

Robert M. Wingfield, DC: A conscientious chiropractor

Douglas M. Brown, DC*

“I slept and dreamed that life was beauty. I woke – and found that life was duty.” This quote from the poet Ellen Sturgis Hooper, could be attributed to Robert Wingfield, who has persevered in his quest for personal and professional excellence. This historical biography begins with his genealogy, going back to the 11th century in Merry England and ends in 2015, with his relatively quiet existence still centred in Ontario. The essay scrutinizes Dr. Wingfield’s accomplishments for the Ontario Chiropractic Association (OCA), Canadian Chiropractic Association (CCA) and Ontario Board of Directors of Chiropractic (BDC). Moreover, it attempts to give the reader a glimpse into his personal endeavours, to help us fathom how he tackles (as William Shakespeare would say) “the thousand natural shocks that flesh is heir to.”

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Ancestry

The Wingfield clan predates to the 11th century invasion and conquest of England under an army of Norman, Breton and French soldiers led by Duke William II of Normandy, who would become William the Conqueror,

« Je dormais et je rêvais que la vie était joie. En m’éveillant, je trouvais que la vie était devoir ». Cette citation du poète Ellen Sturgis Hooper pourrait être attribuée à Robert Wingfield, qui a persévéré dans sa quête de l’excellence personnelle et professionnelle. Cette biographie historique commence par sa généalogie, remontant au 11^e siècle dans la joyeuse Angleterre, et se termine en 2015, avec son existence relativement calme toujours centrée en Ontario. L’essai examine les réalisations du Dr Wingfield pour l’Ontario Chiropractic Association (OCA), l’Association chiropratique canadienne (ACC) et le Conseil d’administration de l’ordre des chiropraticiens de l’Ontario (BDC). En outre, il tente de donner au lecteur un aperçu de ses réalisations personnelles pour nous aider à comprendre comment il aborde (comme William Shakespeare disait) « les mille chocs naturels dont la chair est l’héritière ».

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MOTS CLÉS : chiropratique, histoire, Ontario

King of England, in 1066. According to Bob, “the original name was de Wynfeld, c. 1087, with large holdings in Suffolk, and it gradually became anglicized over the next 200 years or so.” [Email, Wingfield to the author, Oct. 17, 2014] Bob’s father, Frederick C. Wingfield, was 16, when

* Corresponding author: Douglas M. Brown
browndouglas@rogers.com
281 Ridgewood Road. Toronto, ON M1C 2X3
T: 416-819-5356
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he emigrated with his dad, from Loughton, Essex, England, to Dunnville, Ontario, in 1910, and was hired by the Monarch Knitting Mills, before enlisting in the Canadian Overseas Expeditionary Force in 1914.

During the course of World War I (WWI), Fred served gallantly in every major Canadian battle and was awarded Meritorious Service and Distinguished Conduct Medals. Acting Company Sergeant Major Wingfield was discharged in 1919 and in 1968 was one of only two veterans invited to represent the Canadian Corps of Guides at the 50th Anniversary of the WWI Armistice at the Ottawa Parliament Buildings.¹

The Formative Years

Returning to Dunnville after the War, Fred was introduced to Ferne Atkinson, who lived on a nearby farm and was part of a large family. In due course they married, moving to Hamilton where Robert was born, May 3, 1933. Bob remembers they always lived in the same home, in a stable middle class environment, close to a public school and churches. He had part-time jobs delivering groceries for the corner store on weekends and Globe Newspapers in the early morning. When attending Central Collegiate, Bob got average grades, played football and basketball and joined the school rifle team. In 1950, his team competed at Bisley, England and won seven international long-range target matches against British Empire teams.²

In 1924 Bob's father was working for the National Steel Company (Stelco) in Hamilton, where he rose to the stressful level of General Foreman and manager of over 200 electricians. When Bob was a teenager, his father began suffering from high blood pressure, for which the only medical treatment at the time was bed rest and a salt free diet. Bob and his parents had occasionally visited drugless practitioners in Hamilton. Two of them were Henry Avonde, DC, and Sydney Albin, ND, who were joint owners of the Avenue Clinic, on Main Street, East. Another was Richard S. Wynn, DC, ND, who graduated from the National College of Chiropractic c. 1945, taught technique at the Canadian Memorial Chiropractic College (CMCC) 1947-49, and sat on CMCC's Board of Management until 1964, while running an office in Toronto at the south-west corner of St. Clair and Avenue Road.³ In the late 1940s, Dr. Wynn started practising in the Avenue Clinic and in the early 1950s was attending patients in Dr. Avonde's home on Lakeshore Road in Burlington.



Figure 1.
CMCC Painting 1945, 252 Bloor St W, Toronto

Bob's father was now over 50, off work because his blood pressure was out of control and threatened with early retirement. Bob began driving him to Burlington to see what Dr. Wynn had to offer. "Against what we thought were impossible odds, my father's blood pressure started to go down and after many weeks of attending Dr. Wynn he was cleared to return to Stelco," manning his post four years beyond the normal retirement age and living to savour his 82nd birthday.

Choosing a Career

In high school, Bob considered becoming a geologist or metallurgist. He had a summer job at Stelco for four years, staying full time for an additional year in the metallurgical lab after obtaining his senior matriculation. By then he had abandoned this idea and was contemplating chiropractic. In 1954, Bob visited CMCC at 252 Bloor Street West. Although he thought the Meadonia Hotel where the College was housed "a little odd," he enrolled and rented a room on Prince Arthur Avenue for seven dollars a week.

