



# Health Professions Review Board

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## Practice Directive 2

### Preparing and Formatting the Record

#### Inquiry Committee Disposition and Registration Decision Reviews

#### **Purpose**

The “Record” is critical because it is the evidentiary foundation for a review. It enables the review board to see how a matter was handled from when the complaint or application was received, to when the inquiry or registration committee made its final decision. A complete, well-organized and well-formatted Record helps the review board to perform its review mandate and can save a college from having to revisit record preparation later in the review process.

This practice directive supplements the requirements in Rules 13, 14, 15 and 16 of the Health Professions Review Board *Rules of Practice and Procedure* (the “Rules”) and sets out how to prepare and format the Record so that it is most useful to the review board. Don’t hesitate to ask the case manager about anything in this directive or if you have questions about preparing the Record. For information on making a s. 42 application to request that the review board receive information in confidence, see Rule 18 and Practice Directive 3 (for inquiry committee disposition reviews) and Rule 19 and Practice Directive 4 (for registration decision reviews).

#### **Preparing the Record**

1. The Record should be legible, organized, and sequentially page numbered<sup>1</sup>
  - a. legible: this simply means that the reader can make out the information in the Record. Some colleges, for example, adjust the darkness of scanned records if they are handwritten to make them easier to read;
  - b. organized: the Record should be organized to reflect the flow of the investigation. It is helpful if you organize the Record chronologically, starting with the complaint first;

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1 Rule 15(2)(a)

- c. page numbered: the review board refers to specific pages of the Record in its decisions, so page numbers are essential. Put them in the same place on every page in the Record (for example, on the top right) and away from any page numbers that may appear on the documents for other purposes.
2. The Record is accompanied by an index<sup>2</sup> that reflects the flow of the investigation. The index allows the review board to locate foundation documents and investigative milestones in the Record. The index should identify (some colleges do this using a symbol in the index description):
  - a. information redacted under Rule 15(3) (personal identifiers of a witness expert or party); and
  - b. parts of the record that were before the committee when it made its decision (Rule 15(2)(b)(i)).

For electronic records, indexed documents and milestones should also be bookmarked.

3. Bookmarks are most useful when they correspond directly to the index and are accompanied by a brief description including the date of the material. Bookmarked items may include:
  - a. the complaint or application for registration, and any material submitted with it;
  - b. information the complainant or applicant provided (as opposed to information gathered by the college);
  - c. any documentation streaming a complaint to the registrar for investigation under s. 32(3) of the Act;
  - d. any record of the appointment of an inspector to investigate a complaint on behalf of the inquiry committee; and the authority for, duration of and scope of the appointment;
  - e. request for registrant's response to the complaint, and the response itself;
  - f. complainant's reply to the registrant's response;
  - g. any further response of the registrant;

- h. correspondence, including the name of the correspondent (it is helpful to associate fax or email covers and material attached to the correspondence with the same bookmark so the review board can tell it goes together);
  - i. clinical records obtained from each source in the course of the investigation, together with the name of the source;
  - j. witness statements;
  - k. investigator's notes and any research conducted;
  - l. guidelines, standards, or procedures relating to or referenced in the complaint;
  - m. investigation reports;
  - n. drafts and final version of a disposition prepared on behalf of the inquiry committee;
  - o. minutes of the committee meeting which reference, discuss or decide about the matter;
  - p. minutes of the meeting that approve the minutes of the meeting at which the decision was made.
4. Certified as complete<sup>3</sup> - It is preferable to have the letter of certification signed by the registrar, legal counsel or someone else who has authority to direct a response to questions the review board may have about the Record.

### **Formatting the Record**

5. Electronic records should be prepared:
- a. in PDF format;
  - b. scanned at a minimum of 400 dpi;
  - c. unlocked without password or other locking mechanism;
  - d. prepared with optical character (OCR or text) recognition so they are searchable; handwritten notes may not be responsive to OCR, but it is not necessary to transcribe them unless specifically requested;

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3 See s. 23 of the Health Professions Act

- e. with website links used in the investigation, active if possible (or include the website address instead);
  - f. any electronic material other than PDFs, such as audio files, must be in a format compatible with standard Microsoft Office software. The review board will not accept CDs, DVDs, USB sticks or other physical media; and
  - g. audio recordings of interviews need not be transcribed unless specifically requested by the review board.
6. Paper records must not be Cerlox bound or tabbed.



David Hobbs, Chair  
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