

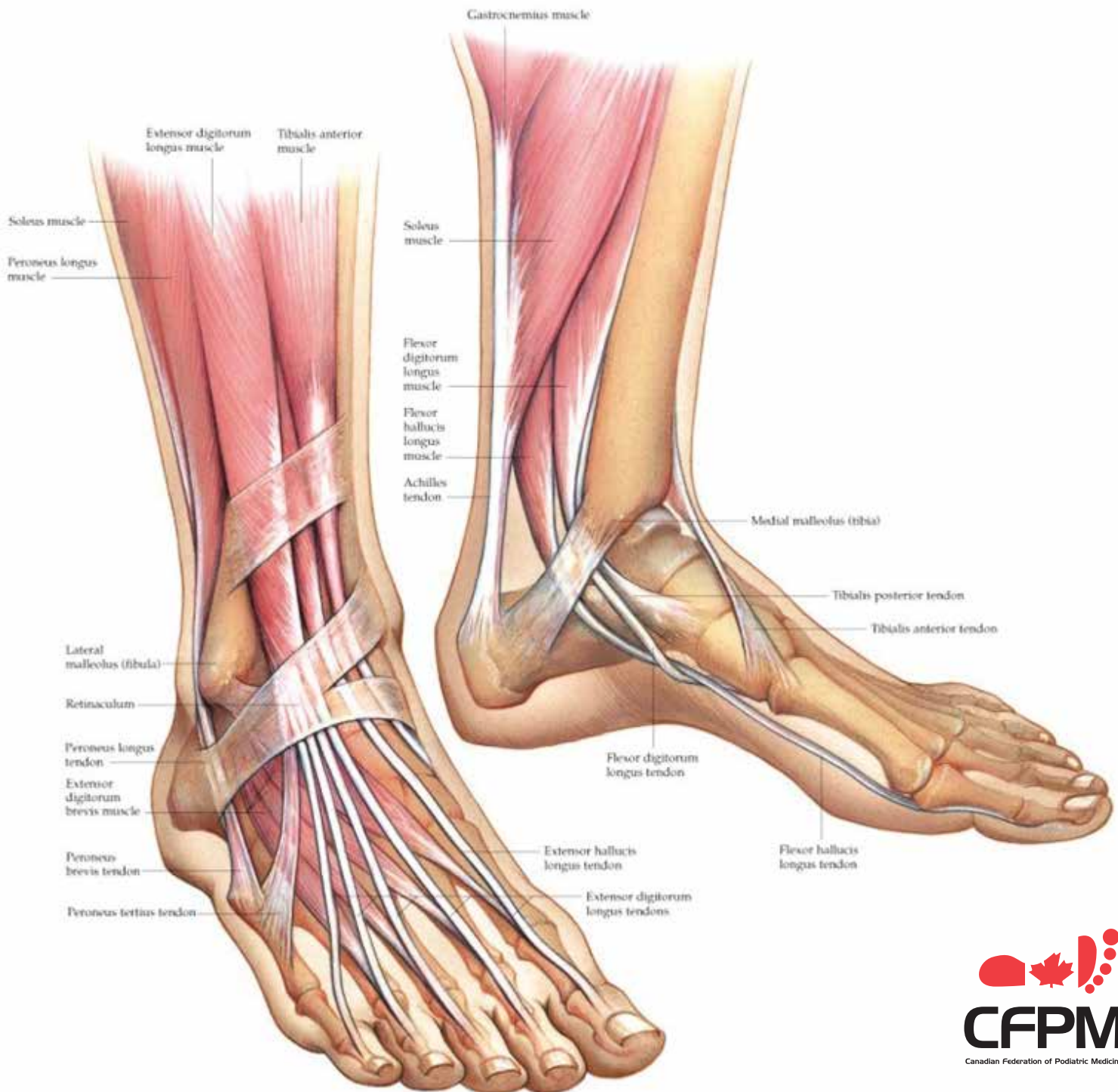
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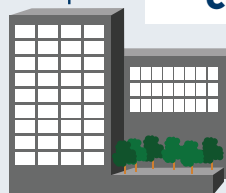


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Message from the President

by Dr. Helen Rees

“YOU ARE THE AVERAGE OF THE FIVE PEOPLE YOU SPEND THE MOST TIME WITH.”

Starting work for the first time, let alone moving to Canada, was all very new to me and somewhat daunting for a newly graduated 21 year old. Friends, former colleagues and others, often stated that I was being too ambitious, that I would never meet my goals and expectations and could be making a serious mistake. Yes, there have been challenges, both personally and professionally, however, jumping over various hurdles and maintaining my enthusiasm has significantly widened my horizon, led me to achieve my ambitions, set future goals and go above and beyond my expectations thus far. *“Anyone who has never made a mistake, hasn’t tried anything new”* (Albert Einstein). Joining the CFPM, when I first started working in Canada, provided me with an early learning opportunity about our profession, gave me a real sense of community and the support I required to enable me to be the podiatrist I am now. May is Foot Health Month and presents the profession with a great opportunity to interact with the public, health care professionals and non-members alike.