Tuition at CMCC was affordable at \$250 a year if paid in advance until 1958, when it jumped to \$400. Nevertheless, middle class families in that era were considered better off than most with a gross income of \$100 a week and Bob was on a tight budget. He had a part-time bartender's job at the Royal York Hotel, worked in the mailroom of the T. Eaton Company during Christmas seasons and spent his summers in the lab at Stelco. Russ Wagg operated the College snack bar. If Bob ran short of money

on Friday, he would borrow two dollars from Russ for bus fare to Hamilton and repay him on Monday morning.

At CMCC Bob was studious, obtained good grades, engaged in extracurricular sports and performed in “Practichiro.” Originally produced and directed by Rich Luck (CMCC 1954), these annual variety show extravaganzas were resounding successes.⁴ And Bob was already flexing his political muscles. As Vice-President of the Student Administrative Council (SAC), his job was arranging school dances and as President of the Senior Class he organized its graduation banquet.

Wingfield has fond memories of Major H.B. Stevens, B.Sc., who taught histology and embryology, Howard Gauthier (CMCC 1949), the clinic director, Vera Littlejohn (Palmer School of Chiropractic 1932), who lectured in Specific Upper Cervical technique and A. Earl Homewood (Western States Chiropractic College 1941). Dr. Homewood arrived at CMCC in 1945. By 1952 he was “handling a full teaching schedule during the day, embalming cadavers at night and carrying the burdens of Business Manager and Dean.”⁵ Bob recalls Homewood lecturing in the anatomy lab at 8:00 in the morning, using his hypnotically humming, Balopticon projector to display pages from Gray’s Anatomy onto a flickering screen. Students called it a “sleep machine.”

As well Dr. Homewood taught Bob’s class Carver technique. Developed by Willard Carver, LLB, DC, and refined by Homer G. Beatty, DC, Dr. Homewood emphasized attention to detail and drilled his pupils to cultivate a controlled, dynamic adjustive thrust.⁶ Bob says Homewood taught them “what to look for in patients who had respiratory symptoms.” In childhood, Bob had asthma. While severe at times, it was relieved through vigorous sports competitions but returned once the games ended. He described his condition to Dr. Homewood, who used him for class demonstrations and adjusted Bob in the clinic. By the end of his third year, Wingfield’s asthma had vanished.

On May 14, the 40-member CMCC Class of 1958 held its graduation exercises at the Trinity United Church in Toronto.⁷ That evening, the class, guests and dignitaries gathered in the glistening Crystal Ballroom of the King Edward Hotel to rejoice in the College’s 13th Annual Graduation Dinner and Dance. Dr. Kenneth Wood, SAC President, was Master of Ceremonies and Dr. Robert Wingfield replied to the toast to the Graduation Committee.⁸



Figure 2.
The Wingfields’ second home/office
2095 Caroline St, Burlington, ON

Personal Advancement

By graduation day, Dr. Wingfield was betrothed to a talented and energetic young woman, Anne Harvey Williams. They spent much of the summer of 1958 seeking a small town where they could settle and located a promising spot in Burlington, ON, at 604 (now 600) Brant Street. Bob and Anne rented the ground floor of what had been a residential building and did the refurbishing themselves. Their one room office faced the street. It contained two curtained change booths, one side-posture table, one Zenith Hylo table, a mobile x-ray machine, a desk and some chairs. Behind the office was a cramped apartment.

Just prior to opening, Wingfield had spent two weeks covering for Eleanor H. Ellsworth (Toronto Chiropractic College 1922), at her busy clinic in Hamilton. Dr. Ellsworth was an aunt of Robert E. Kinsman (CMCC 1953). He and classmate Wm. Lloyd Stackhouse had also practiced with Dr. Ellsworth for a year after they graduated from CMCC.⁹ Dr. Ellsworth was unorthodox, using radionics in the diagnosis and treatment of many patients, still Bob found her coaching worthwhile. Not only did he see how a profitable, established practice functioned, he



Figure 3.
Dr. Wingfield's Clinic
464 Locust St, Burlington, ON

observed the wide cross section of health problems handled by chiropractors of the day. "Like other chiropractors of that era, Dr. Ellsworth had strong convictions about the nature of illness and the therapeutic effect of spinal adjustments in the restoration of health." [Email, Wingfield to the author, Sept 16, 2012]

Anne and Bob opened their Brant Street office in August 1958 and got married in October. It was here that David, the first of their three children, was born. In the beginning, Anne pitched in financially by maintaining her jobs in the accounts receivable and promotions departments at radio station CKOC in Hamilton.

In 1960 the Wingfields, having outgrown their initial location, purchased a large home at 2095 Caroline Street. The office was on the first floor; the family occupied the second. They considered this to be permanent but by 1980, "the facility that had served us so well had become inadequate." Discovering a neglected, historic building at 464 Locust Street they hired "an architect to revamp and oversee its complete restoration into a modern and spacious chiropractic clinic."¹⁰ Anne owned the building, leasing the clinic space to Bob and renting two new apartments on the second floor.

