708	33,581
Unrealized (gains) losses on investments	(78,044)	(112,580)
	77,609	302,674
Changes in non-cash working capital:		
Accounts receivable	(5,309)	(23,327)
Long term receivables	23,669	(41,398)
Accounts payable and accrued liabilities	(8,493)	23,735
Prepaid expenses	6	(29,630)
Government remittances payable	(16,674)	(10,504)
Wages payable	25,154	5,773
Prepaid dues	186,541	59,025
	204,894	(16,326)
Cash flow from operating activities	282,503	286,348
INVESTING ACTIVITIES		
Purchase of property and equipment	(34,718)	(11,291)
Net purchase of investments	(76,450)	(39,534)
Cash flow used by investing activities	(111,168)	(50,825)
INCREASE IN CASH	171,335	235,523
Cash - beginning of year	3,509,348	3,273,825
CASH - END OF YEAR	\$ 3,680,683	\$ 3,509,348

# Notes to Financial Statements Year Ended June 30, 2024

### 1. NATURE OF ORGANIZATION

The College of Chiropractors of Alberta (CCOA) is established under the Health Professions Act to govern its members in a manner that protects and serves the public interest through regulation to ensure safe, competent and ethical chiropractic care. CCOA is a not-for-profit organization and accordingly, is exempt from the payment of income taxes.

On December 7, 2023, the Health Professions Act recognized the name change of the college from Alberta College and Association of Chiropractors to College of Chiropractors of Alberta.

### 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial statements were prepared by management in accordance with Canadian accounting standards for not-for-profit organizations.

A summary of the significant accounting policies used in these financial statements are set out below.

### Net assets

<u>The Unrestricted Fund</u> accounts for CCOA's operations and administrative activities. The CCOA's annual surpluses and deficits from year to year are added to and subtracted from the Unrestricted Fund.

<u>The Invested in Property and Equipment Fund</u> reflects the purchase, sale and amortization of property and equipment.

<u>The Capital and Building Reserve Fund</u> has been established to support and preserve the value of CCOA's building and equipment.

<u>The Risk Management Reserve Fund</u> has been established to build a reserve of funds intended to mitigate and manage risk management issues for CCOA. Risk management includes but is not limited to legal matters, insurance matters, cyber security and other similar matters.

<u>The Regulatory Reserve Fund</u> has been established to uphold CCOA's regulatory mandate as required by the Health Professions Act. Regulatory costs include but are not limited to staff, program development, training, complaints, discipline and counseling requirements.

<u>The X-Ray Registration Reserve Fund</u> reports resources used for the administration of the Accredited X-Ray Quality Assurance program of CCOA.

From time to time, Council may impose certain restrictions on fund balances. These amounts are presented on the statement of financial position, statement of operations and the statement of changes in net assets as internally restricted funds. These internally restricted amounts are not available for other purposes without approval of Council.

### Investments

Portfolio investments are stated at fair market value. The investment income or loss based on the changes in fair market value is reflected in the period incurred.

(continues)

# Notes to Financial Statements Year Ended June 30, 2024

### 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

### Measurement uncertainty and use of estimates

The preparation of financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amount of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Significant estimates include providing for amortization of property and equipment. Actual results could differ from those estimates.

# Revenue recognition

CCOA follows the deferral method of accounting for contributions.

- Membership dues are recognized in the year to which they apply. Membership fees received in advance are recorded as prepaid dues.
- Application fees are recognized as revenue when application fees are collected.
- Other investment income is recognized as revenue when earned.
- Cost recoveries and fines related to professional conduct activities are recognized when the
  amount of recoveries can be measured and collection of the recoveries is reasonably
  assured. Recoveries with payment plans that extend beyond the next fiscal year are shown
  as long term receivables.

### Income taxes

CCOA is a non-profit organization under the Income Tax Act and therefore is not subject to either Federal or Provincial income tax.

# Property and equipment

Property and equipment is recorded at cost less accumulated amortization. CCOA calculates amortization on its property and equipment using the following methods and rates

Landnon-depreciableBuilding40 yearsstraight-line methodComputer equipment3 yearsstraight-line methodFurniture and fixtures5 yearsstraight-line methodDatabase development5 yearsstraight-line methodWebsite3 yearsstraight-line method

Only six months of amortization is provided on equipment acquired during the year. No amortization is provided on equipment disposed of during the year.

Property and equipment is tested for impairment when conditions indicate that either the full or partial amount of the asset no longer has long-term service potential to CCOA. If such conditions exist, an impairment loss is measured at the amount by which the carrying amount of the asset exceeds its residual value.