In my first year of practising in Canada, a close mentor taught me something that has developed me as an individual and has enabled me to forge new avenues in my professional career: *“You are the average of the five people you spend the most time with. Find role models, befriend and learn from mentors, make friends with people smarter than you and who are more successful in fields you are interested in”*. As a new Chiropractor/ Podiatrist to Canada, I was very fortunate to be able to explore numerous offices around Ontario, New Brunswick and other provinces. This introduced me to several established Chiropractors/ Podiatrists from whom I was able to learn, develop and adapt their experiences

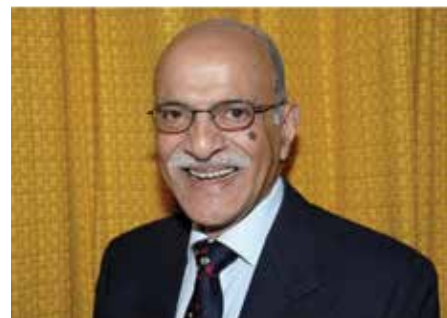
whilst forming my own new, professional life. I embraced networking widely, with people outside as well as from within our field, learning from people with more and different experiences, knowledge and individuals who possessed those unique qualities I continue to seek out. The CFPM will be networking and holding meetings with the Canadian Life and Health Insurance Association in March to discuss current insurance topics. I personally network by attending the CFPM conferences. The conferences provide a unique environment in which to socialise and share experiences with colleagues, invited speakers and a variety of exhibitors. During breakfast, prior to the start of conference, I have often found myself in discussion with colleagues regarding how our offices differ and the latest advances in podiatric practice we have recently been learning about. It was from attending one of these conferences that I particularly noted the eclectic mix of individuals present and the abundance of knowledge, skills, experience and a tangible enthusiasm for our profession that filled the hall. Next time you attend a conference, why not take the opportunity to talk to someone new and share something exciting? The CFPM will be holding their Annual Conference in November 2018 in Niagara Falls.

By continuing to share our knowledge professionally and socially, we help our profession flourish by being able to demonstrate to the public and other health professions that we are a vibrant community of experts in our field.

The CFPM continues to develop to ensure that our profession is successful and always takes steps to progress in this ever-changing world. As the CFPM’s President, I am looking forward to working closely with members and Board members alike, to ensure we meet our goals and expectations for the year.

The Passing of Dr. Suresh Ram

The family of Dr Suresh Ram recently announced his passing on Saturday Nov. 18, 2017 at the age of 77. Suresh was a long standing member of the CFPM and honoured in 2016 with a CFPM Honorary Membership Award for his over 50 years of service in podiatry. Suresh’s story and highlights of his 50-year podiatric career was featured in the CFPM magazine in the fall 2014 issue. He was a graduate of the chiropody program at the former Chelsea School of Chiropody in 1964 and worked in London, England, until he came to Canada in 1976. Suresh settled in Regina, Saskatchewan, working in a variety of settings, including private practice, community clinics and servicing rural satellite clinics. Suresh will be remembered for his kindness, gratitude and his sense of humour. A Funeral Service to celebrate Suresh’s life took place Saturday, Nov. 25, 2017 at Regina Funeral Home. Donations in memory of Suresh may be made to the Renal Unit c/o General Hospital 1440 14th Ave. Regina, SK S4P 0W5.





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WHO and WHAT is Killing Your Productivity?

by Lynn Homisak, SOS Healthcare & Management Solutions, LLC www.soshms.com

Do you have that feeling that negative forces are working to prevent you from practicing as productively as you did 2, 5 or 10 years ago? Is it the mystery of where time and resources go, difficulty managing staff, effort maintaining good work relationships, concern that certain procedures or policies just aren't working anymore? Regardless...it's time you peel off whatever management bandaid you've patched together and find solutions for real results. Here are just a few to get started.

Unclear Expectations –

If tasks or projects are not completed to your satisfaction, there's a good chance your message is not getting through to staff. Are outcomes clearly defined? Are your high standards, too high? Does your task estimate match their skill level? Is the timeline realistic? If not, possibly start with setting the bar slightly lower and you may find yourself more surprised, even pleased, at the actions they take. Do this not by shouting orders and assuming they will follow through; rather, ask questions and let them participate in the process. For example, you might ask, "What would be a reasonable estimate to complete this project?" Or, "Do you have a suggestion for improving this task?" Often, if you ease up and modify expectations, a good employee will work hard to meet the goal. PS- it also helps if you are the kind of "boss" who doesn't micromanage at every turn. Employees put more energy into their work and are infinitely more productive if they enjoy *what* they're doing and *who* they're doing it for! Proficiency will come with time, we all learn to crawl before we run.

Social Media, Internet, Email –

I feel like we've developed a love-hate relationship with technology. Yes, social media is a cost-effective vehicle to market our practices and interact with patients and public. Yes, the internet is a great resource for researching information and tapping into world events. Yes, having Twitter and Facebook pages increases our exposure, while email offers communication options for patients and staff. However, each one of these tools require time to manage them, so what productive minutes do we rob from Peter to pay Paul in our already time-challenged schedules? To effectively handle these activities, it's best to assign a responsible staff person to set aside some time each day to sort and respond to non-clinical emails, and update social media pages. The individual responsible for checking insurance coverages can create a similar timeframe. Since everyone's first priority is patient care, it is important to limit time on the internet to a suitable part of the daily schedule and not resort to revisiting it throughout the day. To avoid misuse and abuse, a detailed

policy should be created for the office to outline social media guidelines, personal cell phone usage, practice computer restrictions and non-adherence consequences.