David A. Chapman-Smith, LLB, interviewed Dr. Wingfield for the August 1988 edition of the OCA News. David pronounced Bob's offices to be "frankly the most



Figure 4.
Hamilton District Chiropractic Council Members
Drs R. Wingfield, R. Thurlow, J. MacRae, R. Oswald & R. Elford

impressive chiropractic premises I have ever been in," but wondered why the adjusting rooms had no modalities, considering his mentor Dr. Avonde used electrotherapy extensively. Wingfield comments that –

*"There is no one correct way to practise chiropractic... However, I have come to hold firm personal convictions concerning hand adjusting... Following x-ray, the centre of my examination is use of the hands and motion. In my experience a patient invariably knows when I have found a problem... The logical response to this obvious mechanical problem is again through the hands and motion; by adjustment of the spine. When this is done properly the patient knows there has been correction... For me, modalities and other treatments tend to obstruct this essential chiropractic approach. I obviously understand the need for modalities and anti-inflammatory medication where appropriate, and often make referrals for these treatments, concurrent with chiropractic care."*¹¹

Professional Advancement 1958-1999

Hamilton District Chiropractic Council (HDCC)
Shortly after graduation, Dr. Wingfield joined the HDCC and was President in 1962-63. The council met monthly



Figure 5.
OCA Posture Booth at the CNE, 1966-67

in Hamilton's Fisher Hotel at 9:00 pm and had busy agendas. "Ron Elford (CMCC 1954) and I spawned posture contests in local high schools and the council actually arranged for some limited chiropractic coverage with Wen-co, a local credit union insurance company".¹² This was several years before the inclusion of chiropractic in the Ontario Hospital Services Insurance Plan (OHSIP).

Ontario Chiropractic Association 1964-1972

Dr. Wingfield was elected to the OCA Board in 1964 and was quickly designated Chair of the Public Relations (PR), Industrial Relations, and Newsletter Committees. As PR Chair, Bob enlisted some of his Hamilton Council colleagues to build a large, conspicuous, OCA Posture Check Booth at the Canadian National Exhibition (CNE). Using a Posturometer crafted by Lyman Johnston (CMCC 1950)¹³, droves of people were checked for spinal irregularities, handed the results and directed to their local chiropractor. In 1966-67, chiropractors from Hamilton, Niagara and Mississauga occupied the booth for the full run of the CNE. "They felt great about what they were doing and there was no trouble filling the staffing requirements." [Email, Wingfield to the author, Jan 14, 2015]

Bob's Industrial Relations Committee fashioned an OCA Pre-Employment Exam "that went nowhere" but he wrote a speech about "The Incidence of Back Pain and Disability in Industry" and was asked to talk to a couple

of service clubs. Bob also lectured at Industrial Accident Prevention Association (IAPA) regional meetings where he delineated the social and economic costs of industrial injury and preventative measures relative to precise situations. Wingfield hired a commercial artist to fabricate posters to illustrate his material and was guest speaker at the IAPA annual convention in Toronto, April 22, 1969. He told the delegates spinal injuries were responsible for an annual loss of \$100 million in Ontario and stressed that if employers had more knowledge about how the back functions, "a substantial advance could be made in protecting staff from costly injuries at work and home."¹⁴ Wingfield's remarks were favourably received and widely disseminated through articles in Ontario newspapers.

In 1969, Bob was Vice-President of the OCA and attending Ontario Hospital Insurance Plan (OHSIP) meetings with the Honourable Thomas Wells, who had just been approved as Ontario's Minister of Health. Our profession was gratified since he "did not need to be 'sold' on the merits of chiropractic care or the fact that chiropractors should be included in OHSIP... he was more concerned about the costs..."¹⁵ Wingfield "was struck by Tom Wells' concept there should be no discrimination in the application of coverage under universal health care." Wells felt patients deserved freedom of choice and wanted all primary contact health practitioners to become portals of entry, unlike the British system where medical doctors were the only way in. [Wingfield interview by the author, July 10, 2008]. Dr. Lloyd MacDougall (CMCC 1950) was at these sessions as the OCA's Legislative Chair. "He got along famously with Tom Wells" and strongly influenced the Conservative Government's decision to include chiropractic in what became known as OHIP (Ontario Hospital Insurance Plan), on July 1, 1970. Initial coverage was \$5 a visit up to \$100 per fiscal year, plus \$25 for x-rays.

In 1966, the Ontario Government formed the Committee on the Healing Arts (CHA) to study all Ontario health providers and report on how legislation affecting the healing arts could be protected and refurbished. By the fall of 1970 Bob was President of the OCA and began challenging a CHA report¹⁶ "which... if carried out... would have reduced chiropractors to the level of technicians, under direct supervision of the medical profession"¹⁷. In 1971, Oswald Hall, PhD, one of Canada's senior, pioneer sociologists, emerged as Chair of the "Task Force on the Education and Practice of Chiropractors," for the Ontario



Figure 6.
OCA Board 1970
Seated L to R – P. Holtom,
S. Stolarski, R. Wingfield,
K. Wood & L. Rosenberg
Standing L to R – P. Hemingway,
L. Stackhouse, L. Taylor,
L. MacDougall, J. Price,
R. Thurlow, D. Gleeson &
R. Oswald

Council of Health (OCH). Other members were: George Connell, PhD, Professor, Faculty of Medicine, University of Toronto (U of T); Cameron Gray, MD, Executive Medical Director, Ontario Thoracic Society; Donald Sutherland, DC, Executive Secretary, CMCC; and Robert Wingfield, Immediate Past President, OCA.

The task force received extensive documentation and held four meetings between February 1 and 24, 1972, regarding scope of practice and regulation of chiropractors. Its first report to the OCH assumed that chiropractic is a recognized health service in Ontario and directly accessible to the public. Its Scope of Practice Recommendation 1 indicated that “Chiropractors may undertake the care of the spine and immediately related anatomical structures with respect to both the maintenance of health and differential diagnosis and treatment of mechanical disorders of spinal origin.” Recommendation 2 stated “That chiropractors be regulated through licensing by a regulatory body under the Health Disciplines Board.”¹⁷

In its appearance before the OCH, March 14, 1972, the task force admitted that its scope of practice statement was controversial because it was meant to be acceptable to both physicians and chiropractors. Dr. Hall hoped this would assist chiropractors to regulate their members, raise the level of their education and establish a convincing research base for the profession.