# Notes to Financial Statements Year Ended June 30, 2024

PROPERTY AND EQU	IPMENT	Cost	Accumulated amortization	N	2024 let book value	٨	2023 let book value
Land	\$	250,000	\$	\$	250,000	\$	250,000
Building		1,078,679	513,211		565,468		592,435
Computer equipment		93,502	58,221		35,281		12,567
Furniture and fixtures		55,816	55,511		305		914
Website		19,691	19,691		-		-
Database development		204,357	194,940		9,417		32,865
	\$	1,702,045	\$ 841,574	\$	860,471	\$	888,781

Amortization provided in the current year totaled \$63,027; (2023 - \$76,923)

### 4. INVESTMENTS

Investments consist of a diversified portfolio of Canadian and foreign fixed income and marketable security investments. The investments are recorded on the statement of financial position at their fair market value as at the year end date. Changes to fair market value can and will occur daily and would affect the balance in this account. The distribution of investments and change in market value are as follows:

	2024	2023
Fixed income Canadian equity	\$ 1,186,611 234,978	\$ 1,199,511 172,630
Global equity Mutual funds	334,814 -	120,326 200,195
Total cost	\$ 1,756,403	\$ 1,692,662
Market value	\$ 2,057,122	\$ 1,915,336

Fixed income investments consist of various pooled funds containing both Canadian and global fixed income products.

5.	ACCOUNTS PAYABLE AND ACCRUED LIABILITIES	2024			2023		
	Trade accounts payable and accrued liabilities Dues collected on behalf of other organizations	\$	146,750 31,425	\$	155,644 31,025		
		\$	178,175	\$	186,669		

# Notes to Financial Statements Year Ended June 30, 2024

### 6. PREPAID DUES

Prepaid dues are amounts received by members in advance for the upcoming registration year and are generally due by June 30. The prior year prepaid dues of \$2,372,600 have been included in the 2024 registration and recovery revenue on the Statement of Operations. CCOA collected \$2,433,441 of prepaid dues in fiscal 2024 that will be included in the 2025 registration and recovery revenue. In addition, CCOA collected \$125,700 in prepaid conduct levy charges that will be included in the 2025 Statement of Operations and then moved to the Regulatory Reserve in 2025.

### 7. TRANSFERS AND RESTRICTIONS

During the year, CCOA approved the following inter-fund transfers:

	2024	2023
Property and Equipment From Unrestricted Fund	\$ 34,718	\$ 11,291
Risk Management Reserve From Unrestricted Fund	184,750	-
Net transfers from Unrestricted Fund	\$ 219,468	\$ 11,291

The transfers from unrestricted net assets to restricted funds are not available for general purposes without the approval of the Council.

# 8. COMMITMENTS

CCOA has committed to various agreements including an office equipment lease, a software maintenance agreement and a website redesign contract as follows:

Commitment payment schedule:

2025 2026	\$ 109,912 3,690
	\$ 113,602

### 9. SUBSEQUENT EVENT

On July 22, 2024, CCOA signed an agreement to list the building and land for sale. The listing price is \$2,350,000 and the net book value as at June 30, 2024 is \$815,468.

# Notes to Financial Statements Year Ended June 30, 2024

### 10. FINANCIAL INSTRUMENTS

The organization is exposed to various risks through its financial instruments. The following analysis provides information about the organization's risk exposure and concentration as of June 30, 2024.

# Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities. The organization is exposed to this risk mainly in respect of its accounts payable and accrued liabilities and wages payable. CCOA mitigates its liquidity risk by monitoring its operating cash flow requirements to ensure it has sufficient funds to meet its obligations.

# Currency risk

Currency risk is the risk to the organization's earnings that arise from fluctuations of foreign exchange rates and the degree of volatility of these rates. The organization is exposed to foreign currency exchange risk on cash held in foreign dollars and through its investment in global markets.

### Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. The investments of CCOA are subject to interest rate risk because changing interest rates impact the market value of the fixed rate investments.

### Other price risk

Other price risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices (other than those arising from interest rate risk or currency risk), whether those changes are caused by factors specific to the individual financial instrument or its issuer, or factors affecting all similar financial instruments traded in the market. The organization is exposed to other price risk through its investment in equity securities traded in an active market.

### 11. COMPARATIVE FIGURES

Some of the comparative figures have been reclassified to conform to the current year's presentation.

# Investment Income and Other Year Ended June 30, 2024

(Schedule 1)

	2024	2023
INVESTMENT INCOME (EXPENSES)  Bank interest Investment income Gains (losses) on disposal of investments Unrealized gains (losses) on investments Investment advisor fees Foreign exchange gains	\$ 106,117 73,227 12,708 78,044 (22,194) 3,666	\$ 57,705 60,706 (33,581) 112,580 (21,171) 2,907
<u> </u>	\$ 251,568	\$ 179,146