Automated Appointment Reminders vs Yesterday's Routines –

Letting go of past practices can be as difficult as adapting to new technology. Staff in many offices are still manually calling each patients to remind them of their appointment. When pressed, they admit they prefer this method because "patients like it better" and "it's more personal" – and "YES, it is definitely time consuming". We understand that appointment reminders are critical and calling patients is a must, but why not consider having a professional, automated system do it? Given the time that staff typically spend on this single task, anywhere from 30-90 minutes (some confess more), there are far more productive ways they can use that chunk of time. And automation is far more cost effective. Of course, manual calls can still be made to patients who require additional instruction; however, most patients today have adapted to automated calls since most of their other doctors are already doing it. As far as that personal touch? Ask your staff how many patients they personally connect with vs how many of their calls go directly to the patients' answering machines where they are forced to leave a recorded message. True score? Answering machines win by a landslide! So, who's automating who these days?

Flawed Staff Meetings –

If there is inadequate follow up or you are not achieving specific outcomes after your scheduled staff meetings, I'll be the first to agree, they are a total waste of time. However, by routinely carving out a small slice of your schedule when the entire office can participate in open communication, shared ideas, solutions, responsibilities, results, and accomplishments...you can pretty much hand your staff the keys necessary to ignite productivity. A structured (written) Action Plan and pre-planned agenda offer direction and necessary follow up and should be the basis of each meeting. They help to define and outline goals, build a culture, and stimulate the power of collaboration. You can request a complimentary copy of an Action Plan template to help keep your meetings on track by emailing me at Lynn@soshms.com. I'm happy to send you one.

These were just a few of the productivity-killers that might be holding your practice back.

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THIRD-YEAR CHIROPODY STUDENTS VISIT TO...

The Rama First Nation Annual Health Fair

Health promotion and prevention is one of the main competencies required in the last year of the Chiroprody program at The Michener Institute. Whether it's an educational seminar or participating in a health event, it's important for us to demonstrate our clinical education to fellow health care practitioners and the public by promoting and advancing foot health.

On September 28, 2017 we drove two hours to the Chippewas of Rama First Nation near Orillia, Ontario to participate in the annual Rama First Nations Health Fair. Not only was this an opportunity to raise awareness of the importance of diabetic foot screenings, we also got to explore the beautiful reserve and Edward Moloy's chiroprody clinic at the health centre (Ed is also a graduate from Michener's Chiroprody program).

At the Rama Health Fair, the Anishnaabe people of Chippewas of Rama First Nation warmly welcomed us to their territory. They invited us to learn about their way of life and connection to all of creation. They see themselves as another element

of nature; no greater and no less than everything else on Earth. Thus, they hold animals and all of nature in very high regard. The plants and animals they use for food and clothing is a constant reminder of their interconnectedness with nature.

There are four sacred medicines traditionally used amongst the Anishnaabe people: tobacco (semaa), sage (mashkodewashk), sweetgrass (wiingash) and cedar (kiizhik). Tobacco is the first and most fundamental medicine. It is used to communicate with the spirit world through offering. Sage is a woman's medicine that offers strength, wisdom and clarity. It is used to symbolize the life-giving power of women. Sweet grass is a gift from Mother Earth which promotes strength and kindness. The aroma of burning sweetgrass has a calming effect which promotes kind thoughts. And lastly, cedar is used for purification and bringing balance to yourself. It is also known for attracting positive feelings, energy and emotions. We had the opportunity to participate in a smudging ceremony – the burning of these various plants to make a cleansing smoke – to allow negative energy, feelings and emotions to be lifted away and to heal our mind, body and spirit.

There were several booths set up inside the Mnjikaning Arena Sports Ki community centre with other health

care professionals such as paramedics, rehabilitation professionals, naturopaths and local companies and programs including health promoters, local artisans and businesses.

At our booth, our focus was diabetic foot screenings. For people with diabetes, risk identification such as neuropathy, foot deformity and vascular disease is fundamental for effective preventive management of ulcerations and amputations. We made a makeshift clinic and used the Inlow's 60-Second Diabetic Foot Screening Tool, which allowed us to make a quick but thorough evaluation of our patients. This let us give feedback to the patients and raise awareness of foot health in the community.

Collectively, all of the health promoters and organizations at the fair shared the goal of improving the wellbeing of the Rama First Nation, and we were honoured to be part of it. We felt a strong sense of community where everyone has a role to play in creating a thriving community. This experience allowed

us to gain a better understanding of the demand for foot care services for Rama First Nation, and how to bridge that gap. Having experienced the culture, community and speaking to the locals, we left Rama with a great appreciation and understanding for their culture and history.



Edward Moloy (left) with Selina Lyn, Radha Modhera and Chad Bezaire, third-year Chiroprody students from The Michener Institute of Education at UHN



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How Flat is the Paediatric Flatfoot?

Stewart C. Morrison^{1*}, Juliet McClymont¹, Carina Price² and Chris Nester²

We welcome the recent publication by Uden et al. [1] exploring characteristics of the typically developing paediatric foot. The shape, structure and function of the foot changes across infancy, childhood and adolescence and, as the authors state, this often poses challenges for clinicians confronted with the paediatric patient. For many years we have debated when to intervene with management of “flatfoot” and despite advances with our knowledge base, myths about the paediatric foot prevail. There is a stigma about the paediatric foot which extends beyond the podiatry profession and poses a barrier to our progress. Understanding the typical trajectory of the foot is essential but it is critical that we avoid pathologising typical foot development. This is harmful to our patients, perpetuates unnecessary expectation and damaging to our profession. We propose that it is time to revisit our dialogue and move away from attaching illdefined labels (e.g. “paediatric flatfoot”, “developmental flatfoot”) to typical development.