Between April 11, 1972 and January 11, 1973, the task force presided over 13 meetings on the second phase of its investigation; “defining educational objectives and relating these to an appropriate educational program.” In its closing report to the OCH, the committee lists eight recommendations. Although recommendation 1, states CMCC should be maintained as a distinctive institution, recommendation 2, concedes that ultimately, “It is desirable that the College be joined to a university.”

Dr. Wingfield perceived that, “Dr. Hall was impressive, impartial, very fair and broad-minded... He stated we would have to stop thinking in terms of independent disciplines and accept the concept of interdependent professions... Dr. Hall wanted to develop the profession, not restrict it... In the end, the task force helped us define ourselves as a profession.” [Wingfield interview by the author, June 18, 2003]. Dr. Hall was not as optimistic. “The Ontario Council of Health asked us to explore the question as to whether the study of chiropractic belonged in a university setting. Both the committee and the Council announced a clear ‘Yes.’ However, the departments of health and of education were cool to the idea and it remained in limbo.” [Letter, Hall to the author, Oct 5, 2001]

Canadian Chiropractic Association 1972-1981

In 1972, Dr. Wingfield had been elected to the CCA Board

and declared Chair of its Public Relations (PR) Committee. Canada's needs were determined centrally and the production distributed among the provinces. For example: Alberta published the CCA News and Ontario, under the prolific Ruth Hammond, generated pamphlets, films and news releases for national distribution while a wide network of CBC and CTV stations across the country carried her TV promos and she acted as PR consultant to the OCA.¹⁸ By 1977, Bob was sitting on several legislative advisory panels and helping the OCA upgrade its x-ray program.

In 1978, Wingfield was elected President of the CCA at its Convention in Quebec City. On May 21, he addressed CMCC's class of 1978, during its convocation exercises at the University of Toronto Convocation Hall. Bob requested the graduates to "Always work for the betterment of chiropractic and for its growth..." reminding them the College is "a privately owned, higher education institution which exists and even thrives with no government support. Were it not for the financial aid of virtually every Canadian chiropractor, through their associations, none of us would be here today."¹⁹

Dr. Wingfield told the audience, "Chiropractic graduates of today are in an enviable position. My explanation comes from a classmate of mine, Gordon E. Potter, MB, BS, DC, who now practices medicine and chiropractic in Saskatchewan." Bob took the following four points from a paper Dr. Potter published in the JCCA, in which he compares chiropractic as a profession to a hypothetical ideal.

- A. *A good ratio of help vs. harm. In a study of 744 cases seen in my own office in 1975, I worsened 0.6%. Iatrogenicity is at a minimum.*
- B. *Significant help to significant numbers. Again, in my own study, averaging all categories of back pain, with all degrees of severity and chronicity, 70% achieved complete or almost complete relief. Few specialties can approach this.*
- C. *Efficient use of time. The only specialty I have observed with volume potential approaching that of chiropractic, is dermatology.*
- D. *Credibility and respect; a healthy referral attitude. This is far from perfect but improving.*

Dr. Potter's last piece of advice to the novice chiropractor is: "Do not underestimate the value of the spinal adjust-

ment. It is one of the cornerstones of therapy. It always has been and always will be... learn, above all to adjust."²⁰

1978 was the year Wingfield commenced a two year term on an independent agency, formed and sponsored by the CCA, called The Council on Chiropractic Education (Canada) Inc. CMCC had been an affiliate member of the Council on Chiropractic Education in the USA for many years, but it was not until June 1978 that its Board of Governors committed the College to accreditation.²¹

"Some Board weaknesses had been identified in the 1981 Status Study but no plan had been developed for correcting them and no sense of urgency existed."²² The Resolution of the Commission on Accreditation of March 1982 reads in part: "The CMCC Board of Governors does not totally formulate a broad policy consistent with the Charter, Bylaws, nature and purpose of the College."²³ That year, Bob participated in an external review of the Board that resulted in a detailed report of its strengths, weaknesses and a set of recommendations for improvement. Through a series of planning retreats and instructional seminars the Board drafted its goals and objectives, used them to write its mission statement and devised a strategy for renovating the Board.

Four years later, major changes in the structure and functions of the Board had been realized and November 22, 1986, CMCC was granted Accredited Status by the Commission on Accreditation of CCE (Canada).²⁴

In 1978 the New Zealand Commission on Chiropractic was inaugurated and as CCA President, Dr. Wingfield formed the "Canadian Resource Committee to the New Zealand Chiropractic Association (NZCA)," for the Commission of Inquiry. October 23, 1979, the New Zealand Commission released its report. Termed "the most comprehensive and detailed independent examination of chiropractic ever undertaken in any country," the 377 page document "validates the efficacy of chiropractic as it does the skill of the chiropractor; furthermore, it negates the attempts of other professions making value judgements on chiropractic care and methods." Dr. Wingfield and his committee, Drs. Tom Maxwell (CMCC 1955), Robert Thurlow (CMCC 1952) and Leo Rosenberg (CMCC 1961), were commended for providing the NZCA with "significant and voluminous information."²⁵

All witnesses brought before the Commission were subject to cross-examination under oath. One was a Canadian physician who was also an official of the Consumer's As-

sociation of Canada. Compelling evidence about this individual's credibility had been given to the Commission by the CCA Committee, resulting in his disqualification.

May 1979 signalled the inception of a new threat to Ontario chiropractors when Dr. Kenneth W. Taylor, a medical radiologist, issued a news report disclosing that patient x-ray exposures in some examining rooms of a large Toronto hospital differed by factors of up to 30, from exposures measured in other rooms.²⁶ Immediately, the Consumers Association of Canada, Canadian radiologists, physiotherapists and members of the provincial legislature used this as an excuse to denounce the chiropractic use of x-rays. In June, the Ontario Ministry of Health (MOH) asked the OCA to assemble a Chiropractic Advisory Committee. In October, the CCA published an extensive rebuttal to the Consumers Association of Canada titled, "The Chiropractic Need For X-ray." This brief was presented to the federal and all provincial ministers of health, all members of parliament and provincial legislatures, as well as media from coast to coast. That same month the Ontario MOH formed The Advisory Committee on Radiology. Chaired by Dr. R. Brian Holmes, Dean, U of T Faculty of Medicine, its mandate was to develop a comprehensive strategy for x-ray safety throughout Ontario. Tabling its report in March 1980, its recommendations contained elements of the new x-ray safety legislation within Bill 177 (The Healing Arts Radiation Protection Act, 1980) and the HARP Commission came into existence.²⁷

In November 1979, professional advisory committees were struck for medicine, chiropractic, dentistry, podiatry, osteopathy and x-ray technology. The chiropractic committee comprised Drs. R. Thurlow (Chair), R. Wingfield and Andrew Rainbow, PhD, McMaster University Department of Physics. It met regularly to develop an x-ray safety code for chiropractic x-ray facilities that would meet requirements yet to be determined by the Minister's advisory committee and was assisted by a sub-group drawn from the OCA, CCA, CMCC and the BDC. Ministry officials used Dr. Wingfield's clinic to assess the parameters of a typical chiropractic x-ray unit. "Much testing of exposures and darkroom procedures was done there in conjunction with Dr. Andrew Rainbow. An official later told me he was pleased that I was recording information from a pencil dosimeter and using an array of aluminum filters and lead shielding."²⁸

On February 8, 1986, the BDC in conjunction with

the OCA, presided over an intensive X-ray Legislation Seminar in Toronto, attracting chiropractors from all parts of the province. Moderated by Drs. Barnes and Donald Henderson (CMCC 1975), the speakers were Wingfield, Thurlow, Rainbow and Bert Vanderham (CMCC 1976). Topics included: The history of x-ray legislation in Ontario; HARP regulations; radiation doses and risks; how to comply with quality assurance requirements; and peer review of image quality. The work of the Advisory Committees and the HARP Commission ended in 1988.

Ontario Board of Directors of Chiropractic 1981-1987

Chiropractors in Ontario had been governed under the umbrella legislation of the Drugless Practitioners Act (DPA) since 1925. In 1952, the Ontario Government created the BDC. This was the first independent chiropractic regulatory body in the province. In 1974, Dr. Wingfield was part of the liaison group between the profession and the MOH, when the first six parts of a new Health Disciplines Act (HDA) which provided for an overseeing Health Disciplines Board and covered dentistry, medicine, nursing, optometry and pharmacy, were passed into legislation. At this juncture, Stephen E. West, DC, became Chair of the BDC.²⁹ The next government move was to strike a committee to make recommendations for chiropractors, optometrists, chiropodists and osteopaths (COCO). From then until he stepped down as Chair in 1984, Dr. West and BDC Vice-Chair Dr. Barnes, worked long and hard with OCA and CMCC reps, to negotiate with the MOH for new chiropractic legislation. [Steve West interview by the author, May 22, 2008] Barnes remembers attending 35 meetings, to no avail. Negotiations were difficult because the chiropractic profession was adamant that the scope of practice include diagnosis, the right to use x-ray and treatment of the nervous system. They were also complicated because in 1982 the MOH had established the Health Professions Legislative Review (HPLR) to examine 21 health professions, including those in the HDA legislation of 1974, rather than just four. [Fred Barnes interview by the author, Jan 29, 2009] Bob Wingfield recalls that, "Many meetings were held over a span of 18 years. It was like a great waltz. The government played the music while we danced on and on. We were getting nowhere but didn't want to stop the discussions." [Wingfield interview by the author re. Steve West, July 10, 2008]



Figure 7.
BDC Directors 1982
Seated L to R – F. Barnes,
S. West & K. Wood
Standing L to R – R. Wingfield,
D. Grant & S. Stolarski

In September 1981, Dr. Wingfield had been appointed to the BDC by an Order in Council of the Ontario Conservative Government and by 1982, was assisting with the arduous process of supplying briefs to the HPLR. The review explored many avenues of professional regulation but focused on: Identifying health professions to be regulated; developing frameworks for the operation of a governing body that are common to all health professions; and resolving scope of practice statements and licensed acts unique to each profession. Because 21 disciplines were being regulated, all possessed professional associations, regulatory bodies and possibly educational components, there were over 60 submissions for each round of HPLR requests. The BDC, OCA and CMCC submitted their individual briefs simultaneously, on each topic identified by the HPLR, but each from its own perspective. This involved extraordinary cooperation among the chiropractic organizations.³⁰

Wingfield recalls that, “David Chapman-Smith, LLB, had been hired as an expert advisor to the OCA and retained as a consultant to the BDC. David’s perspective and advice were invaluable in discussions with the review team on the subject of scope of practice.” Chapman-Smith had been introduced to chiropractic as counsel for the New Zealand Chiropractic Association, while appearing before the 1978-79 Commission of Inquiry into Chiro-

practic. In 1982, he took a two year leave of absence from his law partnership, arriving in Toronto in May, to aid the OCA in solving two puzzles.