We challenge the idea that the primary issue is how “flat” the foot is and even whether it is meaningful to call it “flat”. Evidence shows that foot shape is characterised by age-specific anatomical and aetiological factors [2, 3] yet, most clinical concerns are physiological, nonpathological and not requiring intervention [4]. Clarity emerging from robust, scientific data which quantifies the developmental trajectory of foot is needed and will be critical to resetting our theoretical, clinical and scientific perspectives about paediatric foot development.

It seems that the current approach to clinical practice is a distillation of the paradigms for managing adult feet, whereby some foot types are assumed problematic, even though there is no strong evidence for this. Throughout the Uden et al. [1] paper, and in much other literature, “flatfoot” is a strongly targeted foot type, often ‘diagnosed’ using one or more of the plethora of non-validated assessments. The lack of clinimetric data for these measures is a significant issue and, as the authors assert, children’s feet are developing structures and the absence of an arch is a typical stage of

Abstract

A recent systematic review of measures of foot development used the medial longitudinal arch profile as its primary indicator of development. A comparative analysis of existing studies was undertaken. This work confirmed changes with arch profile were age-dependent, although the age at which foot development ceased remains unknown. This work also highlighted the abundance of clinical measures used in existing research and outlined the challenges with drawing consensus from available data. There is a clear need to move this debate forward and, to do so, it is essential that scientific and clinical communities unite. It is time to abandon ill-defined measures of foot position, look beyond the medial longitudinal arch as a sole parameter of foot development and re-focus our perspective(s) on the paediatric foot in order to make advances with clinical practice and research.

development. The developing foot is not structurally ‘flat’, it is a highly compliant, plastic and developing structure which responds to multiple determinants, many of which we do not understand. Recent work [3] used Magnetic Resonance Imaging to evaluate sub-talar morphology and demonstrated a relationship between the absence of the anterior sub-talar joint facet and development of the arch complex. This work highlights the need to constantly challenge the foundations of our existing knowledge and ensure clinical concepts are driven by research outcomes.

This work [3] helps point to another problem. Given the complexity and high intra-and inter-population variability of biological characteristics, measurement of these (i.e. the medial longitudinal arch) in isolation is flawed and focusing on “flatfoot” is futile unless it can be integrated within a wider developmental framework. It is time to look beyond the medial longitudinal arch and instead advance our understanding of the three-dimensional complexities of growth, morphology, anthropometric and functional norms of the paediatric foot.

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3 Red Flags of a Black Hat SEO Agency

by Melody Gandy-Bohr

You know that feeling you get from a suspicious offer – you don't know exactly what it is, but something about it just doesn't add up. As a small business owner, you've developed a sixth sense when it comes to protecting your practice, and you should trust your gut.

A good quality SEO agency can help you reach your goals by using legitimate Search Engine Optimization strategies instead of *Black Hat tactics* that try to trick search engines into ranking your website higher. While the gains promised by these companies seem incredible, if they're being achieved through shady practices, it will be your website, and your practice, that feels the sting of Google's retribution. Here are three red flags to look out for when choosing your SEO agency.

Guaranteed Results

There are new SEO best practices and search engine updates every day. SEO isn't a fixed marketing strategy, and results cannot be guaranteed. If your SEO agency guarantees 1st page organic (natural and unpaid) rankings for your practice on Google, this should be a huge red flag. Either the agency knows that it can't deliver on those results and is just after your money, or they are employing Black Hat SEO strategies such as link farming to get those results.

In the latter scenario, your 1st page ranking will only be temporary once Google discovers that your site is violating their terms. *Your practice website will be penalized and possibly blacklisted* from the search engine – a serious consequence that is difficult to recover from. The only true way to 'guarantee' first page results is to pay Google for first page Google Adwords PPC ads. Organic SEO rankings take time and work to achieve, and there is never a guarantee of how Google's algorithm will rank your site.

They're Keeping Their SEO Strategy a Secret

Although it is constantly developing, you can learn SEO if you have the time. If an agency won't explain their SEO strategies to you, it's probably because they are dishonest. Any reputable agency will gladly go into lengthy detail on how they optimize your site for better rankings. Black Hat agencies will be less than willing to explain their strategy, particularly if it includes no-no tactics like keyword stuffing, invisible text and gateway pages. If the agency can't be forthcoming about their policies, how can you trust them with your practice's SEO?

No Reporting

Analyzing data and sharing it with clients is a common practice for all reputable SEO agencies. Only by looking at a detailed report of your website's progress will you be able to gauge how your current strategy is performing. Before signing up with an agency, make sure to ask what kind of analytics reporting they provide. If they flat out refuse to provide you with reports, do yourself a favor and, run, don't walk, away from them. It's your practice, and you have the right to view and access your website's analytics.

The Price is Too Good to Be True

Obviously you don't want to spend an arm and a leg on SEO when there are many affordable options available. But as the old saying goes, you get what you pay

for. If the price seems too good to be true, do some digging to make sure that you know exactly what you're getting. Quality SEO requires detailed planning and a significant amount of time analyzing metrics and adjusting data. Don't expect that kind of work for a dirt cheap price – in fact it is a telling sign if an agency values its services far below the competition. If they don't value their SEO service, neither should you.

As you do with all of your practice decisions, listen to your gut. It's usually right! There are numerous SEO agencies available, and that number grows every day. Don't settle for an agency that sets off Blackhat warning bells. Make sure that your agency is completely transparent with you on their SEO strategy, before your practice – and your pocketbook – suffer the consequences.