The first involved protecting the rights of chiropractors to take diagnostic x-rays. David Chapman-Smith was the main protagonist in preparing an extensive submission for the Ontario Government. Wingfield says, “it is a remarkable document... and could only have been written by someone who had intimate knowledge based on the NZ Royal Commission and its positive cross examination findings about our profession.” [Email, Wingfield to the author, Dec 22, 2014]. It was also fortuitous that the Honourable Larry Grossman was MOH February 1982 to July 1983. Before becoming MOH he had opposed his predecessor Frank Miller’s decision to shut down the Kensington Hospital in Grossman’s riding, so he was the perfect politician to promote chiropractors taking diagnostic x-rays.³¹

Chapman-Smith’s second conundrum was more convoluted. It entailed drafting appropriate new chiropractic legislation under the previously mentioned HPLR of 1982. Now, instead of dealing with MOH representatives with whom they had interacted since 1974, the profession had to begin anew with an independent consulting body headed by lawyer Alan Schwartz. David Chapman-Smith originally thought the process would take two years, but deliberations were protracted and the new Regulat-

ed Health Professions Act (RHPA), containing the new Chiropractic Act, did not receive Royal Assent until December 1991. “However, it produced a new approach to regulating the health professions that was widely admired and subsequently followed in Alberta, then other provinces and internationally.” [Letter, Chapman-Smith to the author, Mar 21, 2012]

Dr. Wingfield remained a BDC Member until February 1986, when he assumed the role of Chair. In July 1986, the Board adopted an important policy revision on chiropractors use of the title “Doctor” on signage, letterhead, etc. This was in response to a complaint Wingfield had received on February 25, 1986, from John R. Carlisle, MD, Associate Registrar of the College of Physicians & Surgeons of Ontario (CPSO). The CPSO had canvassed a large number of Toronto chiropractors whose phones were answered, “Dr. so and so’s office” and Dr. Carlisle wanted the board to order the offenders to cease and desist referring to themselves as “Dr” and report back to assure him of their future compliance.

This was consistent with long standing BDC policy and with what Bob had been taught in Ontario jurisprudence lectures at CMCC, but the process rankled him and he restudied an “Office Consolidation” edition of the DPA to better comprehend the intent of its authors.³² In Chapter 137, 6 (f), under Regulations, Bob noted that the Board may make regulations “for designating the manner in which a person registered under this Act may describe his qualification or occupation...” and under Regulation 228, Designation 13, he saw that “As an occupational designation chiropractors may describe themselves as chiropractors only” and came to the realization that neither the DPA, the Regulations nor for that matter the Medical Act, prohibited a qualified chiropractor from using the title “Doctor,” as long as registrants also identified themselves as being chiropractors.

Wingfield rationalized that these facts empowered the Board to establish policy in this regard. The BDC and its solicitor, Donald J. Brown, QC, agreed with Bob’s recommendations. This precedential policy was transmitted to the OCA executive and then carried forward into the HPLR discussions.

The BDC had been located at 20 Prince Arthur Avenue, Toronto, for decades. In December 1986, it relocated to a larger, modern office space at 130 Bloor Street West and February 13, 1988, Robert Wingfield’s position as Chair and last term as a Director on the Board expired.

In December 1991, the RHPA, including the new Chiropractic Act, received Royal Assent and chiropractors were listed among the few self-governing health professions with a defined scope of practice that includes diagnosis and the definitive right to use the title “doctor.” Among the controlled acts are, “communicating a diagnosis” and “moving the joints of the spine beyond their usual range of motion using a fast, low-amplitude thrust.”³³

December 31, 1993, the RHPA was proclaimed and the BDC replaced by the College of Chiropractors of Ontario (CCO) which had its first meeting March 26, 1994. In 1995 Steve West was called upon to join the CCO Education Committee. Headed by Bertram L. Brandon (CMCC 1966), the Committee orally evaluated graduates applying for licensure in Ontario, primarily on their clinical skills. Steve could not remember anyone failing this exam however, they were soon entangled in a more exhaustive process and Wingfield was brought aboard.

The new system involved testing nine candidates at a time, but in separate rooms, by nine examiners and nine patient/actors simulating the same condition. Each room contained video equipment and an adjusting table. Applicants were given the scenario to be played by all the actors. They were expected to conduct a consultation and examination, arrive at a diagnosis, simulate an adjustment and/or provide advice regarding nutrition, home remedies and future treatment. All proceedings were video-taped and the candidates graded by the examiners. Afterwards, the examiners themselves could be evaluated on the appropriateness of their findings.

The new approach was described as complex, costly, time-consuming and unnecessary, because the candidates were being tested on areas that had been thoroughly covered by the respective chiropractic educational institutions. In addition, they had passed the National Boards set by the Canadian Chiropractic Examining Board (CCEB) and should have been tested on their knowledge of the laws in Ontario. In 1999 the Education Committee was disbanded, ending Dr. Wingfield’s tenure with the CCO.