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*"But as the old saying goes,
you get what you pay for.
If the price seems too good
to be true..."*



HOW TO RESPOND GRACEFULLY TO YELP:

Negativity – Without Violating HIPAA

by Melody Gandy-Bohr

It doesn't matter if your practice is the perfect example of professionalism and patient care, at some point you will receive a negative review. While you certainly have the right to defend your practice when responding to reviews, it's important to exercise caution. Doctors, dentists and other physicians are bound by the **Health Insurance Portability and Accountability Act (HIPAA)** to protect their patient's private health information. Violating HIPAA can lead to serious consequences for your practice. Read this guide before hastily responding to a negative review.

Understand What You Cannot Disclose

More often than not, negative Yelp reviews are complaints about rude receptionists or long wait times. However, when a patient leaves a review regarding treatment, your response to that review cannot reference their treatment — even if the patient mentioned it first. While trying to combat a negative review, **one dentist in Washington disclosed details of the patient's dental records.** It is a HIPAA violation to disclose any aspect of the patient's diagnosis or treatment. Knowing the law can save your practice from being reported or fined.

When In Doubt, Take the Conversation Offline

Depending on the nature of the review, it might serve your practice to refrain from responding online. Whether you

need more information or the complaint is very inflammatory, err on the side of caution and take the conversation offline. If you need more information to address a concern presented in a review, never ask the reviewer for any of their private health details. Instead, direct the reviewer to contact your practice to further discuss the matter. Innocent inquiries, such as asking for the date the patient visited your practice on a public forum, could result in a HIPAA violation.



Reread, Reflect, Then Respond

The most important lesson when responding to negative reviews is to think before you leap. Never respond to a reviewer when you're feeling angry or defensive. Take a moment to reread the review, take it in and then carefully respond. At the end of the day, the patient is always right (even when they're not). Take the high road and apologize to the reviewer for the bad experience

and offer a solution if applicable. A professional response not only protects your patient's privacy, it also protects your practice's reputation.

As long as online review sites like Yelp exist, so will negative reviews. If you can learn not to take negativity on Yelp personally, you can keep your practice's HIPAA compliance intact.



CFPM Attends the Michener Institute's Meet and Greet

On Jan. 18, 2018, the CFPM attended the Chiropody Program's Annual Meet and Greet at the Michener Institute. CFPM Board Member, Stephanie Playford met with the future chiropodists, colleagues and vendors to discuss the CFPM and benefits of membership. Thank you to Andrew Lam and Marija Krstic for the invitation and organizing an outstanding event.

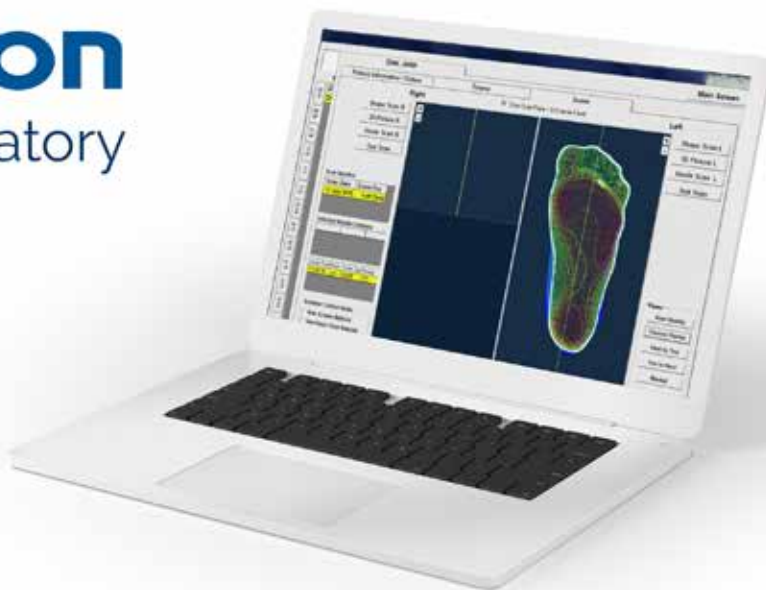


DR. BRIAN BRODIE AWARD FOR RESEARCH: 2017 Winners Announced

The CFPM is pleased to announce this year's recipients of the Dr. Brian Brodie Memorial Award for Research. Stephen Witiuk, Chris Puddephatt, Mary Hitchon and Daniel D'Ortenzio's research proposal entitled: *Triamcinolone Acetonide Vs Verapamil For Plantar Fibromas*, was selected by the faculty of the chiropody program at the Michener Institute as worthy of this prestigious award. The winners had an opportunity to provide a poster presentation of their award-winning proposal at the CFPM 2017 Annual Conference. Congratulations!



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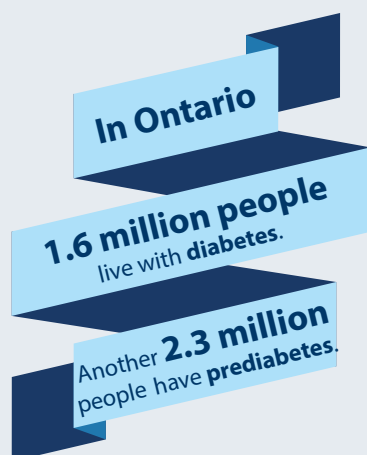
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You Can Make a Difference in Diabetic Foot Care



The Michener Institute of Education at UHN is now offering the online course **Foundations of Foot Management in Diabetes: A Holistic Approach**. Using a patient-centred, evidence-based learning model, this course gives health care professionals the skills to identify and prevent diabetic foot complications.

REGISTER TODAY - [MICHENER.CA/FOOTMANAGEMENT](https://michener.ca/footmanagement)



Foot conditions associated with diabetes cost the Canadian health care system



Regular foot examinations by health care providers are an essential part of diabetes management and help prevent lower limb amputations.



With a **lower limb amputation**, a person spends up to

86 days
in the hospital

When a diabetic foot ulcer is **treated properly**, a person spends up to

5 days
in the hospital

dramatically decreasing the burden on patients with diabetes.

The Michener Institute of Education at UHN
222 St. Patrick Street, Toronto, ON M5T 1V4
Phone: (416) 596-3101 | **Toll Free:** 1-800-387-9066

Course starts **February 20**.
UHN staff receive a **25% tuition discount**.



CONTINUING EDUCATION



Prevention and Management start May 11–12 in Winnipeg

Join us for this multidisciplinary event for: Foot care nurses, chiropodists/podiatrists, pedorthists, orthotists, prosthetists, nurse practitioners, enterostomal therapy nurses, physicians, nurses, physical therapists, occupational therapists, dietitians, endocrinologists, dermatologists, administrators . . . and more!

Topics include: Diabetic foot, pressure, arterial, venous, acute and malignant wounds; key aspects of local wound care; advanced therapies; wound care for Indigenous peoples . . . and more!

This spring's conference, **Sharing Solutions, Shaping the Future**, is designed to support health-care professionals who work with patients who have wounds or who are at risk for developing wounds.

Registration: Starting at \$399 + taxes

For more information or to register: www.WoundsCanada.ca/conference



Winnipeg 2018

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Conference**

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Wounds Canada is the leading wound-related knowledge mobilization organization in Canada.



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Classified Ads



Part-time Chiropody/Podiatry Position Available – Oakville, ON

- Chiropody Position Available – Oakville, ON
- Position Title: Registered Chiropodist / Podiatrist
- Oakville, Ontario
- Dundas Chiropactic – Oakville
- Part-time Chiropody Position Available

Well established, Chiropody practice from 2002 in north Oakville. We offer a great percentage and environment and an easy practice.

Complete scope of practice from wound care, surgery, orthotics to routine nail and diabetic foot care. We are looking to add a chiropodist / podiatrist to our team.

Current position starting at: 1 day per week with potential to expand.

Responsibilities:

All duties associated with being a Registered Chiropodist/Podiatrist in Ontario – providing top quality, friendly & professional patient care.

- Excellent communication, critical thinking, and interpersonal skills
- Ability to work independently and as a member of an interdisciplinary team
- Successfully maintaining patient retention and follow-up appointments
- Proven flexibility and adaptability in a fast-paced environment – excellent time management, organizational, and prioritization skills as relates to patient care
- Completing patient assessments, recommending and implementing treatment plans by utilizing the full range of chiropody practice
- Developing strong relationships with patients by understanding their needs and developing appropriate treatment plans

Requirements:

Current registration with the College of Chiropodists of Ontario without limitations.

Professional Certification: D.Ch or D.Pod.M.

Contact Information:

- Dr. Donald Geisler (Owner & Chiropactor)
360 Dundas St East, Unit B4
Oakville, ON L6H 6Z9
- Telephone: 905-257-5628
- Fax: 905-257-8075
- E-mail: don.geisler@sympatico.ca

Full Time, Contract Chiropody Position Available – Toronto, ON

- Registered Chiropodist
- 1.0 FTE Position, Contract (1 Year)
- Salary Range: \$60,966 – \$71,725
- Healthcare of Ontario Pension Plan (HOOPP)

The South Riverdale Community Health Centre is a non-profit, multi-service Centre that provides primary health care, social and community outreach services with an emphasis on health promotion for our priority communities, including residents of East Toronto.

SRCHC requires a Registered Chiropodist to function as part of a multidisciplinary team, working to full scope of practice and offering a range of foot care services for our diverse communities within a primary care setting.

Responsibilities:

- Screen new patients and refer for emergency care when needed
- Conduct thorough foot health assessments and develop/implement a client-centred management plan
- Assess, recognize and treat diseases and disorders of the foot area, including prescribing medications within scope, ordering (through Physicians) diagnostic tests and using palliative and physical treatment modalities
- Perform invasive procedures on the foot as necessary
- Diagnose, prescribe, fit and manufacture orthotics
- Provide foot care, foot wear and foot health education to patients as needed
- Offer health promotion and educational activities/workshops within the organization and community upon request
- Maintain complete and accurate medical records in accordance with the regulatory agency's standards of practice and the policies of the health centre
- Work collaboratively as part of the multidisciplinary team
- Provide home visit/outreach services within the CHC catchment areas as required
- Participate in ongoing quality improvement initiatives to ensure adherence to best practices and to optimize quality of care
- Participate in all aspects of program planning and development

- Provide consultation/support for the diabetes foot care team
- Maintain and develop professional competence through appropriate continuing education

Qualifications:

- Certification as a Registered Chiropodist in good standing with the College of Chiropodists of Ontario
- Graduate of an accredited college of podiatric/chiropodial medicine (D.Ch., D.Pod.M., D.P.M.)
- Full license, including administering substances by injection and prescribing drugs
- At least 2 years' experience desired, preferably in a community setting
- Orthotic manufacturing and wound care experience preferred
- Proficiency in the use of computer technology and various software applications
- Demonstrated ability to work effectively in a multidisciplinary team environment
- Demonstrated commitment to and knowledge of community-based health care and resources
- Willingness to work in a range of community settings including home visits
- Knowledge and sensitivity to the impact of social, economic, structural, environmental, and cultural issues on health
- Ability to speak and write Chinese an asset
- Current in evidence based best practices and clinical practice

A Police Clearance Letter completed within the past twelve (12) months will be required prior to commencing employment.