Insight

Dr. Wingfield may wear glasses to read but his vision into the future can be startling. Ontario Chiropractors achieved partial coverage of their services under OHIP on July 1, 1970. At the OCA annual meeting in September, President Wingfield congratulated the membership for

enabling this “quantum leap forward in public and professional respectability” but warned, that “health care costs are sky-rocketing” and increased demands for chiropractic services are “inevitable” now that some are covered by OHIP. “We must agree to hold the line on our fees ... We must co-operate with other health delivery groups to reduce costly duplication of services.” Because the government is paying chiropractors’ bills “we can expect to be dissected and examined more closely than ever.” Bob finished by assuring the audience, “We have nothing to fear providing our training is sound and our standards high.”³⁴

Despite the fact chiropractors received their last fee-for-service increase of 15 cents in 1989, freedom of accessibility was maintained until December 1, 2004 when the Progressive Conservative Party was overturned and chiropractic care completely de-listed by the Liberal Party under Premier Dalton McGuinty. In an interview by the author July 10, 2008, Wingfield made the following paraphrased statements:

Our profession has always talked to the government about the need for more money and larger fees; never about accessibility. The Liberal Government replied: Sorry, we can't afford your services. Goodbye!

Chiropractors are not proactive in regards to planning for health care. We need advisers to tell us what government policy will be in the future so we can prepare. One way is by cultivating political networking.

In the last four decades we have lost public acceptance while gaining far more scientific legitimacy. Now our equilibrium seems to have returned and public favour is slowly responding.

Scientific legitimacy has been won through research. Twenty years ago Allan C. Gotlib, CM, DC (CMCC 1976), Director of Research for the CCA and Editor of the JCCA, had the intellect and drive to begin expanding the profession’s research capacity by establishing university-based Chiropractic Research Chairs and Professorships from coast to coast in Canada. Greg Kawchuk, DC, PhD (CMCC 1990), assumed the first chair at the University of Calgary, AB, in 2001 and Simon French, BApp-Sc(Chiro), PhD, University of Melbourne, Australia, be-



Figure 8.

CMCC President, David J. Wickes signs a Memorandum of Understanding with 3 faculties at the U of T. Photograph courtesy of the University of Toronto.

came the 15th chair at Queen’s University, Kingston, ON, in 2013.³⁵ By the end of 2014, the profession had 30 DC, PhD’s in full-time research and 19 DC, PhD candidates training in university-based PhD programs across the country.

CMCC’s research agenda is geared toward elevating the quality of patient outcomes and has three on-site centres: The Centre for the Study of Mechanobiology; the Centre for Inter-professional Health Dynamics; and in 2013, the University of Ontario Institute of Technology (UOIT) – CMCC Centre for the Study of Disability Prevention and Rehabilitation. Campus labs support these centres by exploring biomechanics, neurophysiology, cellular biology and histology. Since 2011, the College has encountered a surge in the number of universities interested in some form of mutual cooperation. In 2011 CMCC developed an arrangement with the Anglo-European College of Chiropractic, Bournemouth, England; in 2012, CMCC penned its inaugural articulation agreement with the UOIT; in May, 2014, the College inked a similar agreement with the University of Winnipeg. On October 27, 2014 CMCC approved a Memorandum of Understanding with the Hong Kong Baptist University and on December 4, 2014, our new President David J. Wickes, DC (NCC 1977), MA, signed a Memorandum of Understanding with the University of Toronto, through the Faculty of Medicine, Leslie Dan Faculty of Pharmacy,

and the Faculty of Kinesiology and Physical Education, to explore education and research collaboration.³⁶

Acclaim

Wingfield's efforts have not gone unnoticed. In 1972, Bob earned the title OCA Chiropractor of the Year, in 1983 he was named a CCA Honour Member and in 1988 he received a HARP Service Award. Feb 29, 1992, was particularly pleasant. That day, 400 OCA members and friends, flocked into the Bristol Place Hotel, Toronto, to celebrate passage of the new Chiropractic Act. Many people were thanked for giving of themselves to make this dream come true, but it was acknowledged that 10 stalwarts deserved special commendation. These were: Drs. Colin Greenshields, Lloyd Taylor, Lloyd MacDougall, Harold Beasley, Don Sutherland, Leo Rosenberg, Herb Vear, Steve West, Fred Barnes and Bob Wingfield.

Wingfield is aware that his chiropractic administrative adventures flourished because he was surrounded by colleagues who cheerfully accompanied him on this long, tortuous journey. Bob gives his wife Anne credit for much of his good fortune, asserting his involvement would not have been as pervasive without her devotion and expertise at orchestrating the minute details of their private domain. Anne was prolific in her own political realm. In three municipal elections she received more votes than any of the other candidates and was elected to the Burlington Hydro Electric Commission four times, assuming the chair on three occasions. Anne belonged to five different City of Burlington sub committees and chaired one. She was appointed as a Public Member of the College of Audiologists and Speech Language Pathologists of Ontario and is an Honorary Life Member of the Burlington Historical Society. In 1993, The Honourable Henry Jackman, Lieutenant Governor of Ontario, presented Anne with, "The Queen's Medal to Commemorate the 125th Anniversary of the Dominion of Canada." This was "awarded to those persons who have made a significant contribution to Canada, Their Community and to Their Fellow Canadians."