The deadline for applicants is: Tuesday, February 20, 2018 at 12:00 p.m.

Please send your cover letter and resume in confidence to:

The Hiring Committee – Registered Chiropodist
South Riverdale Community Health Centre
955 Queen Street East
Toronto, ON, M4M 3P3

No emails, faxes, phone calls, or requests to meet please.

SRCHC welcomes applications from people with disabilities. Accommodations are available on

Continued page 25

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Classified Ads



Continued from page 23

request for candidates taking part in all aspects of the selection process.

SRCHC is an equal opportunity employer. We would like to thank all those that apply but only those selected for an interview will be contacted.

SRCHC encourages a scent-free environment. Employees, students, volunteers, and visitors are asked to refrain from wearing fragrances and other scented personal care products (i.e. perfumes, deodorants, lotions, hairspray, etc.) while at the Centre.

Practice for Sale – Mississauga, ON

ESTABLISHED FOOT CLINIC FOR SALE – Mississauga, ground floor location, 25% growth yearly, 3000 patients, full service clinic, excellent reputation – email us for discussion document at podmed@hotmail.ca

Locum Position Available – Mississauga, ON

Locum chiropodist needed in Mississauga from June 8 – June 29, Monday to Saturday, hours and compensation open to discussion, other locums times available also – new graduates welcome leading to permanent 1 day per week position.

Contact us at podmed@hotmail.ca

Third podiatrist required for busy Brandon, Manitoba practice

We require a self motivated podiatrist who is open to learning new skills and is willing to learn. We handle a wide range of musculoskeletal-skeletal conditions, high risk Rheumatoid/diabetic and PVD, wound care and paediatric cases. We provide diabetic management and assessment including a new summit Doppler vista ABI and toe examination equipment.

This is a excellent and lucrative opportunity for the right person looking to gain invaluable experience, success and a business opportunity with view to partnership. Salary and profit sharing initially. Brandon is a clean safe city and real estate is still affordable.

Candidate must be able to obtain license with the college of Podiatrists of Manitoba. Must have drivers license and CPR/first aid certified.

Send resumé to

Dr Michael Ball Drball@wcgwave.ca

Chiropody Position Available – Kleinburg, ON

- Position Title: Chiropodist
- Company Name: FCO –
Foot Clinic & Orthotics
- Location: Kleinburg, ON

Established Chiropody practice since 2014, with 2 locations, our busy Foot Clinic is looking for a passionate and motivated Chiropodist / Podiatrist to join our team (new graduates welcome).

Overview:

Our approach to the community encompasses the broad social detriments of health and aims to build community capacity. As a member of the interdisciplinary team, the chiropodist provides client-care in accordance with the established standards of practice expected by the College of Chiropodists of Ontario. They must hold a current practice license and in good standing with the College of Chiropodist of Ontario. The Chiropodist / Podiatrist is expected to contribute and create a safe and healthy environment for patients, staff and others.

Responsibilities/Duties:

- Perform treatments, health education/ counselling for diseases, disorders and dysfunctions of the foot and other clinical foot care activities according to the College of Chiropodists of Ontario.
- Have full knowledge of the scope of the Podiatric Medicine: i.e.: being able to Rx drugs within the scope of practice, perform injectable, soft tissue surgeries within the scope.
- Conduct biomechanical and structural assessments, treat ulcers, acute and chronic infections.
- Perform nail surgery, including administration of local anesthetic.
- Refer patients to the appropriate internal or external resources.
- Provide off site foot care i.e. home visits as needed or requested

- Demonstrate strong written and communication skills; listens for clarity and meaning, and communicates in an honest manner to make sure there is mutual understanding between patient and practitioner.

Requirements:

- Current registration with the College of Chiropodist of Ontario
- Professional Certification; D.Ch. or D.Pod.M

Please forward your resume to:

info@footclinic.co

Chiropody Position Available – Burlington, ON

Appleby Foot Care & Orthotics is looking to add a new chiropodist to our clinic. We are looking for a qualified, clinically competent practitioner with a commitment to excellence in client service, well-honed communication and people skills as well as a positive, friendly demeanor to join our team. New grads are welcome and encouraged to apply. This is a great opportunity to build a practice in a great location and a supportive environment.

- Position Status: Maternity leave leading to permanent position.

As the chiropodist, you will provide a broad range of chiropody treatments to patients across the continuum of care from pediatric patients to adults with a variety of health related conditions.

Qualifications:

- License to Practice and current registration with the College of Chiropodists of Ontario
- No restrictions or history of previous disciplinary convictions
- Professional Certification: D.Ch or D.Pod.M.
- Working knowledge of computerized systems and electronic charting
- Good working knowledge of cleaning and sterilization processes
- Certification in Local Anesthesia/Injections, Soft Tissue Surgery and Pharmacology/Prescriptions
- Current Basic CPR Accreditation

Interested applicants are invited to send their resume to info@applebyfootcare.com or by fax to 905-681-6686

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Classified Ads

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Full Time Position in Nova Scotia!

- Position: Podiatrist/Chiropractor Associate
- Location: Sydney, Nova Scotia
- Company Name: Keystone Podiatry

Come to Cape Breton for the summer, stay for the lifestyle! Do you enjoy hiking, biking, kayaking, beaches, and everything outdoors? Live on one of the World's best islands according to Travel and Leisure Magazine! This opportunity is ideal for those seeking the essential work-life balance.

Keystone Podiatry is an established practice on beautiful Cape Breton Island that offers comprehensive podiatric care. We are looking for a team member who can offer quality, full scope care while actively and energetically engaging with patients. There is great potential for growth in areas of professional interest.

Current work schedule is a flexible 3-4 days/ week, with potential for more. Extremely competitive compensation offered. Successful applicant would complete a 3 month trial period, starting on July 4, 2018, with intent to continue as a permanent, integral part of the practice.

- Accommodation options are available for the 3 month trial period.
- Applicants must have completed a professional designation (ie. D.Ch. or D.Pod.M)
- Contact keystonepod@gmail.com

Chiropractic Position Available: London, ON

Kyle Foot & Orthotics Clinic is looking for a qualified, professional, and friendly chiropractor to join our London team.

Current position is a flexible 1-2 days/ week, with the potential for more. New graduates are welcome to apply.

If you are interested, please forward your resume to info@kylefoot-orthotics.com or by fax to 519-663-9832.

Continued from page 13

Our understanding of the three-dimensional function of the paediatric foot is emerging [5, 6] and technological advances must be embraced. There is no case for unreliable, uni-dimensional, static measurements.

Finally, it is important that we have rigorous data for health surveillance. A greater understanding of the clinical impact of variation in foot development, including how these may or may not relate to other markers of developmental issues (e.g. physical and cognitive), is required. Age related trajectories through developmental stages will ensure foot development can be measured throughout childhood and, as with head girth, height etc., measured against population norms. Even here however, it is not clear that feet developing towards the extremes of typical are anything other than examples of the normal statistical variation which is expected within a normally distributed population.

We don't debate the importance of understanding foot development and this work [1] makes a useful addition to literature. But, we should ensure that we use our knowledge in a manner that underpins an ethical and reasoned approach to clinical practice. Our stance should be less about debating how flat the developing foot is and instead seek to understand more about the functional development of the foot for each child, and benchmark development against population norms. It is also fundamental that we re-frame the paradigms underpinning paediatric foot-care to help dispel unproven myths about children's feet and strive to improve evidence based public health messages and thereby offer a more evidence informed approach to practice.

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Upcoming Events

2018

April 6 – 8, 2018

Superbones Superwounds East
Teaneck, NJ
www.podiatry.com

April 19 – 22, 2018

Midwest Podiatry Conference
Chicago, IL
www.midwestpodiatryconference.org

April 25 – 29, 2018

Symposium of
Advance Wound Care
Charlotte, NC
www.sawc.net

April 27 – 28, 2018

All Ireland Podiatry Conference
Armagh, UK
www.scpod.org/conference

May 11 – 12, 2018

Wounds Canada
Spring Conference
Winnipeg, MB
www.woundscanada.ca

May 17 – 20, 2018

Sonoma Wine Country Seminar
Sonoma, CA
www.internationalfootankle.org

May 17 – 20, 2018

Reconstructive Surgery of the
Foot & Ankle
Atlanta, GA
www.podiatryinstitute.org

June 20 – 23, 2018

AAPPM Summer Conference
Columbus, OH
www.aappm.org

June 21 – 24, 2018

The Western Foot &
Ankle Conference
Anaheim, CA
www.thewestern.org

June 24 – 28, 2018

FPMA Symposium
Orlando, FL
www.emedevents.com

June 28 – 30, 2018

40th Seattle Summer Seminar
Seattle, WA
www.internationalfootankle.org

July 12 – 15, 2018

The National – APMA Conference
Washington, DC
www.apma.org

July 28 – Aug. 4, 2018

International Foot &
Ankle Foundation
Reykjavik, Iceland
www.internationalfootankle.org

July 29 – Aug. 4, 2018

International Association for
Identification
San Antonio, TX
www.theiai.org

Sept. 5 – 9, 2018

Montana Meeting
Missoula, MT
www.goldfarbfoundation.org

Sept. 20 – 23, 2018

Reconstructive Surgery of the
Foot & Ankle
San Diego, CA
www.podiatryinstitute.org

Sept. 20 – 22, 2018

24th Las Vegas Seminar
Las Vegas, NV
www.internationalfootankle.org

Oct. 13 – 20, 2018

27th Annual Hawaii/
Big Island Seminar
Hawaii
www.internationalfootankle.org

Nov. 7 – 10, 2018

Desert Foot Conference
Phoenix, AZ
www.desertfoot.org

Nov. 8 – 10, 2018

CFPM 19th Annual Conference
Niagara Fall, ON
www.podiatryinfocanada.ca

Nov. 8 – 10, 2018

AAPPM Fall Conference
Anaheim, CA
www.aappm.org

Nov. 22 – 23, 2018

Society of Chiropractors and
Podiatrists
Bournemouth, UK
www.scpod.org/conference

2019

May 16 – 18, 2019

AAPPM Spring Conference
Baltimore, MD
www.aappm.org

July 11 – 14, 2019

The National
Salt Lake City, UT
www.apma.org

Aug. 11 – 17, 2019

International Association for
Identification
Reno, NV
www.theiai.org

Oct. 31, – Nov. 2, 2019

World Congress of Podiatry
Cancun, Mexico
www.podiatry2019.org

2020

July 23 – 26, 2020

The National
Boston, MA
www.apma.org

Aug. 9 – 15, 2020

International Association for
Identification
Orlando, FL
www.theiai.org

2021

July 22 – 25, 2021

The National
Orlando, FL
www.apma.org

Aug. 1 – 7, 2021

International Association for
Identification
Nashville, TN
www.theiai.org

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