Recreation

From 1958 until he sold his business in 2002, Dr. Wingfield practiced Monday, Tuesday, Wednesday and Friday, theoretically giving him lots of free time for leisure activity. In his first decade Wingfield golfed frequently on

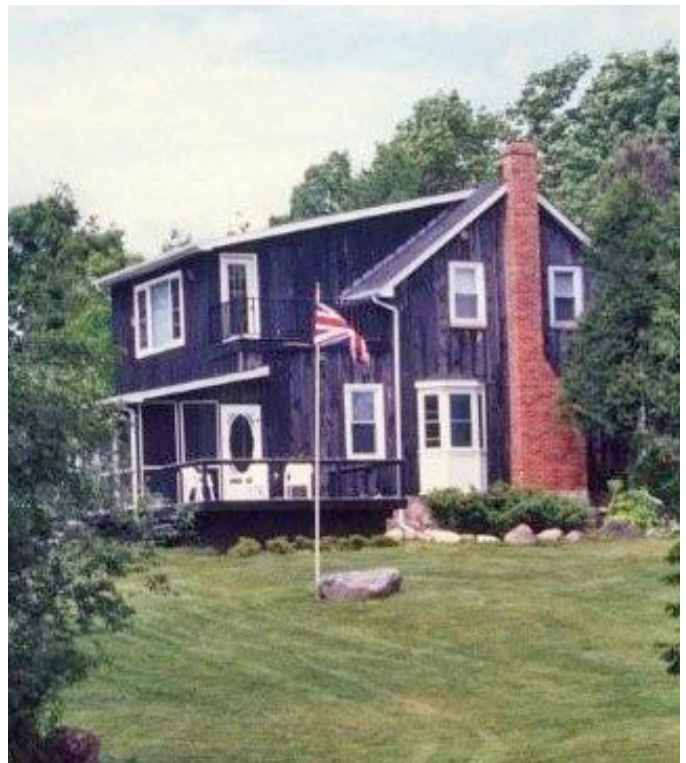


Figure 9.
The Wingfield family's country home on the farm they call Backacres

Thursdays with local chiropractors Don Moore, Earl Sawyer, Yosh Sugimura, Jim Barrow, Mert Holmes and Vern Thompson. That was until sailing caught Bob's eye and then, true to form, he became an enthusiast. With a newer and larger boat every few years, he and Anne ended up with a Cuthbertson & Cassian (C&C) 27 ft. yacht. Now, instead of golfing on Thursdays he sailed with his friend Dr. Dick Wynn. After mooring at the Burlington Sailing and Boating Club, they returned to Dick's home on Lakeshore Road, where they talked shop and exchanged adjustments. Weekend cruises were with his family, mainly on Lake Ontario, but also in the North Channel and once chartering a boat to sail in the Virgin Islands.

Sailing was curtailed for the Wingfields after 1970, when they purchased an abandoned, 100-acre farm in Grey County, they call "Backacres" and Bob took courses at the University of Guelph to find out what to do with it. They decided to take advantage of the Ontario Govern-

ment's tree planting incentive and raise several thousand trees instead of cows, because they don't require fences or pasture. In 2005, they had their first commercial logging operation, which took six weeks to complete.

Built in 1870, the farmhouse was in poor condition, the barn had been taken down to the stone foundation and there was much to be done, indoors and out. Everyone pitched in, including their three children, who were all under 10 years of age. "Winter access from the county road by car was impossible so we trekked in by snowshoe, pulling a sled filled with our supplies and tools." Purchasing all the wood from a dismantled Anglican Church, they transported it to their property in a borrowed hay wagon one summer and spent the next few years rebuilding a storage barn on part of the old foundation.

The Wingfields' farmhouse is heated by electricity but they have a fireplace which consumes a lot of wood that is stored in a purpose-built woodshed. Originally they felled the trees with chain saws and split the wood with axes. Inevitably there were wood splitting competitions. As the ménage has grown through marriage, there are no longer any contests but rather work parties of three generations, just to fill the woodshed. "When the whole tribe is here, it is customary to play board games on the dining room table and on a recent Thanksgiving weekend, the traditional day trip to Blue Mountain or Beaver Valley was supplanted by a long hike along the trails of our own forests." [Wingfield email to the author, Feb 23, 2015]

Semi-Retirement

In 2002, Dr. Wingfield sold his practice and later his office and now (2015) practices Monday evenings and Wednesday mornings. He has served on Municipal Committees and is currently a member of the Burlington Conservative Association and the Burlington Waterfront Committee. Bob's family is close, because he has applied the same principles around the dining table that he did around the board room table; namely treating others with respect, preserving dignity, taking responsibility and expecting the same in return.

For decades, Bob has been accumulating information about his father's exploits in WWI and in 2014 it culminated in the publication of Bob's book, "Frederick Cecil Wingfield In The Great War, 1914-1918." Inquisitiveness about this subject dates back to his childhood when WWII, dominated the news. Wanting to compare that



Figure 10.
Anne & Bob relaxing on their balcony in Burlington

with WWI, Bob asked his father a lot of questions. His children were fond of their grandfather and also curious about his past. Now Anne and Bob's grandchildren have accepted the challenge. Hayley, their eldest granddaughter, is in her fourth year at Queen's University, majoring in history and doing tutorials on WWI.

Bob's concentrated probes for explicit data "included two trips to European war sites (one with our son David and one with Anne) and extended correspondence with a noted author of 12 war history books." In 2013 Bob wrote a full draft with the intent of passing it along to his father's family tree. "I really had not considered publishing a book. I thought it was beyond my competence."

The Wingfields' son-in-law, Brian Forsey and daughter Candace saw the draft and offered to find a print shop and manage the technical details to publish the book. The idea caught on and their other son-in-law, Rob Coulman and daughter Alison, volunteered to do the formatting, layout and initial editing, while Hayley attended to the bibliography. David had been editor of the Queen's Law Review and with a long history of writing legal briefs, he suggested the editing principles Bob should follow to ready the volume for final revision. "As it turned out, there were nine sets of revisions. Had our family not banded together, this book would not have been published." [Email, Wingfield to the author, Feb 2, 2015]

